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Invasive Ductal Breast Cancer (IDC)

Invasive Breast Cancer of no special type (NST)

Breast Cancer not otherwise specified (NOS)



For all Breast Cancer Patients and Survivors, we offer many free services here in the Cayman Islands

Introduction

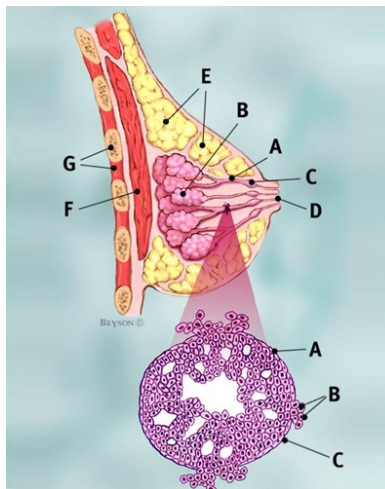
We hope that this information helps you to discuss any questions you have with your Medical Team. The Breast Cancer Foundation are here to help you, contact details are contained in this leaflet, and full details of the free services we offer can be found on our website www.breastcancerfoundation.ky

What is invasive ductal breast cancer?

Invasive ductal carcinoma (IDC), also known as infiltrating ductal carcinoma, is cancer that began growing in a milk duct and has invaded the fibrous or fatty tissue of the breast outside of the duct. IDC is the most common form of breast cancer, representing 80 percent of all breast cancer diagnoses.

Although invasive ductal carcinoma can affect women at any age, it is more common as women grow older. According to the American Cancer Society, about two-thirds of women are 55 or older when they are diagnosed with an invasive breast cancer. Invasive ductal carcinoma also affects men.

Normal breast with invasive ductal carcinoma (IDC) in an enlarged cross-section of the duct



- A Ducts
 - B Lobules
 - C Dilated section of duct to hold milk
 - D Nipple
 - E Fat
 - F Pectoralis major muscle
 - G Chest wall/rib cage
- Enlargement
- A Normal duct cell
 - B Ductal cancer cells breaking through the basement membrane.
 - C Basement membrane

What are the symptoms of invasive ductal carcinoma?

As with any breast cancer, there may be no signs or symptoms. A mammogram may reveal a suspicious mass, which will lead to further testing. A woman may also find a lump or mass during a breast self-exam. The following are possible signs of breast cancer and should immediately be reported to your physician for further evaluation:

- ⓧ Lump in the breast
- ⓧ Thickening of the breast skin
- ⓧ Rash or redness of the breast (which could be also associated with a type of BC called Paget's Disease – see a separate information sheet on this type of BC)
- ⓧ Swelling in one breast
- ⓧ New pain in one particular location of a breast
- ⓧ Dimpling around the nipple or on the breast skin
- ⓧ Nipple pain or the nipple turning inward
- ⓧ Nipple discharge
- ⓧ Lumps in the underarm area
- ⓧ Changes in the appearance of the nipple or breast that are different from the normal monthly changes a woman experiences

How is IDC usually diagnosed?



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- ⓧ The usual steps are:
 - ⓧ Digital mammography
 - ⓧ Ultrasound
 - ⓧ MRI
 - ⓧ Staging workup
 - ⓧ Biopsy
 - ⓧ Pathology

What is the treatment for invasive ductal carcinoma?

Treatment for all types of IDC is determined by the exact type of cancer and staging. Depending on the size and spread of the tumor(s), most women will undergo a combination of any of the following treatments:

- 🎗 Lumpectomy
- 🎗 Mastectomy
- 🎗 Sentinel node biopsy
- 🎗 Axillary node dissection
- 🎗 Breast reconstruction
- 🎗 Radiation
- 🎗 Chemotherapy
- 🎗 Hormonal therapy
- 🎗 Biologic targeted therapy

What is the prognosis for invasive ductal carcinoma?



Based on individual markers and prognostic factors, including the staging of your tumor, your physician will work to give you a prognosis. Research is making great strides in treating this type of breast cancer.

