BREAST CANCER IS ON THE RISE

in Latin America and the Caribbean

Early Detection is the Leyto Protecting Yourse



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Breast Cancer is on the Rise in Latin America and the Caribbean

A PALIG Guide



KeyTakeaways



- **Latin American and Caribbean Women are at higher risk:** Women in LAC get breast cancer at younger ages and are diagnosed when the cancer is at more advanced stages.
- **Early Detection = Very High Survival** if breast cancer is caught early, when it has not yet spread outside of the breast, the 5-year survival rate is close to 99%⁵.
- Regular Screening is Essential: The # 1 way to find breast cancer early and reduce your risk of dying from breast cancer is to get screened. You should be getting a mammogram every year or every other year, depending on your age. Monthly breast self-exams are a good way to identify changes that might need a closer look from your doctor, and with regular mammogram screenings will help find cancer in their earliest stages.
- Overcome Your Fears: Some women avoid screenings because they are afraid that they might be diagnosed with cancer. This is normal, but should not keep you from getting your mammogram. Experience shows that: talking about your fears with close friends, scheduling your mammogram with someone else (the "buddy system") and rewarding yourself when you've followed through with your screening are effective ways to overcome your fears.
- **A Healthy Lifestyle Helps:** Having a healthy body weight, staying physically active and minimizing or avoiding alcohol, can lower your risk of breast cancer.
- **Do Not Delay Care:** If you notice a change in your breast, or are diagnosed with breast cancer through screening, seek medical care. Early treatments have the best outcomes.







This guide is written primarily for women, who experience 99% of all breast cancer cases.

If you are the husband or male relative/friend of a woman that could benefit from this information, please share it with her. We also encourage you to read through this information together as a couple -- for the benefit of you both, and your

family.

In this brief report, we will address three main questions:



- **2.** What **specific actions** you can take to minimize your risk of getting advanced breast cancer?
- 3. What **PALIG** is doing to support you?

First, a few breast cancer basics.



Breast Cancer Basics

Breast cancer is a disease in which abnormal cells in the breast grow out of control and form a tumor. If the cancerous tumor is not diagnosed and/or treated soon enough, it can grow larger. It can also spread to other parts of the body; if it does, it is said to have **metastasized**.

> There are over **210,000** new diagnoses of breast cancer in Latin America and the Caribbean, and nearly

68,000 deaths annually.

And the number of breast cancer deaths in LAC are expected to double between 2022 and 2042¹.

Women in Latin America and the Caribbean get breast cancer at younger ages and tend to have more advanced disease when it is first diagnosed compared to those in the U.S. or Canada^{2,3}.

Catching Breast Cancer Early is Key and results in nearly 100% survival!

If breast cancer is detected early, when it has not yet spread beyond the breast, the 5-year survival rate is close to 99%!⁵. However, if the breast cancer has metastasized to other parts of the body, the survival rate drops to just 30%.

So, it is clearly better to diagnose breast cancers earlier rather than later. Unfortunately, for many women in Latin America and the Caribbean, this is not their experience. In fact, women living in Latin America and Caribbean are more than twice as likely to have advanced breast cancer at first diagnosis compared to women in Western European countries.

Breast cancer screening rates fell dramatically during the COVID-19 pandemic and because of this, we are now seeing more advanced cases of first diagnosed breast cancers than in pre-pandemic periods review⁶.



IMPORTANT NOTE: This information is provided to help assist you in understanding the signs and symptoms of breast cancer – you should always consult with your doctor if you have any concerns and follow their advice

What You can Do to Minimize Your Risk of Getting Advanced Breast Cancer

There are three main things you can do to minimize your risk of getting or dying from advanced breast cancer:

- 1. Understand breast cancer **risk factors** and how you can lower your risk
- 2. Get regular **screenings**, especially mammograms
- 3. Seek timely treatment and care if you are diagnosed

Breast Cancer Risk Factors

There are two main categories of breast cancer risk factors, ones that you can control or change and ones that you cannot change⁷.

It is important to talk with your doctor about your family history of breast cancer, and other factors listed in Table 1 to have a good understanding of whether you are at "average" or "high" risk for breast cancer.

