



Glossary of Terms

Adenocarcinoma: Cancer arising in gland-forming tissue; the medical term meaning “related to a gland” is “adeno”; breast lobules and ducts are types of glands.

Adjuvant: Treatment given after primary breast surgery to prevent or delay recurrence, or treatment given as “preventive” when there is no obvious evidence of cancer. Usually refers to addition of chemotherapy, radiation, or hormonal therapy.

Alopecia: Hair loss.

Areola: The area of dark-colored skin on the breast that surrounds the nipple.

Aspiration: Removal of fluid from a lump, often a cyst, with a needle and a syringe.

Atypical hyperplasia: A benign (noncancerous) condition in which cells have abnormal features and are increased in number. This condition places women at a higher risk of developing invasive breast cancer.

Axillary node dissection: Removal of some of the lymph nodes in the armpit to aid in staging of breast cancer.

Benign: A growth that is NOT cancerous.

Biopsy: Removal of a sample of tissue that is then examined under a microscope by a pathologist to see if cancer is present. When the entire tumor or lesion is removed, the procedure is called an excisional biopsy. When only a sample of tissue is removed, the procedure is called an incisional biopsy or core biopsy. When a sample of tissue or fluid is removed with a small needle, the procedure is called a fine-needle aspiration biopsy.

Bone marrow: The soft material inside bones. Blood cells are produced in the bone marrow.

Breast cancer in situ: Very early, noninvasive cancer cells that are confined to the ducts or lobules in the breast and cannot spread beyond the breast. Commonly abbreviated as DCIS (ductal carcinoma in situ) or LCIS (lobular carcinoma in situ).

Breast conserving surgery: An operation to remove the breast cancer but not the entire breast itself. Types of breast conserving surgery include lumpectomy (removal of the lump) and quadrantectomy (removal of one quarter of the breast).

Breast reconstruction: Surgery to rebuild the shape of a breast.

Cancer: A term for diseases in which cells divide abnormally without control or order. Cancerous cells can invade nearby tissues and can spread through the bloodstream and lymphatic systems to other parts of the body.

Carcinoma: Cancer that begins in the lining or covering of an organ.

Chemotherapy: Treatment with drugs to kill or slow the growth of cancer cells; also used to shrink tumors prior to surgery.

Clear margins: An area of normal tissue that surrounds cancer tissue.

Clinical trial: A controlled research study to determine the best possible treatment for a specific condition. Clinical trials take place in many hospitals and cancer centers across the country, with sponsorship and review by the National Cancer Institute. In these clinical trials, doctors use the newest treatments to care for cancer patients. By agreeing to participate in a clinical trial, the patient agrees to follow the protocol of the specified treatment and to cooperate with the scientists to find new, improved treatments for cancer. Participation is voluntary in all clinical trials, and patients may drop out of a clinical trial if they wish.

Complementary therapies: Non-traditional therapies used to complement traditional medical procedures. Examples are therapeutic touch, art therapy, music therapy, aromatherapy, biofeedback, yoga, meditation, nutritional supplements, acupuncture, and numerous others.

Core biopsy: A biopsy that uses a small cutting needle to remove a sample of tissue from a breast.

Cyst: A sac or mass filled with fluid.

Duct: A small channel in the breast through which milk passes from the lobules, where the milk is made, to the nipple.

Ductal carcinoma in situ (DCIS, also called intraductal carcinoma): Abnormal cancer cells that involve only the lining of milk duct. The cells cannot spread outside the duct to other tissues in the breast or beyond the breast.

Estrogen: A female hormone manufactured primarily by the ovaries.

Estrogen or progesterone receptor test: Laboratory tests done to determine if breast cancer will respond to tamoxifen or other hormonal therapies.

Estrogen replacement therapy: Estrogen in pill or patch form, which is given after menopause to reduce menopause symptoms. Prolonged use has been linked to higher risk for breast cancer.

Excisional biopsy: Surgical removal of an entire lump.

Fine needle aspiration: A biopsy that uses a thin needle to remove fluid from a cyst or a cluster of cells from a solid lump.

