This module was developed as part of NIDA Grant DA06162, *Improving Drug Abuse Treatment for AIDS-Risk Reduction* (DATAR).

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**Woman-Care Self-Care**

**Objectives**

1. Participants will understand how sexual mythology impacts sexual learning.

2. Participants will learn about female reproductive functioning and related healthcare issues.

3. Participants will understand and practice breast self-examination.

**Rationale**

Few American women have had the opportunity to learn basic information about reproductive anatomy and health. This lack of information makes it difficult for women to ask questions of, or report symptoms to, healthcare providers. Studies indicate that over fifty percent of women entering treatment for addiction complain of one or more gynecologic problems. In addition, breast cancer rates continue to increase, especially among younger women. This lesson provides a foundation of reproductive health information and teaches breast self-examination. Annual cervical cancer screening is encouraged. The importance of early pregnancy testing and prenatal care is emphasized.

**Materials**

- Easel and paper flip chart or chalkboard
- Pencils; markers; masking tape; paper
- Handouts: *Sexuality Myth Quiz* and answer sheet
  - *Breast Self-Examination*
- Overhead transparencies:
  - *Female Anatomy* (4 views)
  - *Prenatal Development*
- Video: *Your Pelvic and Breast Exam*
- Breast self-examination model
- *Session Evaluations*
- Refreshments
Note!

You may prefer to invite an outside speaker to assist with this session, due to the nature of the material. Appendix B provides suggestions for selecting a guest speaker.

Prepare Before Class

Make copies of the following materials for each class member:

- Sexuality Myth Quiz and answer sheets (pp. 88-91)
- Female Anatomy (4 views; pp. 92-95)
- Prenatal Development (p. 96)
- Breast Self-Examination (p. 97)
- Session Evaluation (pp. 98-99)

Create a list of resources in your community for reproductive health care and pregnancy and prenatal services. Include addresses and phone numbers for such agencies as Planned Parenthood or other family planning clinics, the public health department, community hospitals, private doctors that accept Medicaid or have sliding scale fees, WIC programs, maternal and child health programs, adoption agencies, abortion services, etc. If available, include information about fees, hours of operation, and whether bilingual services are available. Make copies for handouts.

Contact the American Cancer Society or other healthcare providers for copies of pamphlets on breast self-examination, mammography, and the Pap test. Make pamphlets available after class. Ask to borrow or rent a breast model for teaching breast self-exam. Most American Cancer Society chapters make breast models available without charge; however, you may need to reserve it well in advance of your class. Purchase information for breast exam teaching models is provided in the Resources Section.

Procedure

1. Welcome participants to the workshop. When everyone is seated, go around the room and ask members to introduce themselves. Go around the room again and ask members to share their earliest recollection of figuring out or being told where babies come from.
Thank members for their participation. Ask for a volunteer to discuss the issues that were covered in the previous session. Thank the volunteer.

Use flip chart sheets from the first session to briefly go over the Group Goals and the Group Agreement, as needed.

Explain that today’s session will focus on issues and information about reproductive health. Note that it is an opportunity to learn more about ourselves as women, and to begin to knock down the “wall of secrecy” that makes talking about such matters a taboo in our society. Explain that it is also good background information for parents who want to make sure their kids learn the facts of life from them, rather than on the street.

Use anecdotes from the opening question about the origins of babies to make the point that much of what people learn about sexuality is myth. Define myth as a story that may sound believable, but is not true or real.

Distribute the Sexuality Myth Quiz (p. 88) and pencils. Ask participants to quickly fill these out (5 minutes). Tell them it is not a test, but rather a discussion starter. When participants have finished, go over the quiz as a group, asking participants to volunteer the answers. Discuss the correct answers. Summarize the exercise with the following points:

**KEY POINT:** Learning about sexuality is a lifelong process. There are agencies and private healthcare providers that can answer questions and provide information over the phone. The referral list from this class is a starting place for getting the facts if you are ever in doubt.