Risk factors that you can change

Fortunately, there are some things that have been clearly shown to be associated with breast cancer that you <u>can</u> control. According to the American Cancer Society, three of the most

important of these are:

Drinking Alcohol

Drinking alcohol has been clearly linked to an increased risk of breast cancer. Each alcoholic drink per day on average increases a women's risk by about 10% compared with those who don't drink.

Being overweight or obese

Being overweight or obese after menopause increases breast cancer risk.

Not being physically active

Evidence is growing that regular physical activity reduces breast cancer risk, especially in women past menopause.







Table 1 – Important breast cancer risk factors – a partial list

Summary of Risks for Breast Cancer

The following Table 1 shows a summary list of some of the more important breast cancer risk factors.

Risk Factors You Can Change

- Drinking Alcohol
- Being overweight or obese
- Not Being Physically Active
- Hormonal Contraceptives (Estrogen-Progesterone)
- Menopausal hormone therapy

Risk Factors you Can NOT change

- Family History of Breast Cancer
- Having started menstrual periods early
- Going through menopause later
- Inheriting certain gene changes, e.g. BRCA1 or BRCA2



"Take Action"

- Review the List of Breast Cancer Risk Factors with your primary care doctor
- Understand if you are at "average-risk" or "high-risk" for breast cancer based on the things you cannot change, like your family history and age at menarche
- Take charge of the risks that you can change, e.g. drinking less alcohol, or getting to a healthy body weight.

Early Detection of Breast Cancer

Getting regular screening tests is the most reliable way to find breast cancer early. Breast cancers found during screening mammograms are more likely to be smaller and less likely to have spread outside the breast.

Mammograms

Women who have regular mammograms are more likely to have breast cancer found earlier, are less likely to need aggressive treatments like surgery to remove the entire breast (mastectomy) and chemotherapy, and are more likely to be cured.



How often a woman should get a mammogram depends on her age and risk-level for getting breast cancer (See Table 1 for risk assessment).

It is very important that you consult with your primary care doctor to develop a personal schedule for when you should start getting mammograms and how often you should get them.

Table 2 below here presents general guidelines and recommendations for when and how often women should get mammograms.

Table 2: Mammogram Guidelines by Age

Age (Years Old)	Mammogram - Frequency
At 35	Get a baseline mammogram, especially if you are high risk for breast cancer
35 - 44	Every two years, or annually if high risk
45 - 54	Annually – every year
55 - 74	Every two years, or annually if your doctor recommends every year
74+	Consult with your doctor



Again, these are guidelines – it is important that you discuss your individual needs and make a schedule with your doctor⁸.

It is also critical that you follow this schedule – don't skip or delay getting a mammogram if you are due.



Clinical breast exam (CBE) and breast self-exam (BSE)

A clinical breast exam (CBE)

is an exam of the breast by a doctor or other health professional. He or she will carefully feel the breasts and under the arms for lumps or anything else that seems unusual. It is not known if having clinical breast exams decreases the chance of dying from breast cancer.

Breast self-exam (BSE)

A breast self-exam is a step-by-step method women can use to examine their breasts for lumps or other changes.

PALIG has created a short video on the right way to do a breast self-exam that you can find here **LINK**

Detailed instructions on breast self-exams are also available from your doctor and top healthcare organizations like the Cleveland Clinic⁹.

If you feel any lumps or notice any other changes in your breasts, talk to your doctor.

How often and when to do breast self-exams

Experts recommend doing breast self-exams monthly.

Women who are still menstruating (having a regular period) should perform a breast self-exam after their period. Women who have stopped menstruating and those who have very irregular periods can pick a day each month. Choose a day that is consistent and easy to remember, like the first day of the month, the last day of the month or your favorite number.

Breast self-exams do NOT replace other screening tests

Monthly breast self-exams are important for breast health, but they should not replace exams and screening tests (such as mammograms) recommended by doctors.

You should continue to get your regular mammograms and other screening tests even if you do monthly breast self-exams and do not notice any lumps or changes.

Mammograms can pick up early stage breast cancer before you can feel or see anything using a breast self-exam.



