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## Tools to fight breast cancer

Treatments are as unique as the individual

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A diagnosis of breast cancer can be overwhelming. What can also be overwhelming is the number of treatment options available and determining the best treatment option for the diagnosis. There is no right answer; each person is unique in the type of treatment needed.

Radiation therapy, one of the most common treatments, uses high energies of radiation to destroy cancer cells and stop them from spreading. An external beam is projected at various angles in order to deliver maximum dose to the target, while minimizing exposure to the heart and lungs; it's effective in both treating cancer and reducing symptoms.

A wide-range of therapies and specialized techniques are used to offer the best possible outcomes for patients at the Brigham and Women's/Sturdy Memorial Radiation Oncology Center. Deep inspiration breath hold (DIBH), hypofractionation, and prone (facedown) setup positioning are just some of the advanced techniques. To decide what is best for each patient, a collaborative group of oncology practitioners decides on the best course of action. The care team holds plans and maps out a treatment plan. The plan, determined by the patient and their team, may involve one of these treatment options or other available options.

The DIBH technique is used for those with left-sided tumors to reduce cardiac and pulmonary doses during the radiation process. Whether a patient may benefit from DIBH, which shifts the breast and chest wall from the heart during treatment, is determined by the health care team. The team examines how close a person's heart is to the chest wall, the positioning of the cancer and the ability to perform the technique, which involves taking a deep breath and holding it during the treatment delivery. A tracking de-

### Health Notes

vice is temporarily placed externally on the patient to monitor respiratory motion. Each person is coached on how to perform DIBH prior to the actual treatment and continuously monitored by radiation therapists.

A shorter course of treatment, hypofractionation, can be helpful to select patients. This treatment is administered in five sessions per week over the course of three weeks, whereas standard radiation therapy treatments may last up to six weeks. Although the treatment course is shorter, the dose of radiation delivered during each treatment is larger. Such a treatment approach is evaluated specifically for each patient, with consideration given to age, tumor type and the overall care plan.

Radiation therapy can also be delivered through a prone setup or facedown positioning. Prone setup positioning places the patient on her stomach, using a special breast board, which allows the breast to hang free through the bottom. This positioning is beneficial to women with large breasts or loose breast tissue, ensuring the entire breast can be treated. Depending on a woman's breast anatomy, this type of treatment may be recommended as a way to help prevent skin reactions potentially associated with treatment.

Facing cancer is a challenging experience for both patients and families. However, knowing that expert cancer care is available in a local, community setting can help ease your concerns. For more information on cancer treatment, please visit [www.cancer.org](http://www.cancer.org) or [www.sturdymemorial.org](http://www.sturdymemorial.org) and click on Cancer Care.

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