**KEY POINT:** The more we know ourselves, the better off we are for helping our children, families and friends when they have questions, even if it’s just providing a phone number where they can get information.
Tell participants there are several important women’s health issues that will be discussed today:

- Menstruation or how and why we have periods
- How babies are made (The REAL story)
- The importance of a yearly Pap test
- How to do breast self-examination and why it’s important
- How Sexually Transmitted Diseases (STDs) impact women

Invite members to ask questions and share experiences as these issues are discussed.

Use overheads of the four views of female anatomy (pp. 92-95) to help you discuss the following women’s health issues. Distribute handouts.

- Women’s reproductive/sexual anatomy
- The menstrual cycle
- Menopause
- Menstrual cramps
- PMS
- Endometriosis
- Gynecologic diseases/infections

Note!

Menstrual problems are common in chemically dependent women. You can assure women that in the majority of cases normal menstruation returns once drug abuse stops. Weight loss, stress, and poor nutrition can also interrupt a woman’s menstrual cycle. Menstrual problems do not mean pregnancy can’t happen. Encourage those who wish to avoid pregnancy to use a reliable method of birth control.
9 Use overheads of female anatomy and prenatal development to discuss pregnancy. Distribute handouts. Discuss the following points:

- How fertilization and implantation occur
- The importance of early pregnancy detection
- Why prenatal care is important
- The impact of drugs and chemicals on the fetus

10 Thank participants for their questions and involvement. Distribute the handout of referrals. Note that the referrals are good sources if women want more information about the topics discussed in today’s session.

11 Introduce the video *Your Pelvic and Breast Exam* by noting that it provides an excellent overview of the importance of having an annual Pap test and of learning how to do breast self-examination. Ask members to share their experiences with gynecologic examinations. Stress that probably all women dislike having pelvic examinations, but the exam is very important. Alert women that the video allows us to see just what the doctor or clinician sees when doing the exam. Show the video (approximately 12 minutes). Process with the following questions:

**Discussion Guide**

What did you think about this video? Was it helpful?

How did you feel watching another woman have an examination?

The woman in the video was asking some good questions. Are you able to talk that freely with your healthcare provider? Why or why not? Would you like to?

Why do you think it’s important to ask questions and feel comfortable talking with a doctor or nurse? What kinds of I-Messages might help open up communication?
Introduce breast self-examination by pointing out that 1 in 9 American women will develop breast cancer in her lifetime. Those that survive are those that are fortunate enough to detect the cancer early, before it has time to spread. Breast self-examination remains an important tool in early detection of breast cancer.

Explain how to perform a monthly breast self-examination, using a breast model. After giving verbal instructions, distribute Breast Self-Examination handouts (p. 97) and pass the breast model around. Allow each participant a chance to feel the model for lumps and irregularities, and give further instructions as needed. Discuss the following points:

- The importance of monthly breast self-examinations
- Diagnosis of breast lumps
- Risk factors for breast cancer
- Mammography
- Treatment for breast cancer

Breast cancer is an emotional topic for women to discuss. Many women know of someone who has had the disease. It is important to present this information in an optimistic manner that highlights the importance of taking personal responsibility for early detection.

Thank participants for their participation. Invite them to take pamphlets and referral lists. Go around the room and ask participants to share one thing they liked about today’s session and one thing they learned that they didn’t know before. Summarize the session using the following points:
KEY POINT: Learning about taking care of our reproductive health is a lifelong process. We have different needs at different times, such as when we enter puberty, when we begin our reproductive lives, and when we move into menopause. Often, we have to overcome a lot of myths, bad information, and “folk tales” to get to the truth. Taking care of our health is an affirmation of self-worth. It is a personal responsibility. The more we know, the healthier we can be and the more we can teach our children.

KEY POINT: For women there are several healthcare issues that are important:

(1) Have a Pap test and pelvic examination at least once a year to screen for cancer and other health problems. If you are sexually active with more than one partner, request tests for chlamydia and gonorrhea.

(2) Have a pregnancy test the minute pregnancy is suspected. Remember, the first 3 months after conception are extremely critical for the developing infant.

(3) Start prenatal care as soon as pregnancy is confirmed and avoid all drugs, tobacco, and alcohol.

