

TAKING A STAND Against Cancer

The National Cancer Institute divides cancer prevention into four categories. Read on to find out what you can do to help protect yourself and your loved ones from the disease.

LIFE CHOICES AND HABITS

Some behaviors have been proven to make us more likely to develop cancer. Smoking tops the list. Avoid tobacco use to decrease your chances of lung cancer and many other forms of cancer.

A healthy diet can help reduce your risk of cancer. Eating fruits and non-starchy vegetables can protect against cancers of the mouth and esophagus. Obesity has been linked to breast, colorectal, and many other cancers.

Stay active. Physical activity can protect against colorectal, breast, and endometrial cancers.

IDENTIFYING PRECANCEROUS CONDITIONS

Lifestyle changes cannot prevent cancer entirely. The next step is identifying precancerous conditions. Your physician will suggest tests to help you nip some cancers, such as skin cancer, in the bud. Talk with your primary care provider to decide which tests may benefit you.

CHEMOPREVENTION

If your family has a high incidence of some cancers, your physician may suggest medications to help reduce your risk.

ENVIRONMENT

Environmental causes of cancer include radiation and chemical exposure at work, at home, and in the community. Unlike other cancer prevention measures, limiting these hazards takes a team effort. Educate yourself about cancer risks in your community, and work with others to create a cancer-free environment for everyone.

For more information, visit cancer.gov.

Direct to Implant Reconstruction

Lets the Healing Begin

It's called direct to implant reconstruction for breast cancer patients facing a mastectomy, and it can be life changing.

"The patient wakes up from surgery and visually the healing has begun," says board-certified plastic surgeon Lisa Hunsicker, MD, FACS. A recent survey from the American Society of Plastic Surgeons (ASPS) showed that nearly 70 percent of women diagnosed with breast cancer who were eligible for breast reconstruction after mastectomy surgery were not offered the option at the time of diagnosis—a statistic Hunsicker finds" mind-boggling."

Dr. Hunsicker, on staff at Littleton Adventist Hospital, works closely with general surgeons Jodi Widner, MD, and Jane Kercher, MD, also on staff at Littleton Hospital, to educate patients on breast reconstruction options, including direct to implant reconstruction. Hunsicker says she appreciates working in tandem not only with the general surgeons but all the other medical professionals involved in the care of a patient with a breast cancer diagnosis. "My role is to make sure my patients know what all their breast reconstruction options are before they are scheduled for a mastectomy, so they can make the best choice possible for them."

Traditional post mastectomy breast reconstruction involves expanding chest muscle and breast skin to create a pocket sufficient in size to hold an implant and can take from three to six months to complete. With direct to implant reconstructions—also called one-step reconstructions—results can be immediate. At the time of mastectomy the general surgeon removes the breast tissue and lymph nodes. The plastic surgeon then immediately inserts either a saline-filled or a silicone cohesive gel-filled implant and a tissue matrix, made from either human or animal tissue. The tissue matrix provides an added layer between the implant and the breast skin, expanding the pocket. A second surgical procedure may be needed for nipple reconstruction unless a nipple-sparing mastectomy has been performed.

Hunsicker says follow-up radiation may be performed with implants in place, despite a common misconception. She states that, in her experience, there are actually fewer complications with implants than tissue expanders.

Women with small to medium-sized breasts who are having prophylactic mastectomies and want bilateral reconstruction are ideal candidates for direct to implant reconstruction.

Hunsicker sees direct to implant as a forward-thinking approach to breast reconstruction and is proud to be one of only a handful of plastic surgeons in the region—and among an elite group of plastic surgeons across the United States and Canada—to be able to offer this single-stage reconstruction procedure to her patients.

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To learn more about breast reconstruction options including direct to implant, plan to attend the "What Every Woman Needs to Know About Breast Health" seminar on Sept. 22. (See insert for full details.)