Grade: A scale based on the cellular structure of the tumor to determine the aggressiveness of a cancer. Grade 1 is least aggressive, Grade 3 is most aggressive. The grade is determined by the pathologist who examines the cells under a microscope.

Herceptin: A form of chemotherapy designed to destroy breast cancer cells that over express an abnormal gene called HER2.

Hormonal therapy: The use of hormones to treat cancer patients by removing, blocking, or adding to the effects of a hormone on an organ or part of the body. Also called endocrine therapy.

Hormone receptor tests: Lab tests that determine if a breast cancer depends on female hormones (estrogen and progesterone) for growth. A high level of hormone receptors may mean that hormones help the cancer grow.

Hormone replacement therapy: Often referred to as HRT, hormones (estrogen and/or progesterone) may be given to postmenopausal women to alleviate symptoms of menopause. Long-term usage has been shown to be a risk factor for breast cancer.

Hormones: Substances produced by various glands that affect the function of body organs and tissues.

Hyperplasia: An abnormal overgrowth of cells.

Implant: A silicone or saline-filled sac inserted under the chest muscle to restore breast shape.

In situ: Very early or noninvasive abnormal cells that are confined to the ducts or lobules in the breast; also known as DCIS (ductal carcinoma in situ) or LCIS (lobular carcinoma in situ).

Infiltrating or invasive breast cancer: Cancer that has the ability to spread to nearby tissue, lymph nodes in the armpit, or other distant parts of the body.

Inflammatory breast cancer: A type of breast cancer in which the breast looks red and swollen and feels warm. The skin of the breast may show a pitted appearance. The redness and warmth occur because the cancer cells block the lymph vessels in the skin.

Intraductal carcinoma: Abnormal cells that are contained within the milk duct and have not spread outside the duct. Also known as DCIS (ductal carcinoma in situ).

Invasive breast cancer: Cancer that has the ability to spread into surrounding, healthy tissues, lymph nodes, or distant parts of the body. Also called infiltrating cancer.

Lesion: An area of abnormal tissue change.

Lobe, lobule: Located at the end of a breast duct, the part of the breast where milk is made. Each breast contains 15 to 20 sections, called lobes, each with many smaller lobules.

Lobular carcinoma in situ (LCIS): Abnormal cells in the lobules of the breast; a sign that a woman is at an increased risk of developing breast cancer anywhere, in either breast.

Lumpectomy: Surgical removal of breast cancer and a small amount of normal tissue surrounding the cancer.

Lymph nodes: Small bean-shaped organs that remove waste from body tissues and filter the fluids that help the body fight infection. Lymph nodes under the arm drain fluid from the chest and arm. During surgery, some underarm lymph nodes are usually removed to determine the stage of breast cancer.

Lymphedema: Swelling, or accumulation of lymphatic fluid in the arm that may occur following treatment for breast cancer. It occurs because the lymph nodes were removed to stage breast cancer and/or damaged by radiation therapy.

Magnetic resonance imaging (MRI): An imaging study in which a magnet linked to a computer is used to create detailed pictures of areas inside the body.

Mammogram or Mammography: X-ray of the breast.

Mastectomy: Removing the breast by surgery.

Medical oncologist: A doctor who specializes in diagnosing and treating all forms of cancer using chemotherapy, hormonal therapy, and biological therapy. A medical oncologist often serves as the patient's main caretaker and coordinates treatment provided by other specialists.

Metastasis: Spread of cancer from one part of the body to another; cells that have metastasized are like those in the original (primary) tumor.

Microcalcifications: Tiny deposits of calcium that can be detected by mammography. A cluster of small specks of calcium may indicate that cancer is present.

Modified radical mastectomy: Breast surgery that removes the entire breast including the nipple and several lymph nodes under the arm. No muscle is removed.

Monoclonal antibodies: Laboratory-produced substances that can locate and bind to cancer cells wherever they are in the body. Many monoclonal antibodies are used in cancer detection or therapy; each one recognizes a different protein on certain cancer cells. Monoclonal antibodies can be used alone, or they can be used to deliver drugs, toxins, or radioactive material directly to the tumor.

Needle localization biopsy: Use of mammography or ultrasound to guide a needle to a suspicious area that cannot be felt but shows up on a mammogram and/or ultrasound.

