

# Rising Trend of Breast Cancer in Pakistan - An Upcoming Major Health Issue

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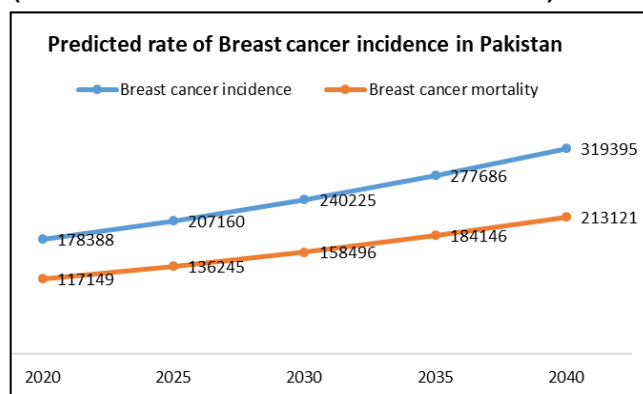
Breast cancer is the most common malignant disease around the world. Regardless of its geographical variation it remains at the top<sup>1,2</sup>. The rate of breast cancer reported to be 47.8/100,000 in 2020<sup>3</sup>. According to updated data from Globocan in 2020 there were 1,78,388 reported cases of breast cancer in Pakistan, while this rate is expected to rise more in the upcoming years. It is suspected to be doubled in the next ten years while more than 75% rise is suspected by 2040 (Figure I). However, this should be borne in mind that in Pakistan these registered cases are those who received treatment at tertiary care hospitals and later on reported to the World Health Organization (WHO). This has not included a significant number of cases which could not reach to the cancer hospitals; they were rather managed at rural health centers or even not diagnosed at all. These cases will further add a considerable number. In addition, a great majority of these cases were symptomatic as a result of non-existent national breast cancer screening set-up in Pakistan. Thus reported mortality is high as compared to developed countries (ie; 1,17,149 reported breast cancer deaths in Pakistan in 2020).

Taken into account of the prediction of the Globocan for breast cancer incidence in Pakistan in 2040, we feared to get averagely 1000 new cases every working day. Given the current health infrastructure and human resource the major concern arises that, are we able to bear this upcoming major burden on our health system? It needs to be taken timely measures from all stakeholders. Currently cancer registry has not been made functional, some institutions are taking individual efforts to make institutional databases in order to keep a record. There is dearth of trained healthcare providers in breast cancer management, resulting in lack of provision of a holistic approach for the treatment. General surgeons, radiologists, pathologists, oncologists and nurses usually deal with breast cancer patients in most hospitals. This has resulted in poor survival outcome. In addition, there is lack of national standardized guidelines for breast cancer management. Thus all the cancer hospitals and tertiary care hospitals and even individual clinicians deal with breast cancer according to their own experience.

On the other hand breast cancer is a heterogeneous disease with varying biological characteristics from

one patient to the other<sup>4,5</sup>. For this varying biology, age appears to be one of the factors<sup>6,7</sup>. It has also shown some degree of variation influenced by the racial difference as blacks tend to have more aggressive cancers as compared to their white counterparts. Thus detailed understanding of the breast cancer biology needs to be focused. Furthermore breast cancer prognosis is multifactorial, apart from biology and patient characteristics; time elapsed between the development of the cancer and start of treatment also plays a major role<sup>8-10</sup>. Thus early diagnosis and appropriate management can save lives by improving survivorship.

**FIGURE I: PREDICTED RATE OF BREAST CANCER IN PAKISTAN FROM 2020 TO 2040- (DATA ADAPTED FROM GLOBOCAN 2020)**



There is serious concern from all the stakeholders while most important responsibility goes to healthcare sector of the government. There is a need to:

1. Provide evidence based screening and early detection service to all the women of Pakistan at risk of developing breast cancer starting at the age of 40 till they are physically fit to receive treatment. This will service a dual benefit, by reducing mortality and reducing rate of aggressive therapy (which is costly) in turn reduces economic burden as well.
2. Provide evidence based standard management service to all breast cancer patients keeping a target of reducing breast cancer mortality by 70% in 5 years.
3. In order to overcome shortage of human resource in the field recognition of Breast as a sub-specialty of Medical sciences and training of human resource in the related fields including breast

radiology, pathology, surgery, oncology, nurses and researchers can fill the gap.

4. Provision of Breast Cancer Management guidelines with regular revision based on the evidence provided by the National Research studies.
5. Establishment of National breast cancer database for research and training purpose in order to provide evidence based medicine.

In conclusion, rising rate of breast cancer in Pakistan is heading to an alarming situation where timely measures needs to be taken in order to avoid catastrophic situation by losing a great number of women in upcoming years. Proactive actions are utmost important to be taken by the healthcare providers to be abreast with this upcoming major health issue.

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