



BRCA Testing ~ What Is It And Who Should Get Tested?



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Most women feel anxious about their chance of developing breast or ovarian cancer, especially if they have relatives with these conditions. Other women who have already had breast cancer worry about developing another cancer, or if this tendency may be passed on to their children.

Inherited mutations in two genes [known as BRCA1 and BRCA2] have been shown to increase the risk of breast and ovarian cancers. An inherited mutation is one that is passed from parent to child and is called a germline mutation. In contrast, a non-inherited mutation is called an acquired mutation and can be caused by exposure to environmental agents such as radiation, chemicals, tobacco smoke, viruses, or can just happen spontaneously. It is important to realize that most breast cancers are not related to inherited mutations. Most women with a family history of breast cancer have not inherited one of these two abnormal genes, and not all women who have inherited one of these genes will develop cancer.

However, for those women who are positive for one of these mutations there is an increased

risk of both breast and ovarian cancer. Generally the risk of breast cancer for BRCA1 carriers is 55 to 85%, and for BRCA2 carriers it is 50 to 85%. The risk of ovarian cancers in women with BRCA1 mutations is 40 to 50%, while carriers of BRCA2 have an estimated risk of 15 to 25%.

Who should be tested?

Where there is a strong family history of cancer, BRCA testing should first be done on the relative who has the cancer whenever possible. If this person tests negative it is usually not helpful to test the unaffected relatives. If the relative with breast cancer tests positive, genetic testing should be considered for all at-risk adult relatives.

Also, women who have cancer at a young age should consider genetic testing to help determine their risk for another cancer in either the ovaries or another breast cancer.

If testing the affected relative is not possible, then the decision to do genetic testing relies on family history. This would include those women with multiple relatives with breast/ovarian



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What can be done for those who test positive?

The most frequently utilized option is increased surveillance. This simply means having more frequent examinations, mammograms, ultrasounds, MRI's, blood tests, or any other testing method that would help increase the possibility of early detection, since finding cancer at an early stage clearly results in better outcomes.

There are also some medications that may decrease the risk of cancer called chemoprevention. However, these medications are not without some risks and not everyone would be able to use them.

Some women opt for preventive surgery. This can include prophylactic bilateral mastectomy, or the surgical removal of both breasts. Other women, after completion of childbearing, elect to have the removal of both ovaries and fallopian tubes. While these *may* seem like drastic options to some, there are certainly women at high risk for these cancers who feel more relieved by this surgical treatment. There is no "best" choice among these alternatives, it is dependent upon the patient's own set of values. Patients may want to discuss these options with their families and spouses as well. Certainly, anyone with any questions should contact their physician to arrange for an appointment and to find out where to get further information about testing or treatment.

Call Woman to Woman at 732-797-1510 to get your questions answered.

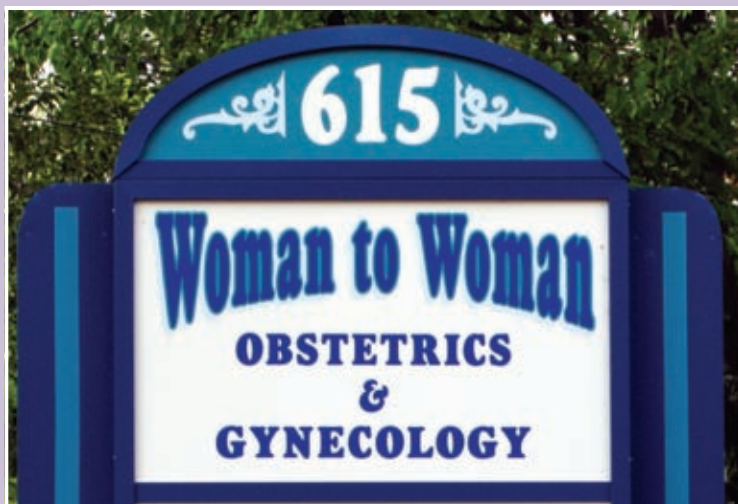


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