

RESOURCE GUIDE

An [ACT]IVATED patient is informed, empowered, and engaged in their care.

- Get information about choosing a breast cancer specialist or treatment center
- Talk with family and friends about how you feel and how they can help you
- Find out what your insurance covers
- Ask your doctor if you have any specific mutations and how that relates to treatment options
- Talk openly with your doctor about your fears or concerns
- Determine if financial assistance is available

STAGES OF BREAST CANCER

Breast cancer is typically assigned a stage from zero to IV, based on the size of the cancer, whether the cancer has spread to other parts of the body and other factors.

- **Early stage:** includes any stage that is lower than IV (stage zero to III)
- **Stage zero:** ductal carcinoma in situ (DCIS), this means the cancer cells are just in the milk ducts and have not spread beyond those milk ducts
- **Stages I to III:** Cancer cells have spread beyond the milk ducts to the surrounding breast tissue and may have spread to lymph nodes under the arm or in the chest
- **Stage IV:** also called metastatic breast cancer; Cancer cells have spread from breast to other distant organs like the lungs, liver, or bone

If you have a higher stage breast cancer, the risk of your breast cancer reoccurring after treatment is higher

SUBTYPES OF BREAST CANCER

When looking cancer cells under the microscope, doctors look at specific proteins of the cells. Based on what proteins are seen, cells are designated as positive or negative for the estrogen receptor, progesterone receptor, or a protein called HER2.

Different subtypes include:

- Hormone receptor-positive and HER2-negative
- Hormone receptor-positive and HER2-positive
- Hormone receptor-negative and HER2-positive: also called triple-negative
 - This means your breast cancer is negative for all three proteins; it does not have the estrogen receptor, progesterone receptor or the HER2 protein. This type of cancer tends to be more aggressive and harder to treat
 - Black women are more likely to be diagnosed with triple-negative breast cancer than white women

BREAST CANCER EXPERT TIPS

[ACT]IVATION TIP: "Ask your doctor: What stage is my breast cancer? Is it potentially curable? Has my breast cancer spread? If so, where? What is the risk of my breast cancer coming back after it's treated?"

- Dr. Demetria Smith-Graziani

[ACT]IVATION TIP: "Put a list of questions together about your concerns about your diagnosis and your treatment, and if you are feeling like you're not heard, look for other doctors to talk to to get a second opinion."

- Dr. Demetria Smith-Graziani

[ACT]IVATION TIP: "Ask your doctor about the standard of care or clinical trial options for immunotherapy for your cancer, and if it would be beneficial to do any testing on your cancer to assess the benefit of immunotherapy."

- Dr. Demetria Smith-Graziani

[ACT]IVATION TIP: "Be aware of the fact that disparities in breast cancer exist. Have an open and honest discussion with your physicians about your particular breast cancer risk and the specific treatment recommendations that you receive. Ask why you're receiving those recommendations and how people who get those treatments usually do."

- Dr. Demetria Smith-Graziani

BREAST CANCER RESOURCES

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| • ACCC | • Triage Cancer | • National Breast Cancer Foundation | • Surviving Breast Cancer |
| • CancerCare | • Cancer Support Community | • Living Beyond Breast Cancer | • After Breast Cancer Diagnosis |
| • Cancer Grace | • Breastcancer.org | • Breast Cancer Research Foundation | • American Breast Cancer Foundation |
| • Family Reach | • Komen.org | • Triple Negative Breast Cancer Foundation | |

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