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- Young Women With Cancer
- Kerri Morrone: Living with Diabetes
- Interview with...Ilkiki Taylor, Host of Bravo's "Make Me a Supermodel"
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Young Women With Cancer

By Christina Couch



For many young women, the years just following college are all about finding yourself. Whether it's searching for the perfect job, the perfect home or the perfect person to share your life with, the postgraduate years boil down to the search for who you are and what makes you happy. For Asha Mevlana, the road to self discovery was shortened by one, life-altering factor—her battle with cancer.

Diagnosed with breast cancer at the age of 24, Asha is part of the growing population of young women with cancer-fighting and surviving America's stealthiest killer. Though cancers prevalent in women (breast, ovarian and cervical cancers) are typically thought to only affect the middle-aged and elderly, young survivors like Asha prove that female cancers are a threat to women of all ages—including the young, the healthy and those without a strong family history of cancer.

In fact, despite a much lower chance of having a tumor, young women may be more at risk than their older counterparts because doctors and young patients rarely expect symptoms to be a sign of cancer. When women under 35 are diagnosed, their cancer is usually at a more advanced stage than older women, making their treatments more invasive and lowering the chance of survival. The silver lining is that with education and early detection, breast and gynecological cancers can be treated early on, in some cases before cells become cancerous. Here's a breakdown of what you can do to prevent three of the most common cancers among young women.

Breast Cancer

If you feel or see something outside of the ordinary in or around the breasts or in the lymph nodes under your arms, don't panic, but definitely have it checked out by a doctor as soon as possible. Although four out of five breast lumps aren't cancerous, breast cancer can and does strike young women.

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Asha was 23 when she found a lump in her breast. She didn't receive her diagnosis until a year later, because the doctor she saw during her initial visit told her that breast lumps were not uncommon in young women and that she shouldn't worry about it. As months passed, Asha's lump did not go away, so she returned for a mammogram that came back inconclusive. From there, Asha had a breast ultrasound and eventually a biopsy which proved that the lump was, in fact, breast cancer. "It was completely shocking," she says. "In one second, your entire life changes and the problem was I had known [the lump] had been around a year and I almost knew it had spread. I thought, 'Okay, I'm going to be dead soon.'"

Asha's diagnosis story isn't uncommon. According to Dr. Diane B. Wilson, co-leader of the Cancer Prevention and Control program in Massey Cancer Center in Richmond, Virginia, breast cancer in young women is oftentimes overlooked by both doctors and mammogram tests.

"Unless they're in a high-risk family, women under 40 are not recommended to have a mammogram and even if they do, it's harder to detect anything abnormal," says Dr. Wilson. "Breast self exams have not been associated with lowering mortality rates of cancer, but we do find that a lot of women detect their own lumps."

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Because breast tissue in young women is firmer than in those over 40, finding tissue abnormalities and diagnosing them as cancerous is more of a challenge. The younger the patient is, the more likely a mammogram will come back as inconclusive.

The Young Survival Coalition, a nonprofit agency dedicated to supporting young women with breast cancer, reports that there are currently more than 250,000 women under 40 in the United States living with the disease. This year, more than 11,000 young women will be diagnosed with breast cancer and, of them, one out of every eleven will die.

Asha was one of the lucky ones. Thanks to chemotherapy, radiation and estrogen blockers, she is now a thriving thirty-year-old and a strong advocate of women taking a proactive approach to their health. She says, "If you feel a lump, get it checked out—even if you feel like you're being a hypochondriac—and make sure people are taking you seriously at the doctor's office."

Being cognizant of one's own body may be the best preventative measure women have against breast cancer. In addition to maintaining a healthy lifestyle and having yearly physicals starting at age 20, a breast self-exam is recommended every month.

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Ovarian Cancer

Dubbed "The Great Mimicker," ovarian cancer in young women appears to be anything but. Its symptoms are common (persistent digestive problems, fatigue, bloating, abdominal discomfort, nausea and inexplicable weight gain or loss), diagnosis is difficult (the Ovarian Cancer National Alliance reports that early stages diagnosis only occurs in 1 out of every 4 cases) and the results can be devastating (half of all women diagnosed with the disease die from it within five years). As of yet, there is no 100% reliable screening test for ovarian cancer, meaning that women should be proactive and talk to their doctor about their symptoms, ask for a CA125 blood test (which reveals if a tumor is present in about half of all ovarian cancer cases) and, if conditions persist, request an abdominal ultrasound.

