

Lecture 9

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Cancer.

Slide (2): * a new lump (Ex: lady may complain that she has certain gland in her breast

* unexplained weight loss; any loss greater than 10 pounds (5kg) within 6 months → abnormal ↓

* Bowel movement; Diarrhea followed constipation and so on.

→ these symptoms don't indicate there is a tumor 100%, but make a possible

Slide (6): * 1/3 causes of Diseases in generally due to malnutrition or causes related to Diet.

* Surgical Deprivation: benign tumor: removing the capsule. malignant tumor: removing the tumor and may remove the lymph nodes

Slide (7):

Aflatoxin B1 (substance used to protect peanut plant from insects

Gastric Cancer mainly in Japan, Colon Cancer in USA

Slide (8):

Screening is optional choice; not forced, 2 types: * universal (to All)

* selective or target (to specific PPI).

Slide (9):

between initiation stage and promotion stage, there is stage called Latency (1st gene exposed to mutation, stay hibernate for long time (10 years .. 20 years), till certain conditions promote tumor growth as: plenty of nutrients, weakness of Immunity

Slide (10):

Stages of Tumor Development Differs from cancer staging as we will see in slide 15:

staging: when specialists diagnose the cancer, classify it to stages stage ①, stage ② ... etc clinically

stages of Development: How the cancer grow inside the body

↳ * Hyperplasia (↑ no.) * Hypergrowth / Hypertrophy (↑ size)

But cells still seem normal

↑ Dysplasia → cancer start to be abnormal.

Cancer in situ (surrounded by capsule, not metastatic), it's abnormal and still grow but vacuolated, can be removed.

*malignant → it's bad thing :0 and it's able to invade tissue.

* it's enough to know only these previous notes about stages of cancer development, Don't memorise every thing, already Dr. will not ask about Pathology :0

Slide (13): Crude (experiment on all), Age-adjusted or age standardized Rate (it divided to age levels, and each level to female and male) → it illustrated by an example in the slide.

% are not imp. but Ranks and orders are very imp. (wt's most common and 2nd, 3rd .. etc. globally and in Jordan)

Slide (14): Ranks ordered respectively from most common to less.

Slide (15): up to stage (2); Cancer can be managed and cured. Stage 3 and 4 ... Difficult.

Slide (18): types of epidemiological studies will be discussed more in epidemiology with Dr. Farouq later.

Cross-sectional studies (give prevalence not incidence rates)

Slide (22): Lycopene (anti-oxidant), not required :0

Slide (24): mamogram preferred twice every year after 20, but it is doing after 40 in real.

Slide (27): BMR (Basal metabolic Rate)

Slide (31): not required

Slide (33+34): no cancer treated without a surgery (surgery is a must) the Dr. in the record just read the methods of treatment; without any detail

Slide (35): Enteric = nasogastric Palliative care for advanced cancer is not cancer treatment cuz it's advanced, it's mainly to reduce symptoms and pains.

Reference: Record sec. 2

Thank you :0

Done by: Aseel Olaimat.