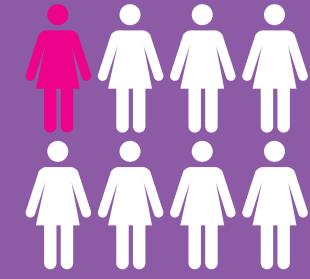




ABOUT BREAST CANCER

Breast cancer is the most common non-skin cancer among American women. Advances in breast cancer treatment mean many women today can expect to beat the disease and maintain their physical appearance.



1 in 8 women

will develop invasive breast cancer during her lifetime.



63,410

About

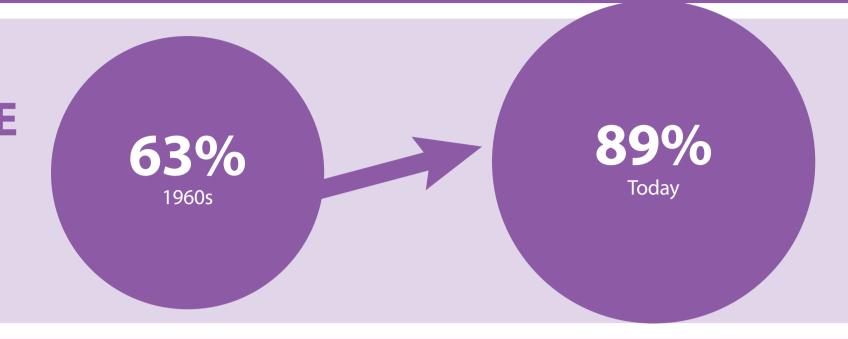
new cases of non-invasive carcinoma in situ, the earliest form of breast cancer, will be diagnosed in 2017.

About

252,710

new cases of invasive breast cancer will be diagnosed in 2017.

5-YEAR **SURVIVAL RATE FOR WOMEN WITH BREAST CANCER**



RISK FACTORS



Most invasive breast cancers are found in women ages

55 or older.



Breast cancer is

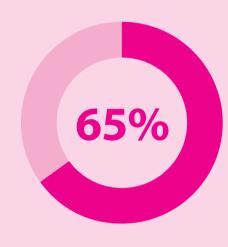
100 times

more common in women than men. About 2,470 men will be diagnosed with invasive breast cancer in 2017.



Women with an **immediate blood relative**, such as a mother or sister, who has had breast cancer are

twice as likely to develop the disease.



Women with a mutated BRCA1 gene have about a

55-65 percent

lifetime risk of developing breast cancer. The average woman's lifetime risk is 12%.



Women with less fatty tissue and more glandular and fibrous tissue may be at **higher risk for** developing breast cancer.



Fat tissue may contribute to increases

in estrogen levels, and high levels of estrogen may increase the risk of breast cancer.



Alcohol use is linked to an increased risk of

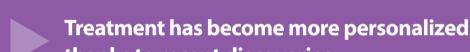
developing breast cancer. The risk increases with the amount of alcohol consumed.

TREATMENT OPTIONS



Treating breast cancer has advanced significantly in the past 30 years.

Most women today do not need a mastectomy and can be treated just as effectively with a lumpectomy. Modern radiation techniques are better at avoiding damage to healthy tissue and chemotherapy has less serious side effects.



thanks to recent discoveries. Researchers have identified estrogen receptor-positive (ER+) breast cancer and

the link between the human epidermal growth factor receptor 2 (HER2) protein and breast cancer growth. An understanding of the biological type of breast cancer informs treatment options today. Healthy breast cells contain receptors for the hormones estrogen and progesterone. They also contain receptors for a protein called HER2, which stimulates normal cell growth.



INVASIVE

DUCTAL CARCINOMA

is the **most**

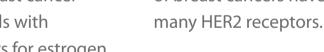
common type of breast cancer. It may spread to other parts of the body through the blood

> infiltrating, ductal carcinoma begins in a milk duct and grows into the fatty tissue of the breast.





with breast cancer have cells with



receptors for estrogen and progesterone.







of all breast cancers

do not contain receptors for estrogen, progesterone, or HER2. This type of breast cancer is triple-negative.



Surgery The type of surgery you have depends on your

• **Lumpectomy:** Only the tumor is removed. It's also known as breast conservation therapy.

individual case. Surgical options include:

- Mastectomy: All breast tissue is removed. In many cases, breast skin and the nipple can be spared.
- Breast reconstruction: The breast is rebuilt after a total mastectomy.
- Oncoplastic: The tumor is removed and breast is reshaped to prevent contour deformities.



Typically used to treat patients with locally advanced or

have chemotherapy:

Chemotherapy

• **Before surgery (neo-adjuvant):** To reduce the size of large tumors and destroy cancer cells

metastatic breast cancer. Women with early stage disease may

- After surgery (adjuvant): To destroy remaining cancer cells and prevent the disease from spreading
- **Radiation therapy**



cells that remain after breast-sparing surgery.

Used to **shrink a large tumor** before surgery or destroy cancer

Advanced radiation therapy techniques and technologies can target the tumor while sparing healthy tissue. These include: intensity modulated radiation therapy and high-dose rate (HDR) brachytherapy.



Targeted therapy Prevents cancer cells from dividing or destroys cancer cells

directly. The drug Herceptin® is a targeted therapy for tumors





Adds, blocks or removes hormones from the body to slow or stop the

that produce too much of the HER2 protein.

Hormone therapy

• Selective estrogen receptor modulators: Drugs that block estrogen from reaching cancer cells. Tamoxifen is a commonly used hormone therapy to prevent breast cancer recurrence.

growth of cancer cells. Two common types of hormone therapy are:

• **Aromatase inhibitors:** Drugs that block estrogen production to starve cancer cells of estrogen that fuels cell growth.

DUCTS and lymph systems. Invasive, or

UNDERSTANDING THE DISEASE Breast cancer forms in tissues of the

breast. About 1 in 5 new breast cancer

cases are ductal carcinoma in situ. This type of breast cancer begins in the milk ducts, the tubes that carry breast milk from the lobules to the nipple. Nearly all women treated at this early stage can expect to be cancer-free. Common breast cancer

Skin changes, Nipple discharge such as swelling other than

signs and symptoms:

and redness • An increase in size or change in shape of

the breast(s)

 General pain in/on any part of

breast milk

 Changes in the appearance of one

or both nipples

- the breast Lumps or nodes
- Symptoms specific to
- the breast

felt on or inside of

Irritated or Changes in touch (may feel hard, itchy breasts

invasive breast cancer

- Change in breast color Increase in breast
- size or shape over a short period of time

A breast lump or

In 2009, the U.S.

women begin routine

the nipple skin Redness or pitting

of the breast skin

(like the skin of an

tender or warm)

Peeling or flaking of

thickening



orange)

GUIDELINES Preventive Services Task

Force recommended that mammograms at age 50, and then get the test every two years.

The American Cancer Society and many physicians say women still should begin annual mammograms at age 40. Women at higher risk for breast cancer, such as those with a family history,

should discuss the most appropriate

screening plan with their doctor.



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