(4) Learn breast self-examination and practice it every month; begin mammograms by age 40 and follow a physician’s advice on how often to have mammograms thereafter.

Thank the group again for participating. Tell them that the next session will focus on other issues related to sexuality and health. Offer pamphlets and resource lists once again.

Ask participants to fill out a Session Evaluation (pp. 98-99) before they leave.
## SEXUALITY MYTH QUIZ

Answer the following questions based on what you have been told about sexuality.

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>TRUE</th>
<th>FALSE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>If a woman is menstruating (having her period), she will cause well water to go bad, if she drinks from the well.</td>
<td></td>
<td></td>
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<tr>
<td>It is possible for animals such as chimpanzees or dogs to breed with human beings.</td>
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<tr>
<td>After menopause, a woman has no desire for sex.</td>
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<tr>
<td>Homosexuals are born that way.</td>
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<td>A man with a big penis is better able to satisfy a woman.</td>
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<td>Masturbation is dangerous and immature.</td>
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<td></td>
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<tr>
<td>When men get older they can no longer have erections.</td>
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<td>Alcohol increases sexual desire and makes you a better lover.</td>
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<tr>
<td>Women don't need sex as often as men do.</td>
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</tbody>
</table>
SEXUALITY MYTH QUIZ

Answer Sheet

If a woman is menstruating (having her period), she will cause well water to go bad, if she drinks from the well. (FALSE)

Menstruation, the female “period,” is the subject of myth and taboo. Many religions, including Judaism and Islam teach that women are “unclean” during their periods and must purify themselves afterwards. Many ancient cultures made women stay in special “menstrual huts” during their periods. They believed that if a man touched a menstruating woman, he would die. If she walked across his fields, all his crops would die. If she drank from the well, then the water would turn poisonous. These superstitions probably have to do with the fact that menstruation involves blood, and blood was viewed as powerful magic. Today we understand that menstruation is a clean, natural function of the human body. When a woman menstruates, her uterus (womb) is simply shedding a lining made of tissue and blood that would have nourished a fetus if pregnancy had occurred.

It is possible for animals such as chimpanzees or dogs to breed with human beings. (FALSE)

From time to time, supermarket tabloids carry headlined stories such as DOCTORS AMAZED! WOMAN GIVES BIRTH TO PUPPIES or I WAS RAPED BY A GORILLA AND HAD ITS BABY! Rest assured that it is not genetically possible. Human sex cells will not accept genetic material from another species, nor will other species accept human genetic material. So MAN FATHERS PUPPIES is not possible, either. In fact, other species won’t voluntarily copulate with human beings, although they may appear to be trying (such as when a pet dog wraps around your leg). In “sex shows” that feature humans and animals, the animals have been trained and are not behaving instinctively.

After menopause, a woman has no desire for sex. (FALSE)

The most important factor in desire is a woman’s feelings for her partner and her attitude toward sex. Menopause indicates that a woman’s ovaries have stopped producing eggs and that hormone production is reduced. Most women continue to experience satisfying and fulfilling sex lives after menopause. Reduced amounts of naturally-produced estrogen may cause vaginal drying or thinning in some women, but there are a variety of lubricants and hormone replacements available to provide relief. Menopause is a natural, healthy aspect of sexuality.
Homosexuals are born that way.  (FALSE/DON’T KNOW)

Research has not found an answer to why some people are homosexual. Genetics, hormones, overbearing mothers, and mental illness have all been suggested at one time or another. None is correct. What we know is that homosexuality exists in all cultures, in all parts of the world, and at all times in recorded history. It is estimated that 15% of the world’s population is homosexual or bisexual. This allows for speculation that it is a normal, natural phenomenon. It is also important to bear in mind that many people who are not “homosexual” engage in same-sex sexual encounters.

A man with a big penis is better able to satisfy a woman.  (FALSE)

Maria Muldaur said it best: “It ain’t the meat, it’s the motion...” The center of sexual excitement and release for a woman is the clitoris, a small, pearl-like organ located above the urinary opening. Whereas some women may prefer a large penis, it’s not necessary for sexual satisfaction. The vagina itself has relatively few sensitive nerve-endings. This is because the vagina is the birth canal. If the vagina had as many sensitive nerve-endings as the clitoris, no woman would ever be able to give birth — it would be too painful.

