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Psychosocial aspects breast cancer

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Breast cancer is the most commonly diagnosed cancer in developed as well as developing countries. Breast cancer patients are facing various kinds of psychosocial problem which affects the overall health of the individual. The prevalence of emotional and mental distress among breast cancer patients is 42% which is the highest prevalence in comparisons with other cancer. Breast cancer and its treatment impact significantly on the daily function of newly diagnosed patients. Patients must live with physical sequel, including short term side effects and permanent changes of toxic treatments. In addition, the experience of being diagnosed and treatment of potentially fatal disease may negatively affect psychological status, physical well-being, disrupt family relation and social functioning. Cancer diagnosis and treatment are going to affect the patient's immediate family, such as spouse and children. Psychological well-being is the attempt to maintain a sense of control in the face of life-threatening illness characterized by emotional distress, altered life priorities, and fear of the unknown, as well as positive life changes. Social well-being is the effort to deal with the impact of cancer on individual, their roles, and relationships. Breast cancer patient are facing various kinds of psychosocial problems like anxiety, depression, change in body image, relationship problem, sexuality problems, sadness, fear, anger and grief.

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TBARS and hematological parameters unveil in breast cancer patients

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Breast cancer is one of the most influencing cancers, which led to 458,503 deaths worldwide in 2008 (13.7% in women and 6.0% of all cancer deaths for men and women together). Over the last few decades the risk of breast cancer among Indian women has increased suddenly. Breast cancer occurs in breast tissues, consisting glands of milk producing tissues, the lobules, and the ducts connecting those lobules to the nipple. The present experiment aims to investigate the (malon dialdehyde) MDA level in different grades of breast cancer patients. Reactive oxygen species (ROS) are free radicals and are chemically reactive. Reactive oxygen species can damage tissues, leading to oxidative stress and ultimately cell death. Lipid peroxidation (LPO) involves ROS stimulated oxidation and degeneration of polyunsaturated fatty acid (PUFA), producing MDA. During pathogenesis or changes in biological activities, free radicals are generated in mitochondria at the time of electron transport chain which react with other biomolecules (DNA, protein, lipid) to produce unstable products. From the present study it was revealed that, RBC count was higher ($3.9092 \times 10^6/\text{mm}^3$) in Grade II than Grade I followed by Grade III, which was lower than the normal one, WBC count ($10.44 \times 10^3/\text{mm}^3$) in Grade III was higher than Grade I and Grade II respectively, however the Platelets count was ($244.6 \times 10^3/\text{mm}^3$) was significantly lower than the normal value and the hemoglobin (11.69 g/dl), in grade I was higher than Grade II and Grade III respectively.

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