

Managing Breast Cancer





When you learn you have cancer you may feel a range of emotions such as fear, worry, denial, sadness, and anger. Having cancer can also make many of your emotions seem more powerful. They may change daily, hourly, or even minute to minute.

Learning what to expect may help you feel more at ease. It can also help you be better prepared to make decisions about your care. Work closely with your health care team to create a treatment plan that's best suited to you and your preferences. If you're concerned about your treatment plan or possible side effects, let your health care team know.^{1,2}

Note: If you would like to learn more about breast cancer and how it's diagnosed, there is a companion piece to this brochure titled, *About Breast Cancer*.



Planning Your Treatment

There are many treatments available for women with breast cancer. These factors will help guide the best treatment options for you:³

- The stage of the cancer – The tumor size and whether it has spread to other parts of the body
- The type of breast cancer
- The levels of estrogen and progesterone receptors in the tumor
- The amount of human epidermal growth factor type 2 receptors (HER2/neu) in the tumor
- Whether the tumor is triple negative (cells do not have estrogen receptors, progesterone receptors, or high levels of HER2/neu)
- How fast the tumor is growing
- The likelihood the cancer may come back (recur)
- The person's age and general health status
- In women, whether she has been through menopause
- Whether this is the first diagnosis of breast cancer, or if the breast cancer has come back (recurred)



Types of Treatment for Breast Cancer

These are the standard treatments currently available for treating breast cancer. Others are being tested in clinical trials.



Surgery. Most patients will have some type of surgery to remove the cancer which may include:^{3,4}

- **Lumpectomy** (breast-conserving surgery) – Surgery to remove the cancer (the lump) and some normal tissue around it. The goal is to preserve as much of your breast as possible.
- **Total mastectomy** – Surgery to remove the entire breast that has cancer. Some lymph nodes in the underarm area may also be removed and checked for cancer.
- **Modified radical mastectomy** – Surgery to remove the entire breast with cancer, many lymph nodes from the underarm area, the lining over the chest muscles, and the muscles of the chest wall.



Radiation therapy. This type of cancer treatment uses high-energy x-rays or other types of radiation to kill cancer cells or keep them from growing further. There are two types of radiation therapy. External radiation uses a machine outside the body to direct radiation toward the breast. Internal radiation involves placing radioactive material inside the body. Internal radiation is usually used to treat breast cancer that has spread to the bones.³



Chemotherapy. Chemotherapy uses drugs to kill cancer cells or stop them from dividing. It works by entering the bloodstream where it can reach cancer cells throughout the body. In some cases chemotherapy may be given before surgery to shrink the tumor to reduce the amount of tissue that needs to be removed. Chemotherapy can also be used to treat cancer in the lymph nodes.^{3,5}



Hormone therapy. Hormones are substances made by glands in the body that flow in the bloodstream. Some hormones, such as estrogen, can cause certain breast cancers to grow. Hormone therapy removes hormones or blocks them from working which can stop cancer cells from growing.³



Targeted drug therapy. Targeted therapy uses drugs or other substances to find and attack specific types of cancer cells. Targeted therapies usually cause less harm to healthy, normal cells than chemotherapy or radiation. A number of targeted therapies are approved to treat metastatic breast cancer (cancer that has spread to other parts of the body). More are currently being studied.^{3,6}



Immunotherapy. This type of treatment uses the patient's own immune system to boost, direct, or restore the body's natural defenses against the cancer. Immunotherapy is a type of biologic therapy.³

Neoadjuvant Therapy – Treatment of breast cancer prior to surgery (also called preoperative therapy). Neoadjuvant therapy may include radiation therapy, chemotherapy, hormone therapy, or targeted therapy.⁷

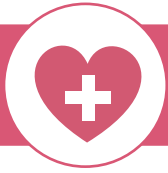
Adjuvant Therapy – Treatment that is given after breast cancer surgery to help lower the chances the cancer will recur. This treatment may include radiation therapy, chemotherapy, hormone therapy, targeted therapy, or biologic therapy.⁸