Masturbation is dangerous and immature.  (FALSE)

Masturbation is sexual self-stimulation which may or may not be carried through to orgasm. In Victorian times, doctors preached that it could lead to insanity, blindness, warts and hair growing on the palms of the hands. Masturbation is harmless. People of all ages, including people with a steady sex partner, may masturbate. Many religions have strong taboos against masturbation, which may cause some people to feel guilty. If masturbation causes excessive guilt, it should probably be avoided. Otherwise, it’s normal to masturbate and it’s also normal not to masturbate.

Sexually Transmitted Disease (STDs) always cause symptoms.  (FALSE)

Unfortunately, this is not true. Public health officials believe that the primary reason why Sexually Transmitted Diseases (STDs or VD) are so prevalent is because they are unknowingly transmitted from person to person. For example, chlamydia and gonorrhea seldom produce obvious symptoms in women, and as many as 20% of men may have no symptoms. In the case of syphilis, a chancre (a painless ulcer) appears in the first weeks after exposure then heals on its own. It can easily go unnoticed, especially if it is located inside a woman’s vagina. New evidence shows that herpes may be transmitted even when herpes sores are not present. The HIV virus that causes AIDS can produce no symptoms for years. In fact, most people with HIV who are in danger of passing the virus to someone else don’t even know they have it. They look and feel fine.
When men get older they can no longer have erections. (FALSE)

Erections are caused by blood flowing into the spongy tissue of the penis, causing it to engorge (swell). If a man stays healthy, he can have erections until the day he dies, even if he lives to be 95. Studies show that about three out of four men in the 60s and 70s have satisfactory erections; two-thirds of men in their 80s have erections; and nearly half of all men in their 90s do also. Diseases such as prostate cancer or cardiovascular (heart and circulatory) problems may interfere with erections. Also, certain drugs such as high blood pressure medication may reduce erection capacity. Other drugs such as alcohol, tobacco, heroin, high dose methadone, marijuana, and cocaine may also cause erectile dysfunction.

Alcohol increases sexual desire and makes you a better lover. (FALSE)

Actually, the opposite is true. Alcohol in small amounts may cause relaxation and openness to sexual experiences, but in large amounts and with chronic use it reduces both desire and performance in men and women alike. Heavy drinking may cause men to have problems keeping an erection and may cause both men and women to have problems achieving orgasm.

Women don’t need sex as often as men do. (FALSE)

Sex is a basic biological drive with physical and emotional rewards for women as well as men. Within a fulfilling sexual relationship, men and women establish patterns as to when and how often they need and want sex. For women and men alike, need for and interest in sexual intercourse varies over the course of a lifetime. It may be stronger sometimes, weaker others. Culture and religion may place restrictions on women vocalizing their need for sex, but that doesn’t mean it doesn’t exist.
Female Anatomy
Front View
Female Anatomy
Side View
Female Anatomy
Outer

CLITORIS

LABIA (MAJOR)

URETHRAL OPENING

LABIA (MINOR)

VAGINAL OPENING

ANUS
Female Anatomy
Fertilization
THE EMBRYO AT 6 WEEKS

The heart is beating and the embryo floats in the cushioning waters of the amniotic sac. The yolk sac is detaching and will soon shrink.

The embryo is about 1/2" long at this stage.

THE FETUS AT 3 MONTHS

By this stage the fetus has all of its basic organs and systems. Lids have formed and cover the eyes.

The placenta requires great amounts of oxygen and nutrients to provide life-support to the fetus through the umbilical cord.

Prenatal Development
Early Stages
WHY YOU SHOULD EXAMINE YOUR BREASTS EVERY MONTH:

Breast Self-Examination (BSE) is an important step in finding breast cancer early. When breast cancer is found early and treated promptly, women survive. That is why it is important for you to learn how to examine your breasts properly.