Negative: A test result that is normal; failing to show a specific disease or condition for which the test is being done.

Neoadjuvant therapy: Treatment given before surgery to shrink a tumor so that an operation is possible. Neoadjuvant therapy can be chemotherapy, radiation therapy, or hormone therapy.

Nipple discharge: Fluid coming from the nipple.

Oncologist, medical oncologist: A doctor who uses chemotherapy or hormonal therapy to treat cancer.

Palpable: Perceptible by touch; able to be felt.

Palliative care: Treatment that continues after a cure is no longer possible. Procedures are administered to relieve pain and manage symptoms.

Papilloma: A benign breast tumor; an abnormal but not cancerous growth.

Pathologist: A doctor who examines tissues and cells under a microscope to determine if they are normal or abnormal.

Pathology report: The report of a diagnosis made by a pathologist based on microscopic evidence.

Positive: The presence of a specific disease or condition for which the test is being done. When breast cancer tests come back "positive," it means there is cancer.

Positron emission tomography scan, PET scan: A computerized image of the metabolic activity of body tissues used to determine the presence of disease.

Progesterone: A female hormone; one of the hormones that can help some breast cancers grow.

Progesterone receptor test: Lab test to determine if a breast cancer will respond to tamoxifen or other hormonal therapies.

Prognosis: Possibility of recovery; prediction of the course or outcome of the disease.

Prosthesis: An external breast form that may be worn in a bra after a mastectomy. Prosthesis is also the technical name of a breast form placed under the skin in breast reconstruction.

Radiation: Energy carried by waves or by streams of particles. Various forms of radiation can be used in low doses to diagnose cancer and in high doses to treat breast cancer.

Radiation oncologist: A doctor who uses radiation therapy to treat cancer.

Radiation therapy: The use of high-energy radiation from x-rays, neutrons, and other sources to kill cancer cells and shrink tumors. Radiation may come from a machine outside the body (external beam radiation therapy) or from materials called radioisotopes. Radioisotopes produce radiation and are placed in or near the tumor or in the area near cancer cells. This type of radiation treatment is called internal

radiation therapy, implant radiation, interstitial radiation, or brachytherapy. Systemic radiation therapy uses a radioactive substance, such as a radiolabeled monoclonal antibody, that circulates throughout the body. Also called radiotherapy.

Radical mastectomy: Breast surgery used when a tumor has spread extensively to the chest muscles and ribs. This was the standard procedure years ago; it is less common today.

Radiologist: A doctor who uses ultrasound, x-rays, mammograms, MRIs, CT scans, PET scans, and bone scans for the diagnosis and follow-up care of breast cancer and other medical conditions.

Recurrence: Reappearance of cancer at the same site (local recurrence), near the original site (regional recurrence), or in other areas of the body (distant recurrence).

Risk factors: Conditions that increase a person's chance of getting a disease. Risk factors do not cause cancer; rather, they are indicators linked with an increased likelihood for getting a disease.

Screening: Checking for disease when there are no symptoms.

Sentinel lymph node: The first lymph node(s) to which cancer cells spread after leaving the area of the primary tumor. Presence of cancer cells in this node alerts the doctor that the tumor has spread to the lymphatic system.

Stage or staging: Classifying breast cancer according to its size and whether or not it has spread to other parts of the body. Breast cancer is classified as Stages I, II, III, IV, with higher stages being more advanced cancers.

Stereotactic needle biopsy: A technique that uses double-view mammography to pinpoint a specific target area when a lump cannot be felt.

Tamoxifen: A hormone-blocking agent used to treat breast cancer.

Tissue flap reconstruction: A flap of tissue, usually muscle, surgically relocated from another area of the body to the chest and formed into a new breast mound.

Tumor: An abnormal growth of tissue; tumors may be either benign (not cancerous) or malignant (cancerous).

Ultrasound: A technique that uses high-frequency sound waves reflecting off internal body parts to create images for medical examination. Therapists can also use ultrasound to treat deep tissue disorders.

Ultrasound-guided biopsy: A biopsy done with guidance from ultrasound.

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