Breast cancer is the second leading cause of cancer death in Nevada women. Breast cancer treatment is more successful if started early. When diagnosed before it spreads, the five-year survival rate is 97 percent. If the cancer spreads to underarm lymph nodes, the survival rate is 79 percent. If it spreads beyond the lymph nodes to other organs, the survival rate is 23 percent.

FACTS:
- Every two minutes a woman is diagnosed with breast cancer.
- Each year more than 1,600 Nevada women will be diagnosed with breast cancer and approximately 300 will die from the disease.
- Many breast cancers are found through breast self-exams, BUT not all lumps are detectable by touch.
- Women age 40 and older covered by Medicare can get a screening mammogram every 12 months.

RISK FACTORS:
Both women and men can develop breast cancer; however, there are known risk factors:
- Being a woman
- Being age 40 or older
- Inheriting BRCA1 or BRCA2 gene mutations
- Personal history of breast cancer
- Family history of breast cancer
- Being a White or African American woman
- Having certain benign breast lesions
- Received radiation therapy to the chest as a child or young adult
- Started menstruation before age 12 or went through menopause after age 55
- Exposure to DES (Diethylstilbestrol)
- Not having children
- Long-term use of hormone replacement therapy
- Drinking more than one alcoholic drink a day
- Being overweight or obese
- Physical inactivity

REDUCING YOUR RISK:
The best ways to lower your risk of breast cancer are:
- Don’t smoke and avoid secondhand smoke
- Exercise regularly (at least 30 minutes four days each week)
- Maintain a healthy weight
- Eat a colorful variety of fruits and vegetables every day
- Limit alcohol intake (no more than one drink a day)

SCREENING RECOMMENDATIONS:
According to the American Cancer Society guidelines for the early detection of cancer, women should:
- Beginning at age 20, perform monthly breast self-examinations.
- Ages 20-39, have clinical breast examinations (CBE) every three years.
- Age 40, get your first (baseline) mammogram. Mammograms should be performed every one to two years for women 40-49, depending on previous findings. CBE should be done every year.
- Ages 50 and older, get a mammogram every year.

(702) 822-LIFE
PROSTATE CANCER – WHAT YOU SHOULD KNOW!

SCREENING – A PERSONAL DECISION
Prostate cancer is the third leading cause of cancer death in Nevada men. Although one in six men will develop prostate cancer in his lifetime, only one in 34 will actually die from disease.

FACTS:
- Each year almost 2,000 Nevada men will be diagnosed with prostate cancer and more than 200 will die from the disease.
- Prostate Specific Antigen (PSA) is a protein produced in the prostate gland.
- The United States Food and Drug Administration (FDA) approved the use of the PSA test together with a digital rectal exam to help detect prostate cancer among men age 50 and older.
- Doctors recommendations for screening vary.
- The higher a man’s PSA level, the more likely cancer is present; however, there are many possible reasons for an elevated PSA level.
- The PSA screening test has limitations and remains controversial.
- Nearly 70 percent of prostate cancers occur in men age 65 and older.
- Finasteride (Proscar) can reduce the chances of getting prostate cancer.
- Men age 50 and older covered by Medicare can get a PSA test every 12 months.

RISK FACTORS:
Any man can develop prostate cancer; however, there are known risk factors:
- Being age 50 or older
- African-American ancestry
- Family history of prostate cancer
- Diet high in animal fats

REDUCING YOUR RISK:
The best ways to lower your risk of prostate cancer are:
- Eat a colorful variety of fruits and vegetables everyday
- Limit your intake of red and processed meats
- Eat a diet high in fiber
- Eat a diet rich in raw or cooked tomatoes, pink grapefruit, and watermelon
- If you are over 55 years old, ask your doctor about taking Finasteride

SCREENING CONSIDERATIONS:
- There is no specific normal or abnormal PSA level.
- Generally, a PSA level of less than four is considered normal; a level of more than 10 is of concern.
- PSA levels alone cannot distinguish between benign prostate conditions and cancer.
- One abnormal PSA test does not necessarily indicate a need for further diagnostic tests.
- Prostate cancer, benign prostate enlargement, inflammation, infection, age and race can all elevate PSA levels.
- PSA levels that continue to rise over time indicate other tests may be needed.
- No clear, scientific evidence suggests that the possible benefits of PSA screening (earlier detection of prostate cancer and prevention of death from prostate cancer) outweigh the risks of follow-up diagnostic tests and cancer treatment that include bleeding, infection, inability to control urine and erectile dysfunction.
- A man should discuss elevated PSA test results with his doctor because most men with such test results do not have cancer.

(702) 822-LIFE
Colon cancer is the second leading cause of cancer death in Nevada. Among non-smokers, it is number one. Colonoscopy is the best test for colon cancer and the only one that can prevent the disease by removing tumors (polyps) before they become cancerous. There are other colon cancer tests. Although not as effective as a colonoscopy, any test is better than no test at all.

**Facts:**
- Each year approximately 1,000 Nevadans will be diagnosed with colon cancer and almost 400 will die from the disease.
- Colon cancer can almost always be prevented or cured if found early.
- More than 90 percent of colon cancer happens in people age 50 and older.
- About 25 percent of people age 50 and older have colon polyps, which can become cancer.
- People with a family history of colon cancer should get a colonoscopy before age 50.
- Colonoscopy examines the entire colon. It is safe, generally lasts about 30 minutes, is usually painless, and is typically only needed once every five to 10 years.
- Men and women age 50 and older covered by Medicare can get a screening colonoscopy once every 10 years.

