



# PIPER BREAST CENTER™ *Communiqué*

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## **FDA APPROVES SILICONE BREAST IMPLANTS**

~ by Mark Migliori, MD and Deborah Day, MD

The U.S. Food and Drug Administration (FDA) gave conditional approval in November 2006 for two leading breast implant manufacturers, Mentor Corporation and Allergan, Inc., to market silicone gel-filled breast implants. This decision offers more options to patients interested in breast reconstruction and augmentation.

Fourteen years of scrutiny have shown no link between silicone implants and the development of systemic disease, including connective tissue disorders. Hundreds of thousands of patients and physicians in multiple specialties have been involved in laborious studies. Current studies will continue for a decade to establish a full 10 years of follow-up data. Implant manufacturers will do research on the causes of any implant ruptures, track each device, have focus groups about product labeling and conduct a limited post-approval study.

The FDA requires that patients who have breast augmentation surgery must be at least 22 years old and recommends consideration of MRI scans to pinpoint any clinically “silent” implant ruptures. Before signing informed consent forms, all patients will be given extensive printed information regarding silicone implants and will discuss risks and benefits with a qualified surgeon.

One consideration for women who are contemplating breast augmentation surgery is the impact of the surgery on breast cancer screening after augmentation. X-rays used in mammography cannot penetrate silicone or saline implants. However, since most implants are placed behind the pectoralis muscle, which pushes the glandular tissue forward, only a small amount of breast tissue (probably less than 10 percent) is hidden by the implant. Screening mammography is the best breast cancer screening test for women with breast implants. It is recommended yearly after age 40 in women with average risk levels.

Breast implants have been available for 40 years, and there have been several generations of implants during that time. The most important features of the current generation of implants are a stronger outer shell, a barrier to prevent “gel bleed” through the outer shell, and a more cohesive nature to the filling material. These features should result in a lower scar capsule rate and lower rupture rates. However, breast implants are not necessarily life-long products and should not be considered a failure if they have to be removed or replaced at some point. Breast implants, whether filled with silicone or saline, should be placed and followed by competent physicians, preferably those certified by the American Board of Plastic Surgery.

### **Did You Know ...**

~ by Stephanie Remark, RT (R)(M) and Carol Bergen, RN, clinical manager, Piper Breast Center

Radiologists at Piper Breast Center use a computer-aided detection system called CAD to provide a second read on every mammogram. Useful with both digital and film mammograms, CAD brings the radiologist's attention to areas in question, like calcifications, masses or densities. The radiologist will then determine if these areas need additional imaging.

Health insurance will pay for breast forms and bras for women who have had mastectomies or lumpectomies, whether the procedure was done recently or many years ago. The number of forms or bras a woman is eligible for will depend on the insurance company. We recommend scheduling an appointment with a certified fitter. Only a prescription from your physician or nurse practitioner is required. Call the Piper Breast Center for information about store locations.



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## RED MEAT AND THE RISK OF BREAST CANCER

~ by Charlie Petersen, MD

Every molecule of our bodies is made up of what we eat. It makes sense, then, that our food choices might affect our health. Diet is now believed to be the leading factor in 35 percent of cancer deaths, more than is caused by smoking tobacco. Recently published in the *Archives of Internal Medicine* (11/13/06), the Nurses' Health Study again demonstrates that eating a diet high in red meat increases a woman's risk for some types of breast cancer. Add this new study to the list of prior studies showing that meat-based diets—rich in saturated fat and cholesterol and low in fiber— increase the risk of cancer and heart disease. These studies also show that plant-based diets—low in saturated fat

and cholesterol and rich in dietary fiber and protective phytochemicals— decrease the risk of these diseases.

Why red meat increases cancer rates is uncertain. It may be related to animal fat, meat's iron content, or possibly carcinogens created while meat is cooked. By avoiding red meat and increasing fruit and vegetable intake to 7-10 servings a day, one can cut cancer risk by 30 percent. The best health advice is to avoid weight gain, stay physically active, reduce or eliminate red meat intake, and eat a diet rich in fruits, vegetables, whole grains, nuts and seeds. Clearly the road to prevention begins at the grocery store.

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## VOLUNTEERS

~ by Carol Bergen, RN and Lucia Wilkes Smith

Nearly any day you visit, the Piper Breast Center, a volunteer will welcome you with warmth and grace. She extends the Center's hospitality to every patient, family member and friend. She offers hot or cold beverages to help each visitor feel as comfortable as possible in the midst of a clinical setting. The presence of this volunteer is crucial to the Center's healing environment. Her role is especially appreciated by the technologists, nurses, physicians and support staff whom she assists by maintaining a positive and calm atmosphere while escorting patients to dressing rooms or examination rooms.

The empathy of a Piper Breast Center volunteer may stem from her personal experience with a breast-related concern. Her sensitivity may have evolved from the knowledge of a dear friend or family member's encounter with breast

cancer. Or, she simply may be an individual who wishes to be helpful in bringing smooth-flowing efficiency to one corner of the health care universe.

Piper Breast Center volunteers often find unanticipated rewards as they donate their time and energy for a morning or afternoon. One volunteer says, "I love the contact with so many wonderful patients and enjoy the ability to contribute to this dedicated, caring team."

A woman interested in volunteering at the Piper Breast Center is encouraged to contact Betty at 612-863-4218.

An introduction and orientation by Abbott Northwestern Hospital's Volunteer Services Department will be provided so that each volunteer feels fully prepared and confident in greeting patients and visitors.

## CANCER CLASSIFICATION SYSTEM

~ by Dean Gesme, MD

The Piper Breast Center is well known for offering state-of-the-art breast cancer detection services to women across the region. In addition, the Piper Breast Center integrates leading-edge diagnostic services that provide patients, surgeons and oncologists with the best treatment options for women with breast cancer.

The pathologists at the Piper Breast Center are now recognizing basal-like tumors which form from a small subgroup of breast cancers for which hormone treatments are not usually effective following surgery. Because these basal-like breast cancers are associated with a higher risk of recurrence after surgery, they are usually treated with postoperative chemotherapy. The cancer experts at the Piper Breast Center are actively engaged in research to better classify and treat women with these basal-like breast cancers.

Chemosensitivity testing has also gained recent attention. The concept of screening cancers in a laboratory setting to identify which drugs might be most effective as treatments has been around for more than 30 years. We are now seeing newer means of testing tumors to see how they respond to specific chemotherapy drugs that may be widely used in the future.

Oncologists may now use a new test called Oncotype DX to assess the likelihood of breast cancer recurrence for women with hormone-sensitive breast cancers whose lymph nodes are not involved. This test evaluates several DNA segments in the cancer and provides a "recurrence score" that oncologists can use to decide whether hormone therapy alone after surgery is adequate or whether chemotherapy and hormones together are best.

The team of experts working in the Piper Breast Center continually integrates every effective means to optimize your quality of care. These new diagnostic processes may be important to the future of breast health treatment.

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*Communiqué* is produced for friends of Abbott Northwestern's Piper Breast Center, 800 East 28th Street, Minneapolis, MN 55407-3799, 612-863-3150.

Medical editor ~ Beverly Trombley, MD

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