

TREATMENT OVERVIEW FOR EARLY BREAST CANCER

Is a clinical trial right for me?

Taking part in a clinical trial may give you the chance to try a new breast cancer treatment. Talk with your doctor to see if there's a clinical trial that's right for you. For more information or resources about clinical trials, call the [Komen Clinical Trial Information Helpline](#) at 1-877 GO KOMEN (1-877-465-6636) or email at clinicaltrialinfo@komen.org.

Complete your treatment plan

You and your doctor will choose treatments that fit your values and lifestyle. Follow your treatment plan as prescribed. People who complete treatment have a higher chance of survival. If you have any side effects, tell your doctor right away. They may be able to help manage them or change your treatment plan.

Treatment for early breast cancer includes some combination of surgery, radiation therapy, chemotherapy, hormone therapy and/or HER2-targeted therapy. The goal is to remove the cancer and kill any cancer cells that might still be in the body.

Each person's treatment is tailored to their:

- Specific breast cancer
- Stage of the breast cancer
- Overall health, age and other medical issues
- Personal preferences

You can play an active role by understanding your diagnosis, your treatment options and possible side effects.

After you get a treatment plan from your doctor, study your options to make an informed choice. Each option has risks and benefits. You can also think about your own values and lifestyle. You may want to get a second opinion.

Types of Surgery

Surgery may be:

- **Lumpectomy** (breast conserving surgery) removes the tumor and some normal tissue around the tumor. With lumpectomy, the breast looks as close as possible to how it did before surgery.
- **Mastectomy** removes the entire breast.

With either type of surgery, some lymph nodes in the underarm area may be removed. These are called axillary nodes. They're checked to see if they contain cancer.

For those who have a choice, survival with lumpectomy plus radiation is the same as with mastectomy.

Also, the type of surgery does not affect whether you'll need other treatments. Drug therapies are given based on the tumor characteristics, not the type of surgery you have.

Side effects - after either surgery, you'll have some numbness and soreness. If lymph nodes were removed or treated with radiation, there's a risk of **lymphedema**. This is a swelling in the arm, hand or other areas.



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.

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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
breastcancertrials.org

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:

- [Radiation Therapy for Early Breast Cancer](#)
- [Chemotherapy for Early Breast Cancer](#)
- [Breast Reconstruction or Prosthesis After Mastectomy](#)
- [Clinical Trials](#)
- [Hormone Therapy for Early Breast Cancer](#)
- [Targeted Therapies for HER2-Positive Breast Cancer](#)

Radiation Therapy

Radiation uses X-rays to kill cancer cells. The goal is to destroy any cancer cells that may be left in or around the breast or nearby lymph nodes after surgery. This lowers the risk of **recurrence**. Radiation is given after lumpectomy and in some cases, after mastectomy.

Side effects - fatigue is a common side effect. And, the breast may be rough to the touch, red (like a sunburn), swollen and sore.

Chemotherapy

Chemotherapy kills cancer cells that may have spread from the breast to other parts of the body. It's given over 3-6 months, with days or weeks off in between.

Short-term side effects can include:

- Hair loss
- Nausea and vomiting
- Fingernail and toenail weakness
- Mouth sores
- Fatigue
- A drop in red and/or white blood cells

Long-term side effects can include:

- Early menopause
- Weight gain
- Problems with memory and concentration ("chemo-brain")

Hormone Therapy

Some breast cancers need the hormones estrogen and/or progesterone to grow. When these hormones attach to special proteins called hormone receptors on the cancer cells, the cancer cells grow.

Hormone therapy drugs slow or stop the growth of hormone receptor-positive tumors by blocking the cancer cells from getting the hormones. Tamoxifen and aromatase inhibitors (AIs) are pills taken every day for 5-10 years. Another form of hormone therapy is ovarian suppression, which blocks the ovaries from making estrogen. This can be done with drugs or with surgery.

Side effects - often include menopausal symptoms, such as hot flashes and night sweats (and with AIs, joint and muscle aches).

HER2-Targeted Therapy

Some breast cancers have high amounts of a protein called HER2 on the surface of the cancer cells (called HER2-positive breast cancer). **HER2-targeted therapies** treat only these breast cancers. Some HER2-targeted drugs are trastuzumab (Herceptin) and pertuzumab (Perjeta). These drugs are given by vein (through an IV). Trastuzumab can also be given by injection.

Side effects - may include heart problems. Your heart will be checked before and during treatment. They can also cause nausea, fatigue and other side effects.

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