

Improved breast cancer screening can save more lives

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BREAST cancer is killing women in the Western Cape in their numbers, because many seek treatment too late.

And without a proper screening programme in the state health sector to detect the cancer early, the mortality rate will continue to climb, a Stellenbosch University professor has warned.

Professor Justus Apffelstaedt, head of the Breast Clinic at Tygerberg Hospital, said that of the about 1 000 women diagnosed with breast cancer in the province annually, at least 60 percent would not live longer than 10 years – this was due to how far along the cancer was by the time they sought treatment.

Speaking after his talk at a cancer seminar hosted on Friday by the university and the Cancer Association of SA (Cansa) to celebrate Cansa's 80th birthday, Apffelstaedt cautioned that more women in the province would die prematurely if there was no intervention to detect breast cancer early.

The Western Cape has the largest burden of breast cancer in the country.

A study being run by Stellenbosch University, which has screened almost 16 000 women so far, has diagnosed between three and seven cancers for every 1 000 screenings.

At Tygerberg, the numbers have trebled in the past 10 years, from about 140 new cases a year to more than 400 last year.

The professor pointed out that unlike other cancers such as cervical cancer, breast cancer could not be prevented. But with early detection, it could be stopped from advancing to the point where women lost their lives.

"We have the expertise to run a screening programme to international standards," Apffelstaedt said.

"But despite the increasing calls for such a screening programme, there were,

"disappointingly", not even plans for one.

He blamed the situation partly on lack of political will, but also on "lack of expertise within the administration, and perceptions that it is expensive to run".

Apffelstaedt argued that screening would be much cheaper for South Africa, with most early cancers requiring only surgery, and not expensive radiotherapy and chemotherapy treatment. The mortality rate could also be reduced by up to 50 percent.

He estimated that in the private sector it cost about R176 000 for primary treatment of breast cancer for 100 patients, while it cost in excess of R220 000 to treat symptomatic cancer.

In terms of screening, South Africa was lagging behind developing countries such as Tunisia and Egypt, and now Morocco, which was in the process of establishing such a programme.

"These countries are not more resourced than we are. In fact, we have enough expertise here to run a screening programme to international standards... even far better, than some of these countries.

"But the politicians need to make use of this expertise," he added.

In a developing country such as South Africa, Apffelstaedt said, there was also a need for a shift from the traditional treatment roles, such as mammograms being carried out by radiologists. This responsibility needed to be spread to other disciplines, including surgeons and gynaecologists, to help address the lack of skills.

Louise Turner, head of the Breast Health Foundation, agreed that although early detection remained the key to successful treatment of breast cancer, many women left treatment until very late.

The problem was exacerbated by the long, bureaucratic process at clinics and primary healthcare centres.

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