THE THREE STEPS OF BSE

STEP ONE: IN FRONT OF MIRROR

Let your arms hang loosely at the sides of your body. Look at your breasts from the front and from each side. Turn and look in the mirror:

- Any changes in the form and shape of the breast
- Bulging or puckering of the skin
- Scalloping of the skin around the nipple
- Any change in the nipple

STEP TWO: AT BATH TIME

When your skin is wet, it is easy to move your fingers over your breasts. Use the left hand to examine the right breast, and the right hand to examine the left breast. As you examine your breasts, you are feeling for:

- A lump, thickening, or a hardening in the breast or anything that feels different

Imagine your breast as the face of a clock. Examine all of the breast tissue in a clockwise motion, starting at 12 o'clock. Focus firmly on the sensitive pads of the middle three fingers of each hand. With each clockwise motion, move your fingers forward toward the upper part of your chest while continuing to feel all of your breast tissue.

STEP THREE: LYING DOWN

Examine your breasts while lying on your back. The most effective way to check your breasts is to lie down, thickening or swelling in the breast.

- Lie down on your side. Spread the breast tissue more evenly.
- Put a pillow or hand under your right shoulder and put your right hand under your head.
- Use the finger of your left hand to feel your breast. Remember to feel the entire breast, including the armpits and the underside of the breast.

THE BEST TIME TO DO BSE

Do your Breast Self-Examination about a week after the start of your menstrual period when the breasts are usually tender. After menopause, breast changes are less likely to occur. If there are any changes in the breast or anything that feels different, call 1-800-227-2345 or visit www.cancer.org.

WHY YOU SHOULD HAVE A MAMMOGRAM

A mammogram is a X-ray of the breast. Mammograms are one of the most important tools in finding breast cancer early. They help detect tumors or changes in the breast tissue that could be signs of very early breast cancer. Mammograms can detect breast cancer at a stage when it is easier to treat and cure.

WHAT TO DO IF YOU FIND A CHANGE

If you notice a change in your breasts, contact your doctor or health care provider. Important issues to consider might include:

- A lump, thickening, or swelling in the breast
- Discoloration or puckering of the skin
- Scales of the skin around the nipple
- Nipple discharge

Don't panic if the breast lump is not cancerous. Most breast lumps are not cancerous, but only your doctor can make this diagnosis.

RISK FACTORS FOR BREAST CANCER

The most important risk factors for breast cancer are:

- Being a woman
- Getting older
- Having a family history of breast cancer (mother, sister, daughter)

MAKE A PERSONAL PLAN

Make a personal plan for your breast care together with your doctor or health care provider. The American Cancer Society recommends the following steps to detect breast cancer:

- A mammogram every year after age 40
- A breast self-examination every month
- A physical examination by your doctor or health care provider
- Mammography according to the guidelines of the American Cancer Society

SCREENING GUIDELINES

The American Cancer Society (ACS) recommends the following guidelines for breast cancer screening of women without symptoms:

1. A mammogram every year after age 40
2. A clinical breast exam by a health care professional every 3 years for women aged 20 to 39, and annually for women aged 40 and over
3. A breast self-exam monthly for all women aged 20 and over

*Guidelines for screening women without symptoms of breast disease and with normal risk for cancer. The presence of a strong family history of breast cancer or other factors may affect these recommendations. Check with your health care provider if you have any questions.

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INSTRUCTIONS: Please answer the following questions based on what you learned in today’s session. Circle 1 (True) or 2 (False) after each statement.

1. Our society makes it easy for people to learn factual, correct information about sexuality. ................................................................. 1 2 [21]

2. The most likely time for a woman to get pregnant is three days before her period. ............... 1 2

3. The male sperm unites with the female egg in the fallopian tubes........................................... 1 2 [23]

4. Menopause is a dangerous time in a woman’s life that often results in insanity. .............. 1 2

5. Alcohol and drugs may cause damage to a developing fetus. ............................... 1 2 [25]

6. There is no need for a woman who has never had children to do a monthly breast self-exam. ................................................................. 1 2

7. A Pap test can determine for sure if a woman has HIV (the AIDS virus). ................... 1 2 [27]

8. Prenatal care should begin as soon as a woman knows she is pregnant. ....................... 1 2

9. There are several kinds of sexually transmitted diseases (STDs) which cause no symptoms. ................................................................. 1 2 [29]

10. There is no such thing as PMS (Premenstrual Syndrome); it’s all in a woman’s head. .......... 1 2 [31-32]
INSTRUCTIONS: Please take a minute to give us some feedback about how you liked this session.