**Risk Factors:**
Anyone can develop colorectal cancer; however, there are known risk factors:

**Highest Risk Factors**
- Being age 50 or older
- Family history of colon cancer

**Other Risk Factors**
- Smoking
- Physical inactivity
- Overweight or obesity
- Diet high in fat and low in fiber
- African American or Ashkenazi (Eastern Europe) Jewish ancestry
- Having ulcerative colitis or Crohn’s Disease

**Reducing Your Risk:**
The best ways to lower your risk of colon cancer are:
- Don’t smoke and avoid secondhand smoke
- Exercise regularly (at least 30 minutes four days each week)
- Maintain a healthy weight
- Eat a colorful variety of fruits and vegetables everyday

The following may reduce your risk for colon cancer:
- Daily multivitamin with folate
- Limit alcohol intake (no more than one drink a day)
- Ask your doctor about taking a daily 81mg aspirin tablet

**Screening Recommendations:**
Beginning at age 50, both men and women should follow one of these five testing schedules:
- Yearly fecal occult blood test (FOBT), plus flexible sigmoidoscopy every five years
- Flexible sigmoidoscopy every five years
- FOBT every year
- Colonoscopy every 10 years
- Double-contrast barium enema every five years

All positive tests should be followed up with a colonoscopy.
CERVICAL CANCER – WHAT YOU SHOULD KNOW!

Pap Tests Save Lives
Nevada ranks tenth in the nation for highest incidence of cervical cancer. Cervical cancer usually grows slowly and may not have symptoms, but can be prevented or detected early with regular Pap tests.

FACTS:
• Each year almost 100 Nevada women will be diagnosed with cervical cancer and approximately 30 will die from the disease.
• Most invasive cervical cancers are found in women who have not had regular Pap testing.
• HPV infection is the major cause of cervical cancer.
• Condoms reduce the risk of HPV infection by approximately 70 percent.
• HPV can be present for years without symptoms.
• Women with Medicare can get a Pap test and pelvic exam once every 24 months.

RISK FACTORS:
Any woman can develop cervical cancer; however, there are known risk factors:

Highest Risk Factors
• Human Papilloma Virus (HPV) infection
• Smoking and exposure to secondhand smoke

Other Risk Factors
• Personal history of Human Immunodeficiency Virus (HIV)
• Personal history of chlamydia infection
• Diets low in fruits and vegetables
• Overweight or obesity
• Long-term use of oral contraceptive (OC)
• Women who have had many full-term pregnancies

Reducing Your Risk:
The best ways to lower your risk of cervical cancer are:
• Delay having sexual intercourse and limit number of sexual partners
• Avoid exposure to HPV
• Get Pap tests regularly
• A new vaccine against four of the HPV strains known to cause cervical cancer is available for girls and women ages 9 to 26

Screening Recommendations:
According to the American Cancer Society guidelines for prevention and early detection of cervical cancer, women should:
• All women should receive a yearly Pap test three years after they begin having vaginal intercourse, but no later than age 21.
• Beginning at age 30, women who have had three normal Pap test results in a row may be screened every two to three years.
• Women age 70 and older who have at least three normal Pap tests in a row and no abnormal Pap tests in the last 10 years may choose to stop testing.
• Women who have had both their uterus and cervix removed may choose to stop testing unless the surgery was done to treat cervical cancer or a precancerous condition.

(702) 822-LIFE
SKIN CANCER – WHAT YOU SHOULD KNOW!

SUN SAFETY SAVES LIVES
Skin cancer is the most rapidly increasing cancer in the United States and the sixth leading cause of cancer death in Nevada. The most likely reason that skin cancer rates are rising is that people are spending more time outdoors. Ozone layer depletion may also be a contributing factor to the increase in rates.

FACTS:
- Each year almost 300 Nevadans will be diagnosed with melanoma and approximately 60 will die from the disease.
- 90 percent of early-stage skin cancers can be removed.
- Even the most serious form of skin cancer, malignant melanoma, has a 5-year survival rate of more than 95 percent when found early.
- More men get - and die from - skin cancer than do women.
- Because of the state’s high elevation, Nevadans are exposed to increased levels of radiation from the sun (UV).

RISK FACTORS:
Anyone can develop skin cancer; however, there are known risk factors:
- Unprotected and/or excessive exposure to UV rays (Refer to the insert to see your skin type)
- Occupational exposures to coal, tar, pitch, creosote, arsenic compounds, or radium
- Family history of skin cancer
- Severe sunburns as a child
- Multiple or atypical moles
- Received radiation therapy for cancer as a child
- Have received more than 250 treatments with psoralen-ultraviolet light (PUVA) for psoriasis
- On immunosuppressive therapy after organ transplantation

REDUCING YOUR RISK:
The best ways to lower your risk of skin cancer are:
- Avoid the sun and seek shade between 10 am and 4 pm.
- Wear light-weight protective clothing to cover as much skin as possible.
- Use sunblock with sun protection factor (SPF) 30 or higher even on overcast days. Reapply every 90 minutes using one ounce of sunblock per body part.
- Cover your head with a wide-brimmed hat. Protect your ears and neck with sunblock.
- Wear sunglasses with 99 percent to 100 percent UV absorption.

PARENTS: Protect your children when they’re in the sun and teach them sun safety habits. Doing so can substantially lower their risk of ever getting skin cancer.

EARLY DETECTION:
Examine your skin regularly and use a mirror for hard-to-reach places. Look for the warning signs of skin cancer:

A = Asymmetry. Does one half of the mole look different than the other half?
B = Borders. Are the mole’s edges ragged or not clearly defined?
C = Color. Is the mole more than one color or changing colors?
D = Diameter. From edge-to-edge, is the mole larger the size of a pencil tip eraser?
E = Evolving. Have any of your moles changed in size, diameter, color or thickness?

See your doctor immediately if you answered “YES” to any of these questions.