



Community Memorial
HEALTHCARE

**Knowledge is Power:
*Women, Cancer,
Primary Prevention &
Early Detection***

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*"Taking charge of your health isn't about fear — it is about wisdom,
Self-advocacy, primary prevention, and proactive care at every stage
of life."*

~ Empowered Health Keynote Series

U.S. Women's Cancer Landscape

1 in 8

Breast Cancer Risk

Approximately 13% of U.S. women will be diagnosed with invasive breast cancer during their lifetime.

42%

Preventable Cancer Cases

Up to 42% of all cancer diagnoses in the U.S. are potentially preventable through primary lifestyle and vaccine measures.

+82%

Incidence in Women <50

In young adults under 50, cancer rates among women are 82% higher than men, driven by breast and GI cancers

70%+

5-Year Survival Rate

Combination of primary prevention and screening elevated 5-year U.S. cancer survival from 49% (1970s) to over 70% today.

Source: American Cancer Society Cancer Facts & Figures & ACS Prevention Guidelines

Pillars of Prevention & Care



Primary Prevention

Applying evidence-based lifestyle, dietary, and vaccine measures to reduce lifetime risk before cancer forms.



Family & Genetics

Mapping maternal and paternal family history to uncover hereditary gene variants early.



Lifespan Screening

Adhering to age-specific and risk-tailored screening schedules from your 20s through your 70s+.



Body Advocacy

Recognizing subtle body changes promptly and partnering with your doctor with confidence.

Guideline: Diet & Exercise

Physical Activity (ACS Guidelines)

- **150 to 300 Minutes:** Get 150 – 300 of moderate-intensity (or 75-150 min of vigorous) physical activity per week.
- **Beyond Weight Management:** Regular movement lowers insulin, reduces systemic inflammation, and regulates hormones.
- **Protective Benefits:** Significantly reduces risk for breast, endometrial, and colorectal cancers.

Plant-Forward Nutrition

- **Nutrient-Dense Foods:**
Prioritize colorful vegetables, fruits, whole grains, and fiber-rich legumes.
- **Foods to Limit or Avoid:**
Limit red meats (bacon, sausage, deli meats).
- **Minimize Ultra-Processed:**
Cut back on sugar-sweetened beverages and refined carbohydrates.

Source: American Cancer Society Cancer Facts & Figures & ACS Prevention Guidelines

Guideline: Lifestyle & Risk

Alcohol & Cancer

- **6 Cancer Types Linked:** Alcohol directly elevates risk for breast, colorectal, oral, esophageal, and liver cancers.
- **Best Not to Drink:** It is best not to drink alcohol. For women who choose to, limit to no more than 1 drink per day.
- **Breast Cancer Risk:** Even moderate, regular drinking increases circulating estrogen levels.

Tobacco & UV Safety

- **Tobacco Cessation:** Responsible for 20% of all cancer diagnoses. Quitting lowers risk at any age.
- **Broad-Spectrum UV Protection:** Use SPF 30+ daily and avoid indoor tanning beds to prevent melanoma.
- **Environmental Awareness:** Minimize occupational and chemical exposure where possible.

Source: American Cancer Society Cancer Facts & Figures & ACS Prevention Guidelines

Cancer-Preventing Vaccines

HPV Vaccine (Gardasil 9)

- **Routine Age (9 – 26):** Prevents >90% of HPV-related cancers, including cervical, vaginal, vulvar, and head/neck cancers.
- **Ages 27 to 45:** Available through shared clinical decision-making with your physician if not previously vaccinated.
- **Efficacy:** Highly safe and effective primary prevention against high-risk oncogenic strains.

Hepatitis B & Immunizations

- **Hepatitis B Vaccine:** Protects against chronic Hep B infection, a primary cause of liver cancer (HCC).
- **Broad Public Health Impact:** One of the worlds first true cancer-preventing vaccines.
- **Ask your Provider:** Verify your vaccination history during routine preventive checkups.

High Risk & Prevention Care

Targeted Risk Reduction

- **Genetic Counseling:** Testing for BRCA1/2, Lynch syndrome, and PALB2 if family history indicates strong risk.
- **Risk-Reducing Medications:** Selective Estrogen Receptor Modulators (Tamoxifene) for high-risk breast cancer profiles.

