

Patients of Breast Cancer is Increasing

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Breast cancer is the main health issue for women all over the world. The prevalence of the disease in the past decade has increased globally. Data from International Agency for Research on Cancer (IARC) GLOBOCAN year 2012 recorded as many as 1.7 million of women are diagnosed with breast cancer, which was 11.9 percent of all cancer incidences. The WHO showed the breast cancer prevalence was 6.3 million by the end of 2012, spreading in 140 nations. Breast cancer HER2 positive was reported to reach 15-20 percent of all breast cancer in the world. In Indonesia, the figure is estimated at 10-30 percent and is found in women aged 10 years younger than those of Caucasoid.

dr. Woro Rukmi Pratiwi, M. Kes., Sp.PD., Pharmacology and Therapy lecturer at Faculty of Medicine UGM, said the breast cancer HER2 positive corresponds with poor therapy results. Presently, therapies using monoclonal anti HER2 therapy give better prognosis for patients of breast cancer HER2 positive.

"Some therapy approaches have been developed rapidly, including on the use of new regimen such as adjuvant and target therapies," she said on Tuesday (13/9) at Faculty of Medicine UGM.

Defending her dissertation entitled "Disease Free Survival, Quality of Life and Direct Medical Post Breast Cancer HER2 Positive Early Stadium That Undergo Chemotherapy Adjuvant Anti Her2 in Dr.



Sardjito General Hospital Years 2007-2014, Woro said such approaches have diverse effects. Therapy outcomes in early stadium of breast cancer are among others, Disease Free Survival (DFS) and quality of life. Despite the administration of HER2 positive of early stadium uses anti HER2 effective, but comprehensive administration that includes surgery, chemotherapy, and radiotherapy are still applied to have better therapy outcomes.

Woro's research in 100 patients of breast cancer HER2 positive in early stadium that receive anti-HER2 therapy in Dr. Sardjito Hospital resulted that the type of chemotherapy regiment based on taxan and chemoterapy intervals with radiotherapy less or same with 300 days will affect the therapy outcome for HER2 positive of early stadium. Intervals of radiotherapy with chemotherapy that is longer will increase the risk for disease deterioration. Costs will increase, too.

“So, a scheduling is important for the intervals of radiotherapy with chemotherapy that is shorter, or less than 210 days to improve therapy outcomes, as well as to reduce costs,” she concluded.

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