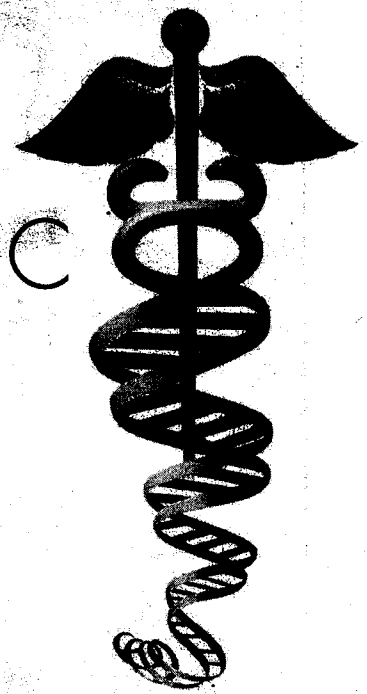


THE HIGH RISK BREAST CLINIC

Education,
Risk Assessment,
and Counseling



by Libby Carty **McNamee**

The High Risk Clinic within the Center for Breast Care at Richmond Surgical Group has a unique mission. It doesn't treat those suffering from breast cancer. Instead it is geared towards people who are cancer-free but concerned about breast cancer in the future. Many patients of the Clinic have had cancer previously or their parents have had it. However, anyone is welcome, male or female.

"The Internet is a wonderful source of information, but it can be misleading and frighten people unnecessarily," cautions the Clinic's founder, Susan Uhle, who is a nurse practitioner with a master's degree in psychiatric and mental health nursing. "Through the Clinic, we are striving to provide current and accurate information to put some patients' minds at ease while alerting others to previously unknown risk factors. Our goal is to educate the community and supplement information given by referring physicians, all to further the trend towards prevention or early detection."

A survivor of malignant melanoma herself, Susan knows too well what it feels like to have cancer. Disturbed that "many women have a high anxiety level about breast cancer and often overestimate their risk of developing and dying from it," she sprang into action, founding the Clinic one year ago. Susan states, "What most people don't realize is that while breast cancer is the most commonly diagnosed malignancy in women, the majority of women do not develop the disease. In fact, the average woman's risk of breast cancer is 12 percent over her lifetime, a one in eight chance."

The Clinic offers a complete range of services for new patients. In addition to a physical examination and a thorough risk assessment, they also offer counseling. Susan explains, "Beyond medical treatment, beyond surgical treatment, there is what I call the 'subterranean experience' on the emotional level, which only another individual who has been through it can provide."

The Clinic uses several criteria to determine a patient's overall risk. The first and most important risk factor is gender. Although men can develop breast cancer, women are much more likely. The second risk factor is age. The risk of breast cancer for women increases substantially with advancing age. In fact, 95 percent of all new cases involve women over 40. The third risk factor is the patient's personal and family history. The threat is elevated if the patient has had breast cancer previously. If a first-degree relative (parent or sibling) of the patient has had breast cancer, the risk is doubled. Lastly, if two or more second-degree relatives (aunts, uncles, etc.) have developed breast cancer, the risk is considered

triple, regardless of the status of first-degree relatives.

In addition, the Clinic uses the Gail computer model to determine a patient's general risk. While helpful, those results are limited because they do not incorporate the father's family history, any Jewish heritage, or any history of ovarian cancer.

For those patients determined to be at substantially increased risk, the Clinic offers education about lifestyle changes as well as aggressive preventative treatment through medication and closer surveillance. Women can have surveillance through MRIs, chemoprevention via drugs, and in some cases prophylactic surgery that reduces the risk significantly, almost by 90 percent.

Susan also cautions, "Five to 10 percent of cases arise because of an inherited genetic mutation, a defect in the hard drive, not because of any external factors." Although relatively uncommon, this mutated gene for hereditary breast and ovarian cancer (HBOC) amplifies a woman's risk to as high as 86% over her lifetime. The Clinic tests those patients at risk of carrying the mutation and also offers genetic testing to anyone with pre-menopausal breast cancer or whose overall risk is greater than 10 percent. Susan comments, "Between the Gail model and the HBOC test, I think we catch most people."

In order to decrease the risk, the Clinic urges every woman regardless of age to conduct a monthly breast self-exam. It also recommends an annual exam with a health care provider and a baseline mammogram between ages 35 and 40 with one following every year thereafter. Other guidance is to make certain lifestyle adjustments, such as keeping one's body mass index below 25 and exercising four or more times weekly. In addition, since studies have shown an association between alcohol consumption and increased risk for development of breast cancer, the Clinic advises its high-risk patients against having more than one drink per week.

For further information, contact the High Risk Clinic at 804-285-9416 or visit richmondsurgical.net, cancer.org, or komen.org. **V**

Libby Carty **McNamee** is a local freelance writer, filled with admiration and respect for the High Risk Clinic, and now committed to conducting monthly breast self-exams.