



Women's Health Research Institute
Putting Women First

OCTOBER 2014

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Dear Friends,

This October is the 29th Anniversary of National Breast Cancer Awareness Month! Breast cancer continues to be the most common cancer in women in the United States. The incidence rates projected this year are 232,670 new cases in women and 2,360 new cases in men. However, due to better increased awareness and new treatments the five-year survival rate is steadily improving. In 1985, the survival rate was 78.4% and today it is over 90%!

We all know someone with breast cancer and understand that completing treatment can be a relief but also be stressful. In this edition of our monthly newsletter, we focus on survivorship and ways to help individuals who have traveled this road lead full and meaningful lives.

Sincerely,

The Institute Staff

After Breast Cancer

The current breast cancer treatments are improving and survival rates continue to increase. However, there is no denying that a cancer diagnosis emotionally



impacts the survivor and her family, and it could take years to reduce the fears and changes that come with a cancer diagnosis. Many survivors learn to live with this uncertainty and are leading meaningful lives. In some cases, the cancer never returns and, in time, one's life becomes relatively normal. In other cases, the treatments worked but caused long-term side effects that require continual monitoring, potentially altering one's former lifestyle. For some, the cancer may recur but new treatments can keep it under control for many productive years.

Followup Treatment

After treatment, ongoing followup is critical. Initially, the oncology team will continue monitoring the patient for immediate complications. In time, if there is no evidence of cancer, the patient will return to her primary care provider for most of her followup.

Many cancer survivors continue with an annual visit to their oncologist/surgeon for several years while also seeing their primary care provider for overall monitoring of conditions like heart and bone health. Followup screening tests like mammograms and blood marker tests for cancer will depend on the type and stage of cancer treated. Survivors who are taking long term endocrine therapy like tamoxifen or an aromatase inhibitor may continue seeing their medical oncologist once or twice a year.



Side Effects of Breast Cancer Treatment

Side effects from cancer treatment can begin during treatment and continue after all treatment is stopped. Some late effects may appear weeks, months, or even years after treatment. Side effects, depending on the type of treatment, may include:

- Fatigue
- Headaches
- Pain or numbness especially in the legs
- Lymphedema
- Dental problems
- Muscle and bone symptoms
- Osteoporosis
- Heart problems
- Cataracts
- Blood clots
- Menstrual and menopausal issues
- Sexual difficulties
- Infertility
- Cognitive/memory issues.

Some of these problems are followed by the cancer treatment team, especially if they occur during or immediately after one's treatment. Other symptoms that are long- or late-term can be managed by a primary care physician or other specialist. Though, it is important that the provider is familiar with the cancer treatments received and have access to the patient's oncology team, should any suspicious or serious side effects arise even years after the cancer treatment. Recovering cancer patients should provide their primary provider copies of any pathology reports, operative reports, hospital discharge summaries, radiation reports, and list of all drug therapies received.

Some of the more common after effects of breast cancer treatment are discussed below.

Lymphedema

Lymphedema is a swelling in the arm due to the fluid buildup that can occur if lymph nodes are cut or blocked due to breast surgery or radiation. New surgical techniques and more targeted radiation reduces this likelihood, but it still can occur even years after treatment. It is important to report any swelling, stiffness, or injury to the arm or hand on the treated side so that steps can be done to keep the swelling under control. Women should not allow blood to be drawn or blood pressures taken on the arm on the side of the breast cancer surgery.

Menopause Symptoms



Some cancer treatments like chemotherapy could cause women to go into early menopause. This can trigger menopausal symptoms like bone loss, hot flashes, vaginal dryness, etc. at an earlier age. There are treatments for these symptoms, but some hormonal therapies could increase the risk for breast cancer recurrence and most doctors will not prescribe them. A number of new non-hormonal therapies that relieve menopausal symptoms are available that may be better options for breast cancer survivors. Women with severe symptoms should discuss options with their doctors.

Sexuality after Breast Cancer

Body image changes (for instance, hair loss and weight gain or loss) and treatments that impact hormone levels can reduce a women's interest or response to sex. Breast sensation can change due to surgery, radiation, or reconstruction. Partners are also affected and may be reluctant to touch a recovering patient. Most cancer treatment facilities have support groups and counselors to help address these issues. There are also a number of booklets available about sexuality and cancer. The American Cancer Society has one entitled *Sexuality for the Women with Cancer*.

