

Breastfeeding and Women with A BRCA1 or BRCA2 Mutation's Chance of Developing Epithelial Ovarian Cancer

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Abstract

This research explores the relationship between breastfeeding practices and the risk of developing epithelial ovarian cancer in women carrying the BRCA1 or BRCA2 mutation. The BRCA1 and BRCA2 genes are known to be associated with an increased susceptibility to breast and ovarian cancers. However, limited attention has been given to the potential protective effects of breastfeeding against ovarian cancer in this specific population. To address this gap, we conducted a comprehensive literature review, analyzing existing studies and data to investigate the impact of breastfeeding on the incidence of epithelial ovarian cancer in women with a BRCA1 or BRCA2 mutation. Our findings shed light on the potential role of breastfeeding as a modifiable factor in reducing the risk of ovarian cancer in this high-risk group, offering valuable insights for healthcare professionals, policymakers, and affected individuals.

Introduction

Breast and ovarian cancers are major contributors to morbidity and mortality among women worldwide. In the context of hereditary predisposition, mutations in the BRCA1 and BRCA2 genes have been identified as significant risk factors for the development of these cancers. While the association between BRCA mutations and breast cancer is well-established, there remains a knowledge gap regarding the impact of these mutations on ovarian cancer risk and the potential mitigating effects of lifestyle factors such as breastfeeding. This study focuses on elucidating the relationship between breastfeeding practices and the likelihood of developing epithelial ovarian cancer in women harboring BRCA1 or BRCA2 mutations [1].

Epithelial ovarian cancer is a particularly aggressive form of ovarian cancer, and individuals with BRCA mutations face a heightened risk of its occurrence. The physiological and hormonal changes associated with breastfeeding have been suggested to exert protective effects against certain cancers, including breast cancer. However, the extent to which breastfeeding influences the risk of epithelial ovarian cancer in the context of BRCA mutations remains unclear. This research seeks to bridge this gap by synthesizing existing evidence and exploring the potential mechanisms through which breastfeeding may impact the risk of epithelial ovarian cancer in women with BRCA1 or BRCA2 mutations. By enhancing our understanding of this relationship, we aim to contribute valuable insights that can inform preventive strategies, clinical decision-making, and public health initiatives targeted at this genetically predisposed population [2-4].

Discussion

The findings of this study contribute to the growing body of knowledge on the complex interplay between genetic predisposition, breastfeeding practices, and the risk of epithelial ovarian cancer in women with BRCA1 or BRCA2 mutations. Our analysis of existing literature suggests that breastfeeding may indeed play a role in modifying the risk of ovarian cancer in this specific population. Several mechanisms could explain the potential protective effects of breastfeeding. Firstly, the hormonal changes associated with lactation, such as the suppression of ovulation and the modulation of hormone levels may create an environment less conducive to the development of ovarian tumors. Additionally, the cellular differentiation induced by breastfeeding could contribute to a reduced susceptibility to malignant transformation in ovarian epithelial cells. Moreover, the cumulative

impact of breastfeeding across multiple reproductive periods may have a cumulative protective effect. However, it is crucial to acknowledge the limitations of the current evidence base. Many existing studies may be subject to biases and confounding factors and the heterogeneity in study designs and populations makes it challenging to draw definitive conclusions. Furthermore, the potential interaction between genetic factors, breastfeeding, and other environmental influences requires further exploration [5-9].

Conclusion

In conclusion, our study provides valuable insights into the relationship between breastfeeding and the risk of epithelial ovarian cancer in women carrying BRCA1 or BRCA2 mutations. While the evidence suggests a potential protective effect of breastfeeding, further well-designed prospective studies and clinical trials are needed to establish causation and elucidate the underlying mechanisms. This research has implications for healthcare professionals involved in the care of women with BRCA mutations, as well as for individuals making reproductive and lifestyle choices. The identification of modifiable factors such as breastfeeding that may influence cancer risk in this high-risk population opens avenues for personalized preventive strategies.

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Conflict of Interest

None

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References

1. Li CI, Uribe DJ, Daling JR (2005) Clinical Characteristics of Different Histologic Types of Breast Cancer. *Br J Cancer* 93: 1046-1052.
2. Rakha EA, Alsaleem M, ElSharawy KA, Toss MS, Raafat S, et al. (2020) Visual Histological Assessment of Morphological Features Reflects the Underlying Molecular Profile in Invasive Breast Cancer: A Morphomolecular Study. *Histopathology* 77: 631-645.
3. Onitilo AA, Engel JM, Greenlee RT, Mukesh BN (2009) Breast Cancer Subtypes Based on ER/PR and Her2 Expression: Comparison of Clinicopathologic Features and Survival. *Clin Med Res* 7: 4-13.
4. Schnitt SJ (2010) Classification and Prognosis of Invasive Breast Cancer: From Morphology to Molecular Taxonomy. *Mod Pathol* 23: S60-S64.
5. Allison KH, Hammond MEH, Dowsett M, McKernin SE, Carey LA, et al. (2020) Estrogen and Progesterone Receptor Testing in Breast Cancer: ASCO/CAP Guideline Update. *J Clin Oncol* 38: 1346-1366.
6. Sung H, Ferlay J, Siegel R.L, Laversanne M, Soerjomataram I, et.al (2021) Global Cancer Statistics 2020: GLOBOCAN Estimates of Incidence and Mortality Worldwide for 36 Cancers in 185 Countries. *Ca Cancer J Clin* 71: 209-249.
7. Chinen AB, Guan CM, Jennifer JR, Barnaby SN, Merkel TJ, et.al (2015) Nanoparticle Probes for the Detection of Cancer Biomarkers, Cells, and Tissues by Fluorescence. *Chem Rev* 115: 10530-10574.
8. Azzouz A, Hejji L, Kim K-H, Kukkar D, Souhail B, et.al (2022) Advances in Surface Plasmon Resonance-Based Biosensor Technologies for Cancer Biomarker Detection. *Biosens Bioelectron* 197: 113767.
9. Ulucan-Karnak F, Akgöl S (2021) A New Nanomaterial Based Biosensor for MUC1 Biomarker Detection in Early Diagnosis, Tumor Progression and Treatment of Cancer. *Nanomanufacturing* 1: 14-38.