

Editor's comment

A common cancer



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Ironically enough, as I was editing this edition of *CME* on breast cancer, my 78-year-old mother was diagnosed with the disease. Hers is a random occurrence, no strong family history or major risk factors, and, at her age, it is a relatively benign cancer. However, it certainly made me start to think a bit more about my own potential risk factors!

Over the years I have encountered breast cancer often. And not just when I was in practice – in fact it is mainly through friends and acquaintances and not patients. My running partner's young friend died of the disease a couple of years ago after refusing all conventional treatment and desperately, and unsuccessfully, pursuing the alternative route. The wife of a local acquaintance died of the disease some years ago. Another friend and fellow runner has just had her second annual

follow-up mammogram – which is clear – after the diagnosis two years ago. And so the list goes on. It is a pretty common cancer among women and can also affect men.

October is also Breast Cancer Awareness month – hence deciding on this topic for this issue. The disease gets a lot of press, particularly after various celebrities have come out publicly to say that they suffer from it. However, as Jenny Edge points out in her guest editorial, it can be a very different disease among the majority of South African women. I, and probably many other women in the same socioeconomic class, have an annual mammogram now that I am over 50. That option is not available to the vast majority of women in this country – and at younger ages may not even be appropriate. The screening question is still

very controversial. But, as with so many other diseases in this country, women present late, with at least locally, if not distantly, advanced disease. This is where breast cancer ceases to be the success story that it generally is in the West and becomes, once again, a killer, with limited treatment options. The reasons for this are complex, as Jenny points out, but they must be addressed if we are to offer all women the option of early diagnosis and the best treatment for a disease that no longer needs to kill.

On a different theme – we urgently need cover pictures for *CME* for 2009. So once again I am putting out a call to all you artists out there to offer your work for *CME* covers. Please send low-resolution samples to me as soon as possible.

Once again we are looking for doctors' drawings, paintings, or photographs for the cover of *CME* in 2009. Please contact the editor if you have anything available.

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