1. Use one word to describe your feelings about this class. ___________________

2. What is the most important thing you learned today?

3. Of the topics discussed today, which one do you think would be important for a man to learn about? Why?

4. On a scale of 1 to 10, how do you rate today’s class? (Circle your rating)

   01 02 03 04 05 06 07 08 09 10
   Poor     Pretty Good     Excellent

5. Do you have any suggestions to help make this class better?
PORQUE DEBE HACERSE UN AUTO-EXÁMEN DE LOS SENOS CADA MES
El auto-examen de los senos es un paso importante para la detección temprana del cáncer. Cuando el cáncer de los senos se detecta y se trata a tiempo, la mujer puede sobrevivir. Por eso es importante que usted aprenda a hacerse un auto-examen correcto de sus senos.

LOS TRES PASOS DEL AUTO-EXÁMEN DE LOS SENOS

PRIMER PASO: FRENTE AL ESPEJO

Deje los brazos en posición relajada a los costados del cuerpo y observe cada seno de frente y de lado.

Observe:
- Cambios en la forma del seno
- Irregularidades en la piel, como hundimientos o arrugas
- Piel descamada alrededor del pezón
- Algun tipo de desecho o secreción por el pezón o cualquier cambio.

Levante los brazos arriba de la cabeza y observe cada seno de frente y de lado.

SEGUNDO PASO: A LA HORA DEL BAÑO

Imagine que su seno es un reloj. Comience por la hora 12 en punto y examine todo el seno en un movimiento circular en el sentido de las agujas del reloj. Coloque los dedos en forma plana y use las yemas de los dedos con alguna presión. Mueva los dedos un poco hacia el pezón, dando vuelta tras vuelta hasta haber palpado todo el tejido del seno.

TERCER PASO: ACOSTADA

El examen en posición acostada es la mejor forma de detectar abultamientos, áreas más duras o cualquier cambio.

Acuéstese. Para lograr una distribución más pareja de los tejidos del seno, ponga una almohada o una toalla doblada debajo del hombro derecho, y ponga su mano derecha debajo de la cabeza. Coloque los dedos en forma plana y use las yemas de los dedos con alguna presión, dando vuelta tras vuelta hasta haber palpado todo el tejido del seno.

El mejor momento para hacerse un auto-examen de los senos es durante la semana después del primer día de la menstruación. Después de la menstruación (cambio de vida) o de una histerectomía, escoja un día fácil de recordar tal como el primer día del mes. Haciendo este auto-examen de los senos cada mes usted se familiarizará con el tejido de sus senos y podrá detectar algún cambio.

PORQUE DEBE HACERSE UNA MAMOGRAFÍA

La mamografía permite detectar cáncer de seno en etapas en que no se pueden sentir. En promedio, más de 80% de los cánceres se detectan ahí.

RECOMENDACIONES PARA LOS EXÁMENES

Fura la detección del cáncer de los senos en mujeres sin síntomas*, la Sociedad Americana del Cáncer (ACS) recomienda lo siguiente:

1. Una mamografía cada año empezando a la edad de 40 años (por indicación médica, las mamografías pueden comenzar antes).
2. Un examen físico de los senos hecho por un médico cada tres años en mujeres entre 20 a 39 años de edad y uno por año en mujeres mayores de 40 años.
3. Un auto-examen mensual de los senos para todas las mujeres mayores de 20 años de edad.

HAGA UN PLAN PERSONAL

Haga un plan personal para el cuidado de sus senos junto con su médico. La Sociedad Americana del Cáncer (ACS) recomienda:

- Lo que debe usted hacer si encuentra algún cambio.
- Los signos para detectar el cáncer de los senos.
- Los factores más importantes en el cáncer del seno.
- Los factores más importantes en el cáncer del seno.
Why You Should Examine Your Breasts Every Month:
Breast Self-Examination (BSE) is an important step in finding breast cancer early. When breast cancer is found early and treated promptly, women survive. That is why it is important for you to learn how to examine your breasts properly.