Possible Treatment Options by Breast Cancer Stage

Stage	Definition ⁹	Treatment Options ^{5,6,10-13}
Stage 0	Non-invasive cancer: No signs of cancer cells or abnormal non-cancerous cells breaking out from the part of the breast where they started. No signs of the cancer getting through to or invading neighboring normal tissue.	<ul style="list-style-type: none"> • Total mastectomy (radiation after mastectomy rarely needed) • Lumpectomy plus radiation • Lumpectomy alone • Hormone therapy (usually prescribed though estrogen receptor status isn't always known)
Stage IA and IB	Invasive breast cancer: Cancer cells are breaking through from where the cancer started or are invading normal breast tissue.	<ul style="list-style-type: none"> • Total mastectomy (radiation after mastectomy rarely needed) • Lumpectomy plus radiation • Lumpectomy alone (only occasionally) • Chemotherapy • Hormone therapy (if cancer is hormone-receptor-positive) • Targeted therapy (if cancer has certain characteristics) • Immunotherapy (if cancer is triple negative) • Sentinel lymph node biopsy*
Stage IIA and IIB	Invasive breast cancer: The tumor is larger than stage I and is only in the breast, is only in the lymph nodes alone, or is in the breast and has spread to lymph nodes.	<ul style="list-style-type: none"> • Total mastectomy (radiation after mastectomy may be needed) • Lumpectomy plus radiation • Chemotherapy • Hormone therapy (if cancer is hormone-receptor-positive) • Targeted therapy (if cancer has certain characteristics) • Immunotherapy (if cancer is triple negative) • Sentinel lymph node biopsy*
Stage IIIA, IIIB, and IIIC	Invasive breast cancer: The tumor in the breast is larger and/or cancer has spread to more lymph nodes than Stage II cancer. This stage also includes inflammatory breast cancer.	<ul style="list-style-type: none"> • Total mastectomy followed by radiation • Chemotherapy followed by lumpectomy and radiation • Chemotherapy followed by total mastectomy and radiation • Hormone therapy (if cancer is hormone-receptor-positive) • Targeted therapy (if cancer has certain characteristics) • Immunotherapy (if cancer is triple negative) • Removal of axillary lymph nodes • Radiation to lymph nodes
Stage IV	Invasive breast cancer: Cancer that has spread beyond the breast and lymph nodes to other parts of the body such as the lungs, skin, bones, liver, or brain. Also called metastatic or advanced cancer. While metastatic breast cancer can't be cured today, it can be treated. The focus of treatment is to extend life and maintain quality of life. As treatment continues to improve, so does survival.	<ul style="list-style-type: none"> • Treatment of the breast with surgery, radiation, or both • Treatment of enlarged lymph nodes • Chemotherapy • Hormone therapy (if cancer is hormone-receptor-positive) • Targeted therapy (if cancer has certain characteristics) • Immunotherapy (if cancer is triple negative) • Radiation or surgery to relieve or control symptoms in other parts of the body

*Sentinel lymph node biopsy – The sentinel lymph nodes are the first group of lymph nodes where cancer is likely to spread. With this type of biopsy, a sentinel lymph node is removed, and the tissue is viewed under a microscope to look for cancer cells.³



Partnering with Your Health Care Team



To help make sure you get the care and treatment that's best for you, it's important that you partner with your doctor and other members of your health care team. As partners you can work together to make decisions about your treatment. This is called shared decision-making. Good communication is also key. As a partner:¹⁴

- Prepare for doctor visits. Have questions written down ahead of time. Bring a friend or family member with you to help you remember everything. Take notes during the visit.
- Ask questions until you feel you have the information you need to make decisions.
- If there's something you don't understand, ask your doctor to explain it differently.
- If you need support, ask your health care team to help you find resources.
- Talk about any concerns you have about how cancer will affect your life and the things you do.
- Let your doctor know about your life at home and any challenges or concerns you have.
- Don't hold back information. Be honest about your habits even if they are habits you'd rather not talk about.
- Always report any side effects or new symptoms right away.