Some women avoid mammograms because they are afraid that they might be diagnosed with cancer. This is normal, but should not keep you from getting your mammogram.

Some of the most effective ways to overcome your fears and follow through on your screening are presented in the Box.

Overcome YOUR FEARS



Keep in mind

if breast cancer is caught early, when it has not yet spread outside of the breast, the survival rate is close to 100%!.



Try to think of mammograms as part of your regular health routines.

Like your annual physical, pap smears, or even dental cleanings, try to think of mammograms as just a normal part of health maintenance. Scheduling your mammogram, the same week as one of these other routine exams can help.



Talk with Friends:

Share your fears and nervousness with close friends or trusted medical or mental health providers. Try not to keep your nervousness to yourself.



Find a Buddy:

Arrange with a close friend or a female relative to schedule your mammograms together. Hold each other accountable to follow through with your appointments. This "buddy system" has been shown to be very effective.



Reward Yourself:

Treat yourself when you've gotten your mammogram. You and your buddy can go to a special lunch. Or, practice self-care and reward yourself with a massage, facial, or shopping for something special the same day.



Take Action

- Talk with your doctor about when you should start and how often you should be getting mammogram screenings.

 Most women 45-74 should be getting mammograms every year, or every other year.
- Make an appointment and get a mammogram if you are due, especially if you had delayed your screening because of the pandemic.
- Acknowledge and talk with others about any fears or nervousness you may have about getting screened – consider using the "buddy system" and rewarding yourself for completing your exams.
 - Do breast self-exams monthly. Let your doctor know if you feel any lumps or notice any changes.

Timely Treatment

If you've been diagnosed with breast cancer, your doctor and cancer care team will discuss treatment options with you that align with your individual needs and situation.

Some women in LAC that are diagnosed with breast cancer choose to delay their treatments because they are afraid of the what the treatments, embarrassed or too busy with work or family unless the treatment finds definitive diagnosis ¹⁰.

The research is clear: delaying treatment after being diagnosed with breast cancer is associated with worse outcomes and higher risk of dying from the disease¹¹.

SOURCES

- 1 Cazap E. Breast cancer in Latin America: a map of the disease in the region. Am Soc Clin Oncol Educ Book. 2018; 38 (American Society of Clinical OncologyAlexandria, VA): 451-456
- 2 de Lemos LLP et al. Stage at diagnosis and stage-specific survival of breast cancer in Latin America and the Caribbean: A systematic review and meta-analysis. PLoS One. 2019 Oct 16;14(10):e0224012. doi: 10.1371/journal.pone.0224012. PMID: 31618268; PMCID: PMC6799865
- 3 https://www.paho.org/en/topics/breast-cancer
- 4 Defined as likelihood a woman will live at least 5 more years.
- 5 https://www.cancer.org/cancer/types/breast-cancer/understanding-a-breast-cancer-diagnosis/breast-cancer-survival-rates.html
- 6 Li T et al. A systematic review of the impact of the COVID-19 pandemic on breast cancer screening and diagnosis. Breast. 2023 Feb;67:78-88. doi: 10.1016/j.breast.2023.01.001. Epub 2023 Jan 5. PMID: 36646004; PMCID: PMC9813855..
- 7 https://www.cancer.org/cancer/types/breast-cancer/risk-and-prevention/breast-cancer-risk-factors-you-cannot-change.html.
- 8 CDC 2023. USPSTF (May 2023)
- 9 https://my.clevelandclinic.org/health/diagnostics/3990-breast-self-exam
- 10 Pinto JA et al. Barriers in Latin America for the management of locally advanced breast cancer. Ecancermedicalscience. 2019 Jan 22;13:897. doi: 10.3332/ecancer.2019.897. PMID: 30792814; PMCID: PMC6372299.
- 11 Chavez-MacGregor M, Clarke CA, Lichtensztajn DY, Giordano SH. Delayed Initiation of Adjuvant Chemotherapy Among Patients With Breast Cancer. JAMA Oncol. 2016

 Mar;2(3):322-9. doi: 10.1001/jamaoncol.2015.3856. PMID: 26659132; PMCID: PMC5920529.



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