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Editorial Note for Breast cancer and its types

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Breast cancer is a fast-growing tumor that develops in the mammary gland. Most breast cancers begin in the lobules (Milk glands) or in the ducts that connect the lobules to the nipple. In 2012, GLOBOCAN makes an estimate of 1,671,149 new cases in breast cancer were identified and 521,907 death cases in global cancer project. In western countries the available data shows that, the rate of Breast cancer increased from the early 1900s to 1990s, and in Japan rate increased during the past 30years. Most Asian countries are low- to middle-income countries, and therefore, in these countries breast cancer is one of the main causes of mortality. The mortality of breast cancer in different regions of the world is as follows: More developed regions: 14.9, less developed regions: 11.5, Western Europe: 16.2, Northern America: 14.8, Northern Europe: 16.4, Australia/New Zealand: 14.5, South-Central Asia: 13.5, and Eastern Asia: 6.1. In 2012, 1.7 million new cases are diagnosed in women; more cases were observed in the developed regions. The risk of breast cancer may have one in every 9 women in developed countries and one in every 20 in less developed areas. In North Americans & Oceania, there is a 10% reduction in overall Breast cancer mortality rates is predicted for 2020. There is a 16% increase in the risk of Breast cancer for the woman with one birth at age 35 & a 25% reduction in risk of Breast cancer by having 4 children starting at age 20. In 2012, 1.7 million new cases are diagnosed in women; more cases were observed in the developed regions

The breast is consisting of two major types of tissues are glandular tissues and stromal (supporting) tissues. Glandular tissues include the milk-producing glands (lobules) and the ducts (the milk passages) while stromal tissues include fatty and fibrous connective tissues of the breast. The breast is also done by lymphatic tissue-immune system tissue which removes cellular fluids and waste. There are some types of tumours that may grow within different areas of the breast. Most of the tumours are benign (non-cancerous) i.e. changes within the breast. For example, fibrocystic change is a non-cancerous condition in which women develop cysts (accumulated packets of fluid), fibrosis (formation of scar-like connective tissue), lumpiness, and areas of thickening, tenderness, or breast pain. Breast cancer is usually subdivided into Non-Invasive (In Situ) cancer and Invasive cancer.

 Non-Invasive Carcinoma: The Noninvasive carcinoma occurs within the ducts and do not invade surrounding fatty and connective tissues of the breast. In situ carcinoma is subdivided into Ductal Carcinoma In Situ (DCIS) and Lobular Carcinoma *In Situ* (LCIS).

1) **Ductal Carcinoma** *in Situ*: In DCIS, breast epithelial cells grows abnormally and those cells become "Cancerous" but they still stay in normal place in the ducts.

2) **Lobular Carcinoma** *in Situ*: Lobular Carcinoma *in situ* is characterized; when the epithelial cells grow abnormally in lobules which lack nuclear pleomorphic, mitotic activity & come do necrosis.

- Invasive Carcinoma: The invasive carcinoma cells are not confined to the ducts that break through lobular wall & spread the surrounding fatty and connective tissues of the breast. There are different types of invasive carcinoma.
- Invasive ductal carcinoma: It is also called infiltrating ductal carcinoma. Invasive ductal carcinoma starts in the milk ducts of the breast and penetrates the wall of the duct, entering the fatty tissue of the breast and possibly other regions of the body.
- 2) Invasive lobular carcinoma: It is also called infiltrating lobular carcinoma. Invasive lobular carcinoma is considered by a growth pattern of in which the neoplastic cells grow in single cell cords (so called Indian files) and surround ducts in a concentric targeted arrangement.