Learn all you can
Take time to learn all you can about your breast cancer and your treatment options. Don’t let anyone pressure you into making decisions before you’re ready. Talk with your doctor and make a plan. Bring a friend or family member with you to appointments. It’s a good idea to get a second opinion.

Types of treatment
Treatment for breast cancer includes some combination of surgery, radiation therapy, chemotherapy, hormone therapy and targeted therapy. The goal of treating breast cancer is to remove the cancer and keep it from coming back.

Types of Surgery
Surgery may be a lumpectomy (also called breast conserving surgery) or a mastectomy. With either type of breast surgery, some lymph nodes in the underarm area (axillary nodes) may be removed. They are checked to see if they contain cancer.

Lumpectomy removes the tumor and some normal tissue around the tumor. The general shape of the breast and the nipple area are preserved (as much as possible).

Mastectomy removes the entire breast. The choice of surgery does not affect whether you will need chemotherapy, hormone therapy and/or targeted therapy. Drug therapies are given based on the characteristics of the tumor, not the type of surgery you have. Overall survival with lumpectomy plus radiation therapy is the same as with mastectomy.

Side effects from either surgery can include pain, numbness and lymphedema if lymph nodes were removed. Lymphedema is a fluid build-up that causes swelling in the arm, hand or other areas.

Radiation therapy
Radiation therapy uses high energy X-rays to kill cancer cells that may be left in or around the breast or nearby lymph nodes after surgery. This lowers the chances of recurrence (the return of cancer). Radiation is usually given after lumpectomy and in some cases after mastectomy.

Side effects such as fatigue may begin within a few weeks of starting treatment and go away after it ends. During treatment, the treated breast may be rough to the touch, red (like a sunburn), swollen and sore.

Tumor profiling
Tumor profiling tests give information about the genes in cancer cells. Tumor profiling is used to help make treatment decisions in some people with estrogen receptor-positive cancers. It can help decide whether or not chemotherapy is needed in addition to hormone therapy.

Chemotherapy
Chemotherapy drugs kill or disable cancer cells that may have spread from the breast to other parts of the body. It’s usually given over 3-6 months, with days or weeks off between treatments. This gives your body a chance to recover. The schedule depends on the combination of drugs used.

Short-term side effects can include hair loss, nausea and vomiting, fingernail and toenail weakness, mouth sores, fatigue and lowered blood cell counts.

Long-term side effects can include early menopause, weight gain and problems with memory and concentration (sometimes called “chemo-brain”).
**Hormone therapy**

Hormone therapy drugs slow or stop the growth of hormone receptor-positive tumors by preventing the cancer cells from getting the hormones they need to grow. Tamoxifen and aromatase inhibitors are drugs taken in pill form every day for 5-10 years. Another form of hormone therapy is ovarian suppression, which prevents the ovaries from making estrogen. This can be done with medications or with surgery.

**Side effects** most often include menopausal symptoms, such as hot flashes (and with aromatase inhibitors, joint and muscle aches).

**Targeted therapy**

Targeted therapy drugs kill cancer cells with certain markers or proteins. For example, trastuzumab (Herceptin), treats HER2-positive breast cancer.

Since targeted therapies only work on cancers that have the specific markers they were designed to target, not everyone can use these drugs. However, targeted therapies offer much promise for the future.

**Side effects** are different depending on what drug is given.

**Is a clinical trial right for me?**

A clinical trial is a research study. Taking part in a clinical trial offers the chance to try a new breast cancer treatment and possibly benefit from it. Findings from the trial could also help other people. Talk with your doctor to see if there is a clinical trial that is right for you. BreastCancerTrials.org in collaboration with Susan G. Komen® offers a custom matching service to help you find a clinical trial that fits your needs.

**Complete your treatment plan**

It’s important to follow your treