



'I'm promoting horror which is so exciting and it is definitely the only genre, where any scope is left, because everything else is over-exhausted in India'

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Chill out



According to WHO, breast cancer is the leading killer among women aged 20–59 years worldwide. Yet, more than 30 percent of deaths due to the disease can be prevented.

With courage & awareness

COVER STORY
PG 02

Catching it early, beating it successfully



LLEWELLYN FLORES

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RECALLING her ordeal while undergoing chemotherapy, Mona Lei Mortola could hardly hold back tears. “It was very painful,” she said, her voice breaking.

After a chemotherapy session, Mortola said she could still return to her job. However, the following day, the side effects of the therapy started to manifest. “I could not stand up, I felt nauseous, my whole body was rigid because of the pain and that went on for two to three days.”

Any slight movement caused excruciating pain, making even sleeping an ordeal. “I was so afraid to even move my head because whenever the small hair growing on it touched anything, it caused so much pain. I had to sleep upright.”

Mortola had no history of cancer, was healthy, didn’t smoke, and she ate healthy. “I hardly ate red meat. Vegetables and fish was my food.” But she was aware of breast cancer risks and so regularly did self-breast examinations and started getting mammograms when she hit 40. This practice may have saved her life.

In January 2009, Mortola was diagnosed with breast cancer. The disease led to a partial mastectomy on her right breast.

In 2013, Mortola felt another lump in the same breast which a biopsy confirmed to be malignant. “That’s when I decided to go for a total bilateral mastectomy because I no longer wanted to go through the same agony,” she said.

The type of cancer Mortola initially had was triple-negative, a type that can be particularly aggressive, and more likely to recur than other subtypes of breast cancer. Although this type is highly receptive to chemotherapy, it cannot be treated with hormonal therapies – a therapy that targets the three common hormone receptors that fuel breast cancer growth: oestrogen, progesterone and HER2 – because these receptors are not present. In Mortola’s case, maintenance drugs (hormonal therapy) would not work. This made her feel as if she was just waiting for a relapse.

According to the World Health Organisation (WHO), breast cancer is the leading killer among women aged 20–59 years worldwide. Yet, more than 30 percent of deaths due to the disease can be prevented.

Awareness campaigns cannot be



A patient undergoing a mammogram scan.



The major reasons why cancer is not detected early differs from country to country. Generally, it is a lack of awareness, fear, and in other countries, expense. Many women cannot afford to pay for proper medical diagnosis.



A doctor performing an ultrasound test on a patient.



Aida Abdulla (left) looks on as Dr Samrin Farouk Habbani prepares the digital mammogram machine at the Khartoum Breast Care Centre, recently.

more emphasised. “The earlier cancer is detected, the better the prognosis and life expectancy,” says Dr Asmaa Abdulsalam, a professor of obstetrics and gynaecology at Damascus University. Abdulsalam has been campaigning for breast cancer awareness for over 15 years. Most of this time was spent in Syria, where she worked with the Syrian Women’s League giving health education in more than 13 Syrian provinces.

According to Abdulsalam, the major reasons why cancer is not detected early differs from country to country. Generally, it is a lack of awareness. The second is fear. In other countries, one major factor is the expense - many women cannot afford to pay for proper medical diagnosis.

“Fear plays a crucial role,” Abdulsalam said. “Even when I had my first breast cancer screening by mammography I was so afraid, I was counting minutes to the result.”

Al-Ahli Hospital Anatomical Pathologist Dr Rafif al Saady says, “Most patients come to us terrified when they discover a lump in their breast. They’re also terrified because some think the test will be very painful.”

In Qatar, Abdulsalam observed that one deterrent in getting early diagnosis is the inability of private hospitals to offer routine screening because it is not covered by insurance. Women who are hesitant or cannot afford to pay for screening are referred to public centres. “It is primary health care, actually, to detect early cancer,” says Abdulsalam. “I think routine screening should be available to women without having them be concerned about paying. After all, whatever you pay for prevention and early screening is less expensive than managing advanced cancer.”

One screening test available now, especially for those with a family history of breast cancer, is for BRCA1 BRCA 2



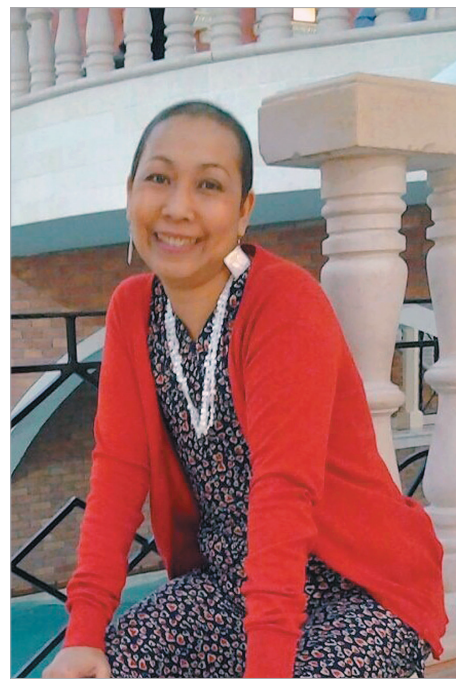
Dr Asmaa Abdulsalam

mutation. “Patients with this gene mutation are more susceptible to have breast and ovarian cancer,” says Saady.

Al Ahli Hospital can facilitate the test by collecting blood samples from patients and getting them tested in their laboratory outside Qatar. The result can take two weeks to a month to return.

BRCA1 BRCA 2 gene mutation is what Angelina Jolie has. “Patients with this mutation may be more prone to getting cancer than those who do not have it, but, it’s not a certainty that they will develop cancer,” says Saady. And so, total mastectomy and removing the ovaries “are extreme methods of preventing cancer from developing.”

The easier way, she says, is annual checking, performing monthly self-examinations and getting an ultrasound or a mammogram (depending on your age) regularly. “If you find any suspicious



Mona Lei Mortola

mass, you can go and remove it and test it and decide what to do next.”

Mortola and doctors Abdulsalam and Saady cannot stress the importance of doing regular self-examinations enough. “You are the best person to examine your breast. If you perform a self examination after your period every month, you know the consistency of your breast,” says Dr Saady. “You can discover even a small change because you are used to touching these areas and you are used to the feeling. So, once the feel changes you will notice it.”

Mortola says it could have been far worse for her if she hadn’t been regularly self-examining. “The first time I was diagnosed, it was only 0.5 cm - very tiny. Even the pathologist told me that in the two decades that she has been in the profession, it was the first time she

encountered a very tiny mass that turned out to be positive. She had to send the sample to another hospital for a second opinion.”

“Awareness is very important,” stressed Dr Saady. “We are all exposed to this risk and if it happens, the earlier the diagnosis, the better the outcome. It is treatable.”

For women diagnosed with breast cancer, Mortola’s message is to “stay strong.” She recalls being at a point of giving up while undergoing chemotherapy. “I thought I would not survive. But I had faith in God and knew He had a reason for allowing the cancer. Plus, I am a single parent. I have a son who needs my love and care. I needed to be very strong.”

Today, Mortola visits cancer patients and tries to encourage them by sharing her own experience and by giving care such as cooking food for them and helping them eat. “I didn’t know that by being strong and staying positive I could later touch other people’s lives,” she muses. Whenever she sees her scars, she feels grateful. “I am alive, I can still support my son and I am still enjoying life.”

Her awareness helped her and that is what she wants for other women. She believes campaigns should never stop because, “With the constant campaigns, women can shift from being passive about their health to being vigilant.”

