



Reality Check

October is Breast Cancer Awareness Month

By Dr. Jessie Jacob

It was the Fall of 2020, the COVID-19 pandemic was harrowing and the highways remained clear. I was driving home from a protracted day at work and made my daily, customary phone call to my mother, who resides in Seattle. She usually answers with a booming "HI JESSIE, HOW WAS YOUR DAY?" But that day, her voice sounded hesitant, distracted and uninterested in anything that I had to convey. As I arrived at home, my mother declared that she had an abnormal screening mammogram. (It is common for my mother to be called back for additional imaging since she has large, complex, dense breasts.) With a reluctant voice, she proceeded to read the screening mammogram report "Abnormal mammogram - *spic, spec, spikeated* mass left breast." She was audibly straining to pronounce an unfamiliar, medical term. "Mom, what are you trying to say? Are you trying to say *spiculated?*" I queried. Then, with her trademark, raspy tone, she gradually spelled it out, S-P-I-C-U-L-A-T-E-D, taking a heavy breath after uttering each letter. Being a breast imaging radiologist, *that* was *not* the word that I expected to hear. Radiologists refrain from using that word casually. Typically, indeterminate mammographic findings have one or more concerning features, but the majority are found to be non-cancerous. However, occasionally, unequivocally, highly suspicious findings are demonstrated. A "spiculated" mass falls into that category. On subsequent review of her images, I confirmed that my mother did indeed have a 1.4 cm, highly suspicious, spiculated, newly developed, left inner breast mass. How could a fast-growing cancer be residing in my own mother?

My mother is my rock. To succinctly describe her, she is an enlightened, courageous, and tenacious woman. But at that moment, she was a person with a fast-growing breast cancer that required treatment. The marathon began. I spoke to the interpreting radiologist at my mother's local breast imaging center. We concurred that my mother's mass was fast-growing and highly suspicious for cancer. I inquired about how expeditiously a diagnostic mammogram, ultrasound and core needle biopsy could be performed. With a weary intonation, the exhausted radiologist explained that due to COVID-19, the facility was exceptionally short-staffed. Even with this degree of urgency, a regional-facility assessment would be delayed by one to two months.

I was torn. Should I fly her in from Seattle for diagnosis, evaluation and treatment? What if she contracts COVID-19 from flying or being managed in the Bay Area? Shouldn't my mother have her care somewhere else? Given that she is family, that would be the appropriate and optimal choice. Nonetheless, at that moment, that option was not feasible. My aunt, my mother's sister, had died of an aggressive breast cancer in her 40's, leaving her two, young children (and our whole family) in grief. Accordingly, I sent my mother an N95 mask, zinc, Purell and gloves by FedEx and flew her first class in order to limit exposure to COVID-19. After arriving in the Bay Area, she went on to have a diagnostic mammogram, ultrasound, genetic

testing, ultrasound-guided core needle biopsy, breast MRI, MRI-guided core biopsy and radar localization. During the workup, it was discovered that she had the ATM genetic mutation for breast cancer. She went on to have a lumpectomy and radiation and, despite it all, is recovering well.

In speaking with my patients this year, I am compelled to share my mother's story. Many are discouraged and overwhelmed by the current state of the world. How could they not be? Some have coped by increasing their dietary or alcohol consumption. Others are holding off on their normal exercise routine, and many are delaying preventive care.

COVID-19 lingers on. **It is time to take charge of your breast health.** Start by having a conversation with your doctor about your level of risk. How else can you actively tend to your breast health?

- Be cognizant of your family history of cancers and record it
- Maintain a healthy BMI (consider a nutritionist/ trainer)
- Commence or resume an exercise routine
- Reduce excessive alcohol consumption
- Be aware of progressive or persistent breast changes
- Be informed about hormonal influences
- Be educated on your breast characteristics (dense tissue/ complex tissue)
- Individualize your breast imaging regimen (specific to your risk level and breast characteristics)
- Practice mindfulness

Postponing mammography is easy to do. Your plate may be full. Or else, you may be waiting for symptoms to resolve. Or perhaps, you may simply need to get past a wedding, an event, or time period. My mother's reason was COVID-19. Much like everyone else, she was only attending to the bare minimum. But then, the annual mammogram reminder came and she felt obligated to respond. I urge you to not forgo your preventative care. Unfortunately, cancer does not yield for COVID-19.

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