Additional types of invasive ductal carcinoma:

There are four types of invasive ductal carcinoma that are less common:

Medullary Ductal Carcinoma – This type of cancer is rare and only three to five percent of breast cancers are diagnosed as medullary ductal carcinoma. The tumour usually shows up on a

mammogram and it does not always feel like a lump; rather it can feel like a spongy change of breast tissue.

Mucinous Ductal Carcinoma – This occurs when cancer cells within the breast produce mucous, which also contains breast cancer cells. The cells and mucous combine to form a tumour. Pure mucinous ductal carcinoma carries a better prognosis than more common types of IDCs.

Papillary Carcinoma – This is a very good prognosis breast cancer that primarily occur in women over the age of 60.

Tubular Ductal Carcinoma – This is a rare diagnosis of IDC, making up only two percent of diagnoses of breast cancer. The name comes from how the cancer looks under the microscope, like hundreds of tiny tubes. Tubular breast cancer has an excellent prognosis.



After treatment, you and your doctor will work together to come up with a schedule of follow-up visits and exams that is right for your situation. Your schedule may include the following tests and exams:

You will likely have a physical exam and medical history every 4 to 6 months for 5 years and then every year after that. If you are taking tamoxifen or other forms of hormonal therapy, you can consult with your doctor about treatment for any side affects you may experience.

If you had lumpectomy or breast-conserving surgery, you would arrange for a mammogram of the affected breast 6 to 12 months after radiation is completed, and then mammography on both breasts every year.

If you had mastectomy, you would schedule a mammogram of the remaining breast every year. If you are considered high-risk for developing another breast cancer, whether due to strong

family history or a positive genetic test for BRCA1 or BRCA2 mutations, your doctor may recommend breast MRI in addition to yearly mammograms.

If you are taking tamoxifen, you will have a physical exam and medical history taken by a gynecologist every year, because this medication can increase the risk of cancer of the uterus. Any unusual symptoms, such as abnormal bleeding, should be reported immediately to your doctor. (If you have had a hysterectomy and no longer have a uterus, this recommendation does not apply to you.)

If your treatments have put you into menopause early or you have already gone through menopause naturally and are taking an aromatase inhibitor, you will need regular monitoring of your bone health with a bone density test. Having lower levels of estrogen in the body, which is a result of early menopause or taking an aromatase inhibitor, can impact bone health.

You may need to have additional tests or more frequent office visits, depending on your individual needs. Ask your doctor what he or she recommends.

[Further support](#)

[The Breast Cancer Foundation is here to help and support you, for details of our Wellness Program, \(free services for those persons residing in Cayman\) as to how we can help, please contact us, contact details over page.](#)



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BCF would like to thank the following in helping to create this leaflet:

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About the Foundation

The Foundation was started in 2008, this was the 10th Anniversary of the passing of Brenda Tibbetts-Lund, who had a very courageous battle with breast cancer, even before her diagnosis, Brenda had been very active in the Cayman community promoting breast health. Having sponsored the Brenda Tibbetts Lund walk/run in her honour, Kim Lund wanted to do something special in 2008. That is when the Breast Cancer Gala Dinner idea was born, all funds raised from the Gala Dinner were to benefit breast cancer patients here in Cayman. After that gala, the realization that there was an enormous demand for funds for breast cancer patients culminated in Kim Lund and James Bovell (Owners/Brokers at RE/MAX), along with John Broadbent Cayman Islands to take the decision to found a not-for-profit charity (NPO 124) and make the Gala Dinner and Annual Event, since its inception it has become one of the most anticipated and prestigious black (pink actually) tie events on the island.

The Foundation was created originally to provide sponsorship for the Lions Club of Tropical Gardens for the Brenda Tibbetts-Lund annual walk and to provide financial support for the CI Cancer Society for the assistant they give out to breast cancer patients, this is still the case over twelve years later. The Foundation has grown to be so much more. In 2015 the Foundation launched its own Wellness Program which provides a multitude of holistic and medical services to anyone going through breast cancer. The organization also works diligently in raising Awareness and providing local practitioners with the training, skill, and medical equipment to be able to help breast cancer patients in the best way possible this along with providing mammograms where needed and a full, prosthetic/bra service for those who have undergone breast surgery.

