

Learn all you can

Take time to learn all you can about your breast cancer and your treatment options. Don't let anyone pressure you into making decisions before you're ready. Talk with your doctor and make a plan. Bring a friend or family member with you to appointments. It's a good idea to get a second opinion.

Is a clinical trial right for me?

Taking part in a clinical trial research study offers the chance to try a new breast cancer treatment. You may benefit from the new treatment, but it may also help others in the future. Talk with your doctor to see if there is a clinical trial that is right for you.



Types of Treatment

Treatment for breast cancer includes some combination of surgery, radiation therapy, chemotherapy, hormone therapy and targeted therapy. The goal of treatment is to remove the cancer and keep it from coming back.

Types of Surgery

Surgery may be a lumpectomy (also called breast conserving surgery) or a mastectomy. With either type of breast surgery, some lymph nodes in the underarm area (axillary nodes) may be removed. They are checked to see if they contain cancer.

- **Lumpectomy** removes the tumor and some normal tissue around the tumor. The general shape of the breast and the nipple area are preserved (as much as possible).
- **Mastectomy** removes the entire breast. The choice of surgery does not affect whether you will need chemotherapy, hormone therapy and/or targeted therapy. Drug therapies are given based on the characteristics of the tumor, not the type of surgery you have. Overall survival with lumpectomy plus radiation therapy is the same as with mastectomy.

Side effects from either surgery can include pain, numbness and lymphedema if lymph nodes were removed or treated with radiation therapy. Lymphedema is a fluid build-up that causes swelling in the arm, hand or other areas.

Radiation Therapy

Radiation therapy uses high energy X-rays to kill cancer cells that may be left in or around the breast or nearby lymph nodes after surgery. This lowers the chances of recurrence (the return of cancer). Radiation is usually given after lumpectomy and in some cases after mastectomy.

Side effects such as fatigue may begin within a few weeks of starting treatment and go away after it ends. During treatment, the treated breast may be rough to the touch, red (like a sunburn), swollen and sore.

For more information, visit komen.org or call Susan G. Komen's breast care helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday, 9 AM to 10 PM ET.

Resources

Susan G. Komen®

1-877 GO KOMEN
(1-877-465-6636)
komen.org

Komen Treatment Assistance Program

1-877-465-6636

BreastCancerTrials.org

1-415-476-5777

National Coalition for Cancer Survivorship

1-877-NCCS-YES
(1-877-622-7937)
canceradvocacy.org

The Patient Advocate Foundation, Co-Pay Relief

1-866-512-3861
copays.org

Related educational resources:

- Biosimilars
- Breast Reconstruction & Prosthesis After Mastectomy
- Clinical Trials
- Hormone Therapy for Early Breast Cancer
- Targeted Therapies

Chemotherapy

Chemotherapy drugs kill or disable cancer cells that may have spread from the breast to other parts of the body. It's usually given over 3-6 months, with days or weeks off between treatments. This gives your body a chance to recover. The schedule depends on the combination of drugs used.

Short-term side effects can include hair loss, nausea and vomiting, fingernail and toenail weakness, mouth sores, fatigue and lowered blood cell counts.

Long-term side effects can include early menopause, weight gain and problems with memory and concentration (sometimes called "chemo-brain").

Hormone Therapy

Hormone therapy drugs slow or stop the growth of hormone receptor-positive tumors by preventing the cancer cells from getting the hormones they need to grow. Tamoxifen and aromatase inhibitors are drugs taken in pill form every day for 5-10 years. Another form of hormone therapy is ovarian suppression, which prevents the ovaries from making estrogen. This can be done with medications or with surgery.

Side effects most often include menopausal symptoms, such as hot flashes (and with aromatase inhibitors, joint and muscle aches).

- **Tumor profiling** tests give information about the genes in cancer cells. Tumor profiling is used to help make treatment decisions in some people with estrogen

receptor-positive cancers. It can help predict the benefit of chemotherapy added to hormone therapy.

Targeted Therapy

Targeted therapy drugs kill cancer cells with certain markers or proteins. For example, trastuzumab (Herceptin), treats HER2-positive breast cancers.

Since targeted therapies only work on cancers that have specific markers or proteins, not everyone can use these drugs. Targeted therapies offer much promise for the future.

Side effects are different depending on what drug is given.

- **Biosimilars** are "generic-like" versions of biologic drugs. Biosimilars are just as safe and effective as the original biologic. There are a few FDA-approved trastuzumab (Herceptin®) biosimilars that will provide other treatment options for HER2-positive breast cancer sometime in 2019.

Complete your treatment plan

It's important to follow your treatment plan as prescribed by your doctor. People who complete their treatment plan have a higher chance of survival than those who don't. If you have any side effects, tell your doctor right away. He/she may be able to manage these side effects or change your treatment plan.

The list of resources is only a suggested resource and is not a complete listing of breast health and breast cancer materials or information. The information contained herein is not meant to be used for self-diagnosis or to replace the services of a medical professional. Komen does not endorse, recommend or make any warranties or representations regarding the accuracy, completeness, timeliness, quality or non-infringement of any of the materials, products or information provided by the organizations referenced herein.