The Three Steps of BSE

Step One: In Front of Mirror
Let your arms hang loosely at the sides of your body. Look at your breasts from the front and from each side. You are looking for:

- Any change in the form and shape of the breast
- Dimpling or puckering of the skin
- Scaling of the skin around the nipple
- Any change in the nipple

Rest your hands on your hips and press your hands down firmly to tighten the muscles under the breast. Look at each breast from the front and from each side.

Step Two: At Bath Time
When your skin is wet, it is easy to move your fingers over your breasts. Use the left hand to examine the right breast, and the right hand to examine the left breast. As you are examining your breasts you are feeling for:

- A lump, a thickened area, a hardening in the breast or anything that feels different.

Imagine your breast as the face of a clock. Examine all of the breast tissue in a clockwise motion starting at 12 o’clock. Press firmly with the sensitive pads of the middle three fingers starting at the outer edge of your breast. With each clockwise motion, move your fingers in toward the nipple until you have felt all of your breast tissue.

Step Three: Lying Down
Examine your breasts while lying on your back. This is the most effective way to check your breast for lumps, thickening or hardening.

Lie down on your bed. To spread the breast tissue more evenly, put a pillow or bath towel under your right shoulder and put your right hand under your head. Use the fingers of the left hand to check your breast. Use lotion or powder on the skin which will make it easier to move your fingers over your breasts. Follow the same method as you did while you were bathing, moving your fingers in a clockwise motion, using firm pressure and feeling all of your breast tissue from the outer edge to the nipple. Examine each breast in the same way.

The Best Time to Do BSE
Do your Breast Self-Examination about a week after the start of your menstrual period when the breasts are usually not tender. After menopause (change of life) or after hysterectomy, choose a day that is easy to remember, such as the first day of the month. By doing BSE regularly you will become familiar with how your breasts feel and will be able to detect a change in your breast tissue.

Why You Should Have a Mammogram
A mammogram is a low dose x-ray of the breast. A mammogram can find cancers too small to be felt by a woman herself, or her health care provider. Mammograms can also show changes in the breast tissue that could be a sign of very early breast cancer. When used with physical examination of the breast, mammography has proven to be effective in saving lives.

What to Do Should You Find a Change
If you notice a change in your breasts, see your doctor or health care provider soon. Important changes to report might include:

- A lump, thickening or hardening in your breast.
- Dimpling or puckering of the skin of your breast.
- Scaling of the skin around the nipple.
- Nipple discharge.

Don’t be alarmed. Most breast lumps or other changes are not cancer, but only your doctor can make the diagnosis.

Risk Factors for Breast Cancer
The most important risk factors for breast cancer are:

- Being a woman
- Getting older
- Having a close family member with breast cancer (mother, a sister, daughter)
- A mammogram every year for women age 40 or over (screening may begin earlier if clinically indicated)

Screening Guidelines:
The American Cancer Society (ACS) recommends the following guidelines for breast cancer screening of women without symptoms:

1. A mammogram every year for all women age 40 or over (screening may begin earlier if clinically indicated).
2. Clinical Breast Exam by a health care professional every 3 years for women aged 20 to 39, and annually for women age 40 and over.
3. Breast Self-Exam monthly for all women age 20 and over.

Make a Personal Plan
Make a personal plan for your breast care together with your doctor or health care provider. The American Cancer Society recommends these three steps to detect breast cancer early:

- Breast self-examination every month
- Regular breast examination by your doctor or health care provider
- Mammography according to the guidelines of the American Cancer Society

The recommendation of the American Cancer Society for mammography is:

- A mammogram every year for women age 40 or over

Mission Statement
The American Cancer Society is the nationwide, community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service.

Nuestra Misión
La Sociedad Americana del Cáncer es una organización voluntaria apoyada por la comunidad y dedicada a controlar el cáncer por medio de la investigación.
Este folleto fue posible por sus contribuciones a la Sociedad Americana del Cáncer.

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