Enhanced Surveillance

- **Supplemental Imaging:** Adding annual Breast MRI alongside 3D Mammography for high-risk or dense breast tissue.
- **Proactive Surgical Consultation:** Discussing prophylactic options for confirmed genetic mutation carriers.

Personal & Family History

Tracing Both DNA Lines

- **50% Maternal / 50% Paternal:** You inherit half your genes from your father. Paternal family history matters equally.
- **Key Cancer Types to Note:** Track breast, ovarian, pancreatic, prostate, and colorectal cancers across both sides.

Unlocking Custom Care

- **Early Screening Triggers:** Family history can lower your starting age for mammograms and colonoscopies by 10+ years.
- **Share with Your Doctor:** Document diagnosis ages of first-degree and second-degree relatives for your chart.

Risk in Younger Women

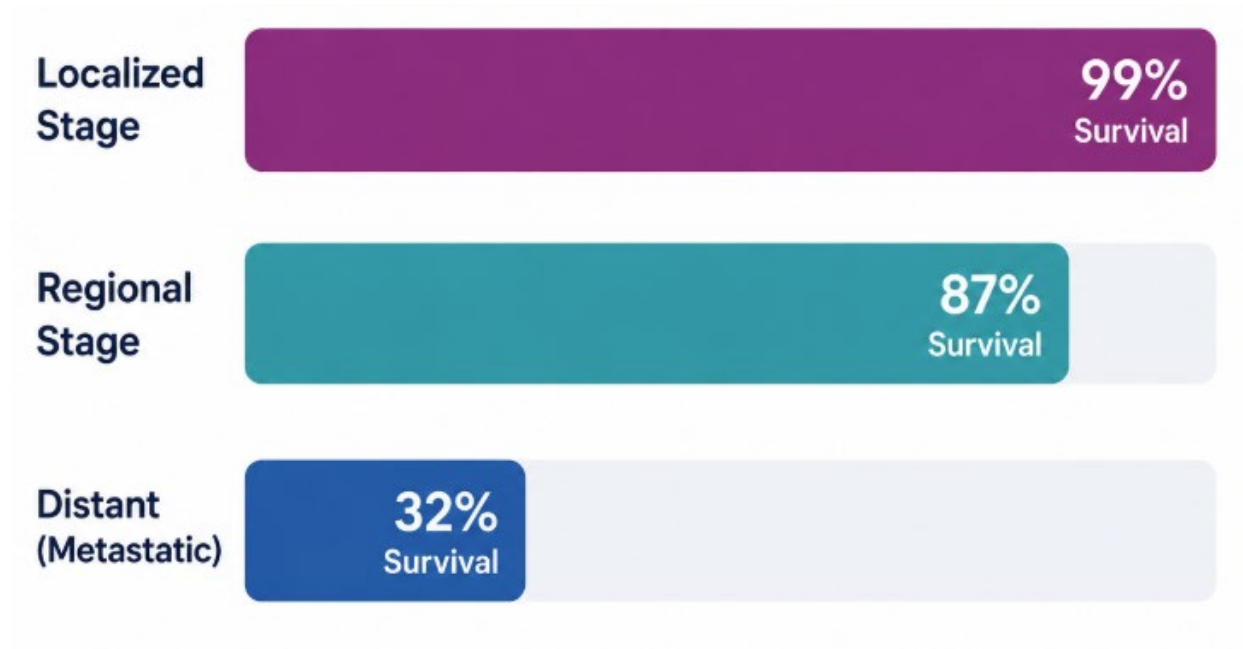
82%

Higher Cancer Rate in Women vs. Men under 50

An Essential Paradigm Shift

- National U.S. data shows cancer incidence in adult under 50 is 82% higher in women than men, largely driven by breast and early-onset colorectal cancers.
- Women in their 20s, 30s, and 40s must feel fully empowered to discuss baseline risk, lifestyle choices, and family history early with their care team.

