

Breast Cancer: Myths vs. Facts

October is Breast Cancer Awareness Month. This time of year is typically flooded with shades of pink as people come together to raise awareness about the impact of breast cancer. Despite the awareness campaign, however, there is information surrounding breast cancer that is sometimes misunderstood or misconstrued. Dr. Jilma Patrick, a fellowship-trained breast surgeon at OSF HealthCare Little Company of Mary Medical Center in Evergreen Park, Illinois, debunks breast cancer myths and discusses the importance of mammograms.

Two common myths in particular that Dr. Patrick frequently educates her patients on involve the use of certain deodorants or underwire bras, based on certain metals sometimes used in both. Many women fear that both of these things can put them at a greater risk for breast cancer. This, however, is not the case.

Jilma Patrick, M.D., Fellowship-Trained Breast Surgeon, OSF HealthCare

“As of today, as of this point, there is no evidence out there to link wearing a bra and breast cancer. And in terms of antiperspirants, there is ongoing research that looks at any possible link between the two, but present day there is no correlation between antiperspirants and breast cancer.” (:22)

Another common myth involves sugar consumption. While eating healthily is one important way you may be able to lower your risk of breast cancer, indulging in a sugary treat now and then does not necessarily put you at a higher risk. According to the American Cancer Society, all cells, including cancer cells, depend on blood sugar (glucose) for energy. But giving more sugar to cancer cells doesn't make them grow faster and starving them of sugar doesn't make them grow slower.

Jilma Patrick, M.D., Fellowship-Trained Breast Surgeon, OSF HealthCare

“While it is true that we know cancer cells consume glucose much quicker than normal cells, but there has been no study that has proven that if you digest or consume a large portion of sugar or have a high sugar diet that it increases your risk of breast cancer.” (:21)

While there is not one specific cause of breast cancer, the best thing women can do for continued breast health and breast cancer prevention is get an annual mammogram. Despite this advice, during the COVID-19 pandemic, many women across the country delayed their annual screening mammograms. According to the Journal of the National Cancer Institute, mammograms dropped as much as 80% at certain times during the pandemic. As a result, experts anticipate nearly 2,500 additional deaths from breast cancer by 2030. Dr. Patrick strongly urges women over 40 who have not gotten a mammogram in the last year to schedule one now. She reminds patients that screening mammograms shouldn't wait until symptoms appear.

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“Some people may think that if you do not feel any lumps in the breast that you don't need to have a mammogram. And that is a myth because the majority of breast cancers are actually picked up by mammograms and the goal of a mammogram is actually to pick up breast cancer before it becomes palpable. In many cases, once a breast cancer becomes palpable it has already spread to the lymph nodes. So the goal of diagnosis is to catch breast cancer at an early stage so that the patient can have the best overall survival prognosis.” (:35)

Another common misstep, Dr. Patrick says, is many women rely too heavily on their family history when assessing their own personal risk for breast cancer. However, even if you do not carry the gene for breast cancer or do not have a known family history, you are not necessarily in the clear from getting breast cancer at some point in your life.

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“The majority of breast cancers are actually sporadic and only a small percentage of them are due to family history. I know we ask a lot about your family history because it is important, but I also like to educate my patients to let them know that actually only about five to ten percent of breast cancers account for hereditary disposition to breast cancer. So it's really important that people who do not have a family history of breast cancer also continue to undergo annual screening mammograms.” (:31)

So you get your mammogram and you are told you have dense breasts. What does this mean?

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“The issue with dense breasts is that, one, they can actually hide or obscure a small mass or malignancy that a mammogram is unable to detect. And two, having dense breasts is actually an independent risk factor for developing breast cancer – because most breast cancers tend to develop in those glandular areas of the breasts. It's important to know that having dense breasts alone does not determine your risk for breast cancer.” (:30)

She adds that you should not be alarmed if you are found to have dense breasts as this is a finding in about 50% of women – but it gives all the more reason to get mammograms regularly. Regardless of your family history, breast density, lifestyle, and other factors the best way to detect cancer early is through annual screenings. To schedule your annual screening mammogram today, go to <https://www.osfhealthcare.org/breast-health/services/mammogram/>.