"In a primary care office, ovarian cancer is not the first thing that goes through their minds when a woman has abdominal complaints," says Dr. Weldon Chafe, professor of obstetrics and oncology at Virginia Commonwealth University. "If a younger woman has some of these symptoms, she probably is the one that is going to have to say to the physician, 'Could this possibly be ovarian cancer?'"

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When an ovarian cyst ruptured in February, Dana Mizgate was rushed to the hospital and misdiagnosed with a gallbladder infection. Feeling that it was something more serious, Dana followed up with her general practitioner and was taken back to the hospital where follow-up exams showed fluid around the ovaries. After the discovery and removal of the cyst, she was diagnosed with ovarian cancer and was immediately put on medication to stop cell growth.

"I watched my grandmother, my mother and my aunt all battle this horrible cancer," says Dana. "I thought if it could happen to me, I wouldn't be 21-years-old, I would be a little bit older."

Because her cancer was caught before it reached advanced stages, she was able to skip chemo entirely and treat her cancer with a pill to limit cell growth, an increased dose of birth control pills and frequent ovarian exams. In cases like Dana's, where ovarian cancer is caught before it's spread to other parts of the body, the chance of survival is more than 90% and the likelihood of undergoing noninvasive treatments increases exponentially. The best way to catch ovarian cancer early is to make sure your annual pap smear includes an internal exam: Don't be afraid to bring up the "C" word to your general practitioner if you experience any symptoms, and let your general practitioner as well as your gynecologist know if you have any history of ovarian cancer in your family.

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Cervical Cancer

Ready for some good news? This cancer is slow-moving, detectable and easily treated if caught in its early stages. More good news? Researchers have discovered a vaccine for the most common cause of cervical cancer, the sexually-transmitted disease Human Papillomavirus (HPV). When this FDA-approved vaccine called Gardasil is made available to women, cervical cancer rates should drop dramatically low.

While the Center for Disease Control reports that approximately half of all sexually active people acquire a genital HPV infection during their lifetime, a relatively small percentage of these infections develop into full-blown cervical cancer. With an annual liquid pap test (which is accurate 85% of the time), infections can be caught before they become cancerous. Because the disease has a long premalignant phase, if the first liquid pap test does not identify an infection, it can usually be caught and dealt with during the next annual exam. Also, if women opt for an additional HPV test along with their pap smear (which is highly recommended for women ages 30 and over), they can also know how at-risk they are for cervical cancer.

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Six years ago, Christine Baze was completely unaware that her doctor was using a nonliquid pap test that was inaccurate up to 50% of the time. Young, married, vegetarian and a nonsmoker, Christine's profile was the exact opposite of a typical cervical cancer patient's. But at 31-years-old, Baze was diagnosed with aggressive cervical cancer. "I'm the girl that did everything right," she says. "My story is one people hear and they go 'No way.' That's why education and empowering women is so important."

Because Christine's cancer was already in advanced stages, she had to undergo a hysterectomy, pelvic radiation, four treatments of chemotherapy, four treatments of internal radiation and macroscopic surgery to remove part of her fallopian tubes and pelvic lymph nodes. Today Christine is 37, healthy, and is the founder of *Pop Smear*, a nonprofit organization that organizes concert benefits to raise money and awareness to fight cervical cancer. "I am one of the lucky ones that I didn't lose my life to this disease, but I will not have children," she says. "I have side effects from this disease that still affect me today. I'm [always] looking over my shoulder and [thinking] maybe if it came back this time, I wouldn't be so lucky."

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What most women don't know about cervical cancer is that it's not hereditary. The primary demographic who are at risk are those who have had or are having unprotected sex, smokers, the un- or underinsured and women who skip out on pap smears.

"One of the biggest impediments [to stopping cervical cancer] is just the physical exam itself. I understand that it's not easy, it's not pleasant, but the upside for the patient is huge," says Dr. Charles Levenback, professor of gynecologic oncology at the University of Texas, M.D. Anderson Cancer Center. "At least half of the women in our country who have had invasive cervical cancer have not had a pap smear in the past five years."

"This is a cancer we can eliminate," says Christine. "It's so exciting to think that another woman won't have to go through what I went through. I feel really optimistic about the future."

Asha, Dana and Christine are just three of the thousands of young women who are shocked by their cancer diagnoses each year. While there's no surefire way to remove all of your cancer risk factors, you can significantly lower your chances of becoming another statistic. Create a cancer-preventative lifestyle: Eat right, don't smoke, get in shape, learn your family's medical history and be your own health advocate when speaking with your doctor.

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Make these lifestyle changes as soon as you can and stick with them, says Dr. Diane B. Wilson. "The body responds best when we [have] routines for how we eat and exercise."

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