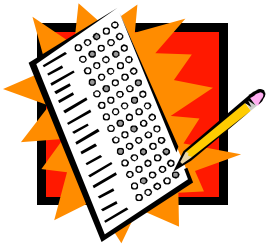


September 3, 2007

Mississippi Cancer Registry Newsletter

University of Mississippi Medical Center



CTR Exam begins

September 15-29, 2007

Good Luck!!!

Inside this issue:

Stages of Breast Cancer	2-3
Upcoming Events	4
Announcements	4

Visual Review and Editing of Data

The MCR is now conducting 100% visual review and editing of all cases submitted by reporting facilities. Initiation of this process has resulted in a couple of issues that need to be addressed. First, please include text to support your codes. Coding mistakes are easy to make and easy to identify and correct if text is available. If sufficient text is not provided, then the facility must be contacted. This slows down our review process and can be intrusive on the reporting facility staff. Information on proper coding of text fields is included in the *MCR Reporting Manual* available on our web site, <http://mcr.umc.edu>. Also available on the web site is a listing of appropriate abbreviations.

Some hospital cancer registries have text fields that do not transmit to the MCR or the capability of including unlimited text in each field which gets truncated in the transmission process. This limits the text the MCR can review and will result in the facility being contacted to establish correct codes. The list of text fields and their lengths are provided in the *MCR Reporting Manual*. Be sure to include important information in the fields that transmit to the MCR and record this information first in fields with unlimited text capabilities.

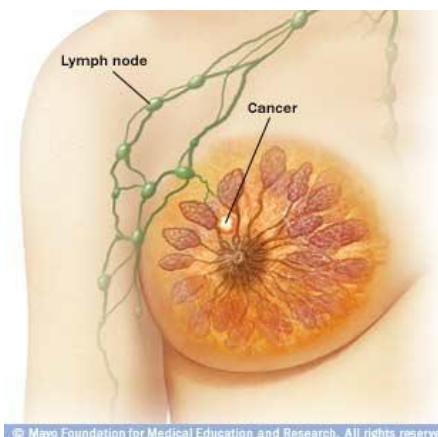
The second issue that needs to be addressed is frequency of reporting. Every facility is asked to report monthly. When a facility reports hundreds of cases in one file, it is very taxing on the visual reviewers. If there is a consistent problem identified, then that problem is very time-consuming to fix on the facility's end. If cases are sent in monthly, the number of cases in the files are smaller and can be reviewed quickly. Any consistent problems can be addressed before an entire year of abstracts contain errors.

Written by:

Deirdre Rogers, Director, MCR



Stages of Breast Cancer



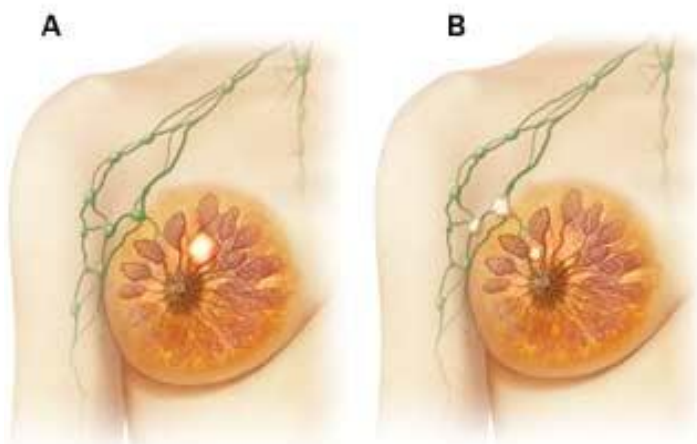
Stage II Breast Cancer

With stage II breast cancer, the tumor size is:

- Larger than that of stage I, but the cancer hasn't spread to a distant part of your body.

If your cancer is stage II, one of the following is true.

- Your tumor is 2 to 5 cm in diameter. The cancer may or may not have spread to your axillary lymph nodes.
- Your tumor is more than 5 cm in diameter, but the cancer has spread to less than four of your underarm (axillary) lymph nodes (B).



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Stage I Breast Cancer

You have stage I breast cancer if:

- Your tumor is no more than 2 centimeters (cm) in diameter (slightly less than 1 inch).
- The cancer hasn't spread to your lymph nodes.
- The cancer hasn't spread to a distant part of your body.

The five-year survival rate for women treated for stage I breast cancer is 98 percent.

The five-year survival rate for women treated for stage II breast cancer 76 percent to 88 percent. Because this statistic is based on women diagnosed many years ago and breast cancer treatment since then has improved, the current five-year survival rate may actually be higher.

Stage III Breast Cancer

Stage III breast cancer, also known as locally advanced cancer, presents as cancer that has spread to the lymph nodes near your breast—those located under your arm or by your collarbone—but not to more distant parts of your body. Here are some examples:

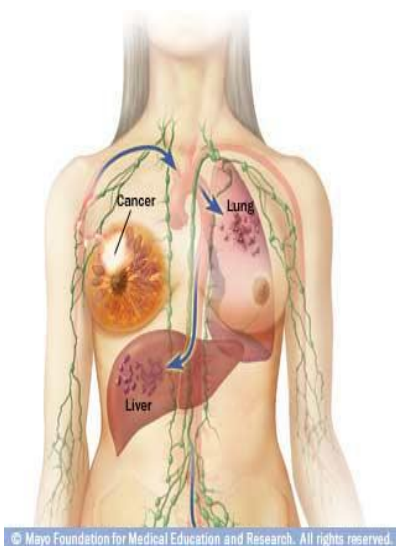
- You may have a tumor that's larger than 5 cm, with cancer cells that have spread to your axillary lymph nodes. However, the nodes aren't growing into one another (A).
- Your tumor is smaller than 5 cm, but the cancer has spread to the axillary lymph nodes above your collarbone (B).



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Stage IV Breast Cancer

Stage IV represents the most advanced form of breast cancer. Cancer cells have spread to distant parts of your body, such as bones, organs or lymph nodes located far from your breast. Treatment may help shrink or control the cancer for a while, but it usually won't completely cure the cancer. At this stage, symptom relief becomes a priority.



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Inflammatory breast cancer

Inflammatory breast cancer presenting as cancer that has spread to the breast skin, causing swelling and redness, is classified as stage III breast cancer. Inflammatory breast cancer tends to develop as a sheet rather than a lump or tumor.

The five-year survival rate for women treated for stage III breast cancer is 49 percent to 56 percent or slightly higher.

Signs and symptoms of inflammatory breast cancer include:

- A breast that appears red, purple, pink or bruised
- A tender, firm and enlarged breast
- A warm feeling in the breast
- Itching of the breast
- Pain
- Ridged or dimpled skin texture, similar to an orange peel
- Thickened areas of skin
- Enlarged lymph nodes under the arm, above the collarbone or below the collarbone
- Flattened or retraction of the nipple
- Swollen or crusted skin on the nipple
- Change in color of the skin around the nipple (areola)

