



Evidence for an Emerging Breast Cancer Epidemic: Why the Big Numbers? Why the Younger Ages?

Donna Spiegelman, ScD

Professor of Epidemiological Methods, Department of Epidemiology,
Department of Biostatistics, Harvard School of Public Health

Clement Adebamowo MD, FWACS, FACS, ScD

President, Society of Oncology and Cancer Research of Nigeria,
Director, Strategic Information and Research, Institute of Human Virology,
Nigeria

Associate Professor, Department of Epidemiology and Preventive Medicine
and Institute of Human Virology; Member, Greenebaum Cancer Center,
School of Medicine University of Maryland, Baltimore

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Issues facing developing countries – Epidemiological risk factors pressure on breast cancer risk

- Decreasing parity – dropping fertility rate
- Decreasing duration of lactation
- Decreasing age at first menarche

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Issues facing developing countries – Epidemiological risk factors pressure on breast cancer risk

- Increasing obesity
- Increasing alcohol and smoking rates
- Increasing average height – marker for early nutrition - is increasing

What is needed

- Increase knowledge, awareness and research in cancer prevention in the population at large and among health care professionals.
- Improve vital registration (population, cancer, mortality) rates so that there is better data for planning interventions and public policies.

What is needed

- Increase breadth of high quality age specific rates (mortality and incidence)
- Need to know more about risk factor distribution – calculate expected percent increase in breast cancer incidence rates as low and middle income countries transition to risk factor profile of high income countries

Prevention strategies

- Interventions targeting modifiable risk factors need to be given greater consideration in terms of research and implementation.
- Many of the risk factors for breast cancer are shared with other diseases (Obesity, CHD, Stroke, Diabetes) so it is possible to get additive beneficial effects from such interventions.

Prevention strategies

- Consider modifications in adult dietary intake and physical activity levels to reduce obesity
- Modification of diet and increase in childhood obesity to reduce childhood obesity and age at onset of menarche

Prevention strategies

- Change public policy to be friendlier towards mothers – opportunities to combine work/study and motherhood – increase opportunities and tolerance for those who want to start families earlier and return to work or school. The targets here are to reduce age at first pregnancy and increase opportunities for breast feeding for significant periods.

Prevention strategies

- Use education and policy initiatives to reduce obesity - drive change in dietary habits, food choices, physical activities, etc
- Decrease alcohol and tobacco intake – discourage initiation
- Reduce exogenous hormone exposures – in oral contraceptives, prevent uptake of HRT

Prevention strategies

- These strategies are not to be considered in isolation but as part of other approaches that include early detection, quality treatment and post-treatment support as indicated.
- We can set targets such as preventing the incidence of breast cancer from rising above 50 per 100,000 in developing countries, so that this does not approach the current values for developed countries which is currently above 100 per 100,000.



**BREAST CANCER IN THE DEVELOPING WORLD:
MEETING THE UNFORESEEN CHALLENGE TO
WOMEN, HEALTH AND EQUITY**

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