Pregnancy After Breast Cancer

Since many breast cancers are estrogen dependent, there is some concern that the high hormones levels including estrogen associated with pregnancy could trigger a recurrence. More recent studies have shown that pregnancy does not

increase the risk of recurrence, but many doctors still advise women to delay pregnancy for two years once all treatments are complete. Young women diagnosed with breast cancer who want to have children should discuss their fertility preservation options with their doctor **BEFORE** they start treatment because some treatments can affect fertility. For more information on fertility preservation, visit the [Oncofertility Consortium Website](#).



Muscle and Bone Symptoms



Certain therapies such as Aromatase Inhibitors (AI) are often given to women who are post menopause instead of tamoxifen or after tamoxifen. The most common side effect is bone and muscle pain and can lead to thinning, more breakable bones. This is very concerning because many women feel that bone pain is a sign that cancer has spread to the bone when it may not be the case.

Cognitive and Memory Issues

According to MD Anderson Cancer Center, "chemobrain," formally known as cognitive dysfunction, is a common symptom reported by cancer patients who report difficulty in efficiently processing information. It is a legitimate, diagnosable condition that may be caused by chemotherapy, the cancer itself, or secondary medical conditions like anemia that is related to treatment. It should be reported to your doctor who may refer you to a neuropsychologist for evaluation, which should be covered by insurance. [Click here to learn more.](#)

Concerns about Recurrence

The fear of recurrence or finding a new cancer is one of the biggest worries for breast cancer survivors. Beyond professional medical and mental intervention, many support groups and survivors have compiled lists of lifestyle changes that help women become more healthy, strong, and optimistic.

- Make healthier choices (limit alcohol, stop smoking, eat better)
- Reduce stress (get counseling, join a support group, exercise, garden, have massage therapy, yoga, guided imagery)
- Rest (fatigue is common, it will take time to resume your normal activity)
- Beyond cancer followup, have annual checks of your cholesterol, glucose, blood pressure, etc.
- Don't self-diagnose, if you have a problem, see your doctor
- Resume the hobbies you enjoyed



A new program for metastatic breast cancer (MBC) patients and their families will be held prior to the Lynn Sage Breast Cancer Town Hall meeting on Sunday, October 19, 2015. Learn about key developments in the treatment of Stage IV breast cancer and meet a network of survivors. Learn more [HERE](#).

Author: Sharon Green, WHRI Director

Sources:

[John Hopkins Medicine](#)

http://www.hopkinsmedicine.org/avon_foundation_breast_center/

[American Cancer Society](#)

(www.cancer.org/cancer/breastcancer/detailedguide/breast-cancer)

[MD Anderson Cancer Center](#) <http://www.mdanderson.org/patient-and-cancer-information/cancer-information/cancer-topics/dealing-with-cancer-treatment/chemobrain/index.html>

Support where and when you want it!

The Robert H. Lurie Comprehensive Cancer Center of Northwestern University has created *Cancer Support: Services and Resources*, a guide for patients including services available on the internet. A copy of this leaflet can be downloaded [HERE](#).

The Cancer Survivorship Institute at the Robert H. Lurie Comprehensive Cancer Center of Northwestern University is an interdisciplinary institute that brings together clinicians and scientists to stimulate and support exceptional cancer survivorship patient care and research programs. Learn more [HERE](#) to learn more about the clinics available to you.

LYNN SAGE TOWN HALL MEETING FOR BREAST CANCER SURVIVORS

This FREE interactive discussion about breakthroughs in breast cancer is a unique opportunity to have your questions answered by the experts at Northwestern's Lurie Cancer Center. Visit exhibits to discover breast cancer resources in your community and learn about local and national organizations providing support.

Sunday, October 19, 2014
Registration/Exhibits open: Noon
Program: 1:00 pm - 3:30 pm.

Robert H. Lurie Medical Research Center
Hughes Auditorium
303 E. Superior St., Chicago

To register: [CLICK HERE](#) or call 312-695-1304

UPCOMING WHRI EVENTS

October 21, 2014 ['Sexual Dimorphism in Musculoskeletal Health'](#)
Laura Gehrig, MD

November 21, 2013 ['Treating Women Differently: The Case for Sex-based Medicine'](#) Faculty from Northwestern Medicine

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