Getting Support When You Have Breast Cancer

Getting the support you need during and after breast cancer treatment is important for your health and well-being. You may have a hard time asking for help, and family and friends want to help, but they don't know how. Talk to your family and friends. Let them help you:^{1,15}

- Share your feelings and concerns with a close friend.
- Ask a friend or family member for rides to and from treatment appointments.
- Take people up on offers to help with everyday tasks like grocery shopping, cooking, cleaning, or childcare.

You might also consider joining a breast cancer support group. This lets you talk with people who have similar experiences. You can attend these groups in person, online, or over the phone. Getting one-on-one help from a counselor or therapist can help, too. Talk with your doctor. There are many resources available.

Tips to help you cope with your feelings^{1,15}

- Treat yourself to things you enjoy. Take a nap or a hot bath. Eat your favorite foods.
- Do something fun. Go to a movie, to a play, out to dinner, or to a ball game.
- Make time to relax. Don't try to get everything done in one day, and don't try to do everything yourself.
- Stick with healthy habits. Be active and eat nutritious meals.



Caring for Your Health



Good nutrition and regular physical activity are an important part of cancer treatment. Talk with your health care team about a nutrition and physical activity plan that can work for you.^{2,16}



Nutrition

Good nutrition can help your body can function at its best. In fact, some cancer treatments work better when you're well-nourished and getting enough calories and protein.²

Before treatment starts^{2,17}

- Stock your kitchen with foods you think you might want to eat even when you feel sick.
- Keep foods on hand that are ready-to-eat and require little or no cooking.
- Cook foods ahead of time and freeze them in meal-sized portions.
- Ask family and friends if they can help with grocery shopping and cooking.

During treatment^{2,17}

- Try to eat high-calorie, high-protein foods at every meal and snack.
- If you can't eat a lot, have a small snack every few hours throughout the day rather than 3 large meals.
- When you don't feel like eating, try drinking a high-calorie, high-protein liquid meal replacement.
- Drink plenty of fluids. This is most important on days where eating is hard. Keep a water bottle handy. Also try clear liquids like broth, apple juice, sports drinks, and popsicles.
- If you can't eat anything on some days spend this time doing other things that help you feel better and eat when you can. If you can't eat for more than 2 days, let your doctor know.



Physical Activity

Regular physical activity is good for everyone. It can help improve your immune system, help you stay fit, and reduce feelings of stress and depression.

Before you get started... Talk with your doctor about the types of activities that are best for you. Ask about any limits you may have due to your treatments. Being active can help you safely return to your normal daily activities as soon as you can.^{11,14}

When you're being treated for cancer, physical activity may also help:^{16,18,19}

- Keep or improve your physical abilities to get things done.
- Reduce fatigue (feeling tired), a common side effect of cancer treatment.
- Improve your appetite.
- Ease swelling and discomfort caused by breast cancer-related fluid build-up in the fatty tissue just under your skin.

During your treatment and recovery:^{16,19}

- Don't exercise if you have an active infection or fever, just had surgery, feel very fatigued, or have a hard time walking.
- Take caution if you have other side effects that may make physical activity less safe and puts you at risk of falls or injury.
- Listen to your body. Don't do too much and rest when needed.
- If you can only be active for a few minutes a day, that's okay.

Getting Medical Care After Treatment

During breast cancer treatment, it's very important that you follow your treatment plan. It's also important that you get needed follow-up care after you've finished treatment. Follow-up care for breast cancer may include:²⁰

- Doctor visits
- Mammograms
- Pelvic exams
- Bone density tests

Blood tests and imaging tests (such as chest x-rays and bone scans) may be also done if there are signs that the cancer may have come back.

During follow-up care:²⁰

- Your doctor can examine you, watch you closely, and monitor any treatment side effects
- You can ask questions and talk about any side effects, changes, or other concerns you have

The type of follow-up care you need and how often you need it will depend on things like the type of breast cancer you were treated for, your stage at diagnosis, and the type of treatment you received. Talk with your doctor about a follow-up plan that's right for you.



