

Perspective Article

The Lack of Advocacy Related to the Impact of African Americans with Breast Cancer

Danita Tolson*

Department of Nursing, Health & Human Science Building, North Ave, Baltimore, Maryland, USA

*Corresponding author: Danita Tolson, Department of Nursing, Health & Human Science Building, 2500 West North Ave, Baltimore, MD 21216, USA, Tel: +1 4103406743; E-mail: dtolson@coppin.edu

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Abstract

The Center for Disease Control (CDC) and National Cancer Institute (NCI) reports a decline in the number of breast cancer deaths, and women living longer, as a result of the increase in breast cancer education, earlier detection, better technology and improved treatments; however, there is growing concern in the annual number of reported new breast cancer cases within the minority communities. Many minority women are hesitant to complete the screening process because of financial concerns, misinformation about the process, fear of the results or religious beliefs. This article will focus on themes of African American women who reported a lack of advocacy to get screenings and treatment. In 2014, there were 236,968 women diagnosed with breast cancer in the United States and 41,211 women died of breast cancer.

Keywords

African American Women and Physician; Biopsy; Breast Cancer; Chemotherapy; Magnetic Resonance Imaging (MRI); Radiation

The Centers for Disease Control and Prevention [1] reports 236,968 women and 2,141 men diagnosed with breast cancer in 2014. Although, the Centers for Disease Control and Prevention and the National Cancer Institute reports breast cancer has declined, breast cancer is the most common cancer in African American women and ranked as the second most common cancer that causes death among African American women [1-3]. Several African American women have reported a lack of advocacy when seeking breast cancer screenings, after being diagnosed with breast cancer and seeking treatments. The article will reveal the lack of advocacy and focus on themes of all four women.

Three African American women share stories of the lack of advocacy related to breast cancer. One young African American woman diagnosed before the age of 33 reported scheduling

multiple appointments with her physician who stated, she was too young to have breast cancer. The young African American woman insisted that something was wrong. The woman showed the physician the lump; after palpating the lump the physician still insisted the woman was too young to have breast cancer. The doctor provided a referral for a mammogram. The mammogram results revealed the woman had a lump. Even after the mammogram, the physician again insisted she did not have cancer. The woman insisted that she have a MRI and a breast biopsy. The results of the biopsy revealed the young woman had cancer.

The second woman reported although she did not know much about breast cancer, she knew something was abnormal about her breasts. She scheduled an appointment with her physician and was told she did not have cancer. She returned later in the year with the same complaint to her physician. The physician referred her for additional screenings, MRI, then biopsy.

The third woman reported to her physician that she had an abnormal growth under her arms and a lump in her breast. This woman also reported that she knew little about cancer. The physician told the woman she had the abnormal growth under her arms for years; he stated he did not expect the growth was cancerous. The woman went for a MRI then biopsy. The results of the biopsy was positive for cancer. The woman was referred for aggressive radiation and chemotherapy treatments. The woman went into remission but was later told her breast cancer returned and the cancer metastasized throughout her body. The woman started the chemotherapy and radiation treatment again, but later decided to stop the treatments; she stated she believed God would heal her. The woman died at age 37 and left behind five daughters and one son who were all under the age of 20 years old. The fourth woman, younger than 35 years old, called her physician's office about an abnormal lump in her breast. The office gave her an appointment that was a few months later. When talking to her physician, the physician stated he did not suspect she had cancer. The woman was later diagnosed with breast cancer, after the

biopsy. She also started aggressive radiation and chemotherapy treatment; she also believed God would heal her. This woman later died after a recent marriage.

All four women had common themes. The common themes of the African American women were: the physicians did not listen to the clients, noticed something abnormal with their breast, tested positive for breast cancer, were women, were African Americans, and referred for mammograms, biopsies, and MRIs. Two of the women were nurses, three women were younger than 38 years old, two women died, two women stopped treatment, two women lacked information and all the women believed God was a healer. None of the women reported that the physicians were advocates for diagnoses and treatment.

Early detection of breast cancer is important and could possible save lives. Physicians should refer patients for breast screening, when breast abnormalities are palpated. Patients can be referred for a mammography, breast ultrasound, breast MRI, and biopsy to have additional confirmation of the diagnosis.

Although, breast cancer is the second most common cancer for African American women, the American Cancer Society [2,3] announced new breast cancer guidelines for women. The new breast cancer guidelines for breast cancer states that women do not have to perform yearly mammograms [2,3]. The American Cancer Society recommends that yearly mammograms begin at age 45 and every other year after age 55 [1-3]. In addition, the American Cancer Society no longer recommends self-breast exams or breast exams performed by physicians [13]. If all the women did not perform the self-breast exams, all four of the women may have died. Performing self-breast exams was the first line of early detection.

Breast cancer has decreased in Caucasians because of early detection and treatments [1-3]. Many people are surprised with the

American Cancer Society's recommendations after the Centers for Disease Control and Prevention [1] and National Cancer Institute [4] statistics were that the African American population continue to have increased cancer incidences [5]. Breast cancer for African American females in 2008 to 2012 was 124.3, in 2009 to 2013 was 125.1, and 2010 to 2014 was 30.0 per 100,000 population [2].

Although the American Cancer Society, the Centers for Disease Control and Prevention and the National Cancer Institute provides data, additional information is needed on breast cancer that focus on the African American population related to the lack of advocacy, improving educational resources on early breast cancer detection and reasons African Americans stop treatment. Every woman performed a self-breast exam and was able to detect breast abnormalities. All the women reported an abnormal growth, unfortunately, all four women reported that all the physicians did not take the time to listen and advocate; therefore, resulting in two of the women dying. Self-breast exams are necessary for early detection.

References

1. Centers for Disease Control and Prevention (2017) Breast Cancer Statistics. Centers for Disease Control and Prevention Atlanta, USA.
2. American Cancer Society, Inc. (2016) Incidence and death rates for selected cancers by state, US, 2008-2012. American Cancer Society, Inc. Atlanta, Georgia, USA.
3. American Cancer Society, Inc. (2017) Incidence Rates* for Selected Cancers by Race and Ethnicity, US, 2009-2013. American Cancer Society, Inc. Atlanta, Georgia, USA.
4. National Cancer Institute (2017) Study estimates number of U.S. women living with metastatic breast cancer. National Cancer Institute USA.
5. Yedjou CG, Tchounwou PB, Payton M, Miele L, Fonseca DD, et al. (2017) Assessing the Racial and Ethnic Disparities in Breast Cancer Mortality in the United States. *Int J Environ Res Public Health* 14: 486.