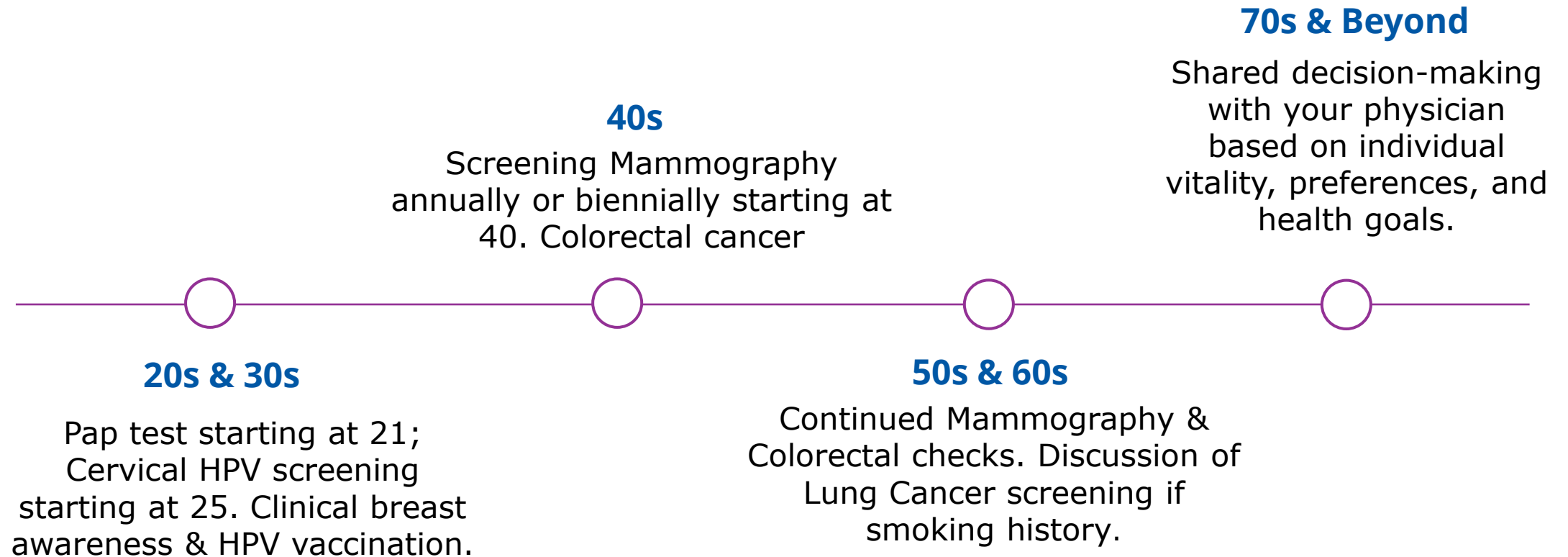
Survival Rates by Stage



Early detection catches tumors when localized-yielding a 99% 5-year relative survival rate in breast cancer.

Source: SEER 18 Database, U.S. National Cancer Institute (5-Year Relative Survival)

Screening Across Lifespan



Lifespan Screening Matrix

AGE GROUP	CERVICAL HEALTH	BREAST HEALTH	COLORECTAL HEALTH
AGES 20 – 29	Pap test every 3 yrs (or primary HPV from 25)	Breast self-awareness & baseline risk check	Family history review & lifestyle baseline
AGES 30 – 39	Primary HPV test every 5 yrs (or co-test)	High-risk MRI screening if indicated	Family history review & risk assessment
AGES 40 – 49	Primary HPV testing every 5 yrs	Screening Mammography (annual or biennial)	Colonoscopy or stool test starting at 45
AGES 50 – 70+	Continue through 65 if normal history	Mammography every 1 to 2 yrs	Regular screening through at least age 75

Notify Your Doctor

Listen to Your Body

- **Know your Personal Baseline:** Pay attention to changes in your energy, cycle, skin, breasts, or digestion.
- **Symptoms to Report:** New lumps, skin dimpling, nipple discharge, unexplained bleeding, or bowel changes.

The 2-Week Rule & Advocacy

- **The 2-Week Rule:** Any unexplained symptoms lasting longer than two weeks requires medical evaluation.
- **Self-Advocacy:** Never hesitate to speak up, ask questions, request diagnostic testing, or seek a second opinion.

Preparing for Your Visit

- **Document Family History:** Bring written record of cancer diagnoses on both your mother.
- **Review Prevention Habits:** Discuss diet, exercise, alcohol, and vaccine history (HPV/Hep B) with your doctor.
- **Ask the Magic Question:** Ask: “Based on my personal history and age, what primary prevention and screenings do I need this year?”
- **Schedule Ahead:** Book your recommended mammogram, Pap/HPV, or colonoscopy before leaving the clinic.

Knowledge is Power

*Thank you for prioritizing your health,
practicing primary prevention,
and advocating for the women you love.*

THANK YOU

Linda Reidy, FNP