References

1. American Cancer Society. Adjusting to life with cancer. Revised November 23, 2020. Accessed August 5, 2022. <https://www.cancer.org/content/dam/CRC/PDF/Public/9552.00.pdf>
2. American Cancer Society. Nutrition for the person with cancer during treatment. Accessed August 5, 2022. <https://www.cancer.org/content/dam/cancer-org/cancer-control/en/booklets-flyers/nutrition-for-the-patient-with-cancer-during-treatment.pdf>
3. National Cancer Institute. Breast cancer treatment (adult) (PDQ) – patient version. Updated April 18, 2021. Accessed August 5, 2022 https://www.cancer.gov/types/breast/patient/breast-treatment-pdq#_148
4. Breastcancer.org. Lumpectomy. Updated January 28, 2022. Accessed August 5, 2022. <https://www.breastcancer.org/treatment/surgery/lumpectomy>
5. Breastcancer.org. Stage IIIA, IIIB, & IIIC treatment options. Updated July 29, 2021. Accessed January 18, 2022. <https://www.breastcancer.org/treatment/planning/options-by-stage#section-stage-iiia-iiib-and-iiic>
6. Breastcancer.org. Stage IV treatment options. Updated July 29, 2021. Accessed August 5, 2022. <https://www.breastcancer.org/treatment/planning/options-by-stage#section-stage-iv>
7. Susan G. Komen. Neoadjuvant therapies. Updated May 29, 2022. Accessed July 28, 2022. <https://www.komen.org/breast-cancer/treatment/type/neoadjuvant-therapy/>
8. National Cancer Institute. NCI dictionary of cancer terms. Accessed July 29, 2022. <https://www.cancer.gov/publications/dictionaries/cancer-terms>
9. Breastcancer.org. Breast cancer stages. Modified May 11, 2021. Accessed August 5, 2022. <https://www.breastcancer.org/symptoms/diagnosis/staging#stage0>
10. Breastcancer.org. Stage 0 treatment options. Updated July 29, 2021. Accessed August 5, 2022. <https://www.breastcancer.org/treatment/planning/options-by-stage#section-stage-0>
11. Breastcancer.org. Stage IA & IB treatment options. Updated July 29, 2021. Accessed January 18, 2022. <https://www.breastcancer.org/treatment/planning/options-by-stage#section-stage-ia-and-ib>
12. Breastcancer.org. Stage IIA & IIB treatment options. Updated July 29, 2021. Accessed January 18, 2022. <https://www.breastcancer.org/treatment/planning/options-by-stage#section-stage-ii-a-and-ii-b>
13. Susan G. Komen. Living with metastatic breast cancer. Updated June 29, 2022. Accessed August 5, 2022 <https://www.komen.org/breast-cancer/metastatic/>
14. American Cancer Society. The doctor-patient relationship. Revised May 5, 2020. Accessed August 1, 2022. <https://www.cancer.org/treatment/treatments-and-side-effects/choosing-your-treatment-team/the-doctor-patient-relationship>
15. Susan G. Komen. Support after a breast cancer diagnosis. Accessed August 5, 2022. <https://www.komen.org/wp-content/uploads/Getting-the-Support-you-Need-1.pdf>
16. American College Sports Medicine. Being active when you have cancer. Accessed August 5, 2022. https://www.exerciseismedicine.org/wp-content/uploads/2021/04/EIM_Rx-for-Health_Cancer.pdf
17. National Cancer Institute. Eating hints: before, during, and after cancer treatment. Accessed August 5, 2022. <https://www.cancer.gov/publications/patient-education/eatinghints.pdf>
18. American Cancer Society. What is lymphedema? Revised May 25, 2021. Accessed August 5, 2022. <https://www.cancer.org/content/dam/CRC/PDF/Public/8901.00.pdf>
19. American Cancer Society. Physical activity and the person with cancer. Revised March 16, 2022. Accessed August 5, 2022. <https://www.cancer.org/content/dam/CRC/PDF/Public/9540.00.pdf>
20. American Cancer Society. Living as a breast cancer survivor. Revised January 5, 2022. Accessed August 5, 2022. <https://www.cancer.org/content/dam/CRC/PDF/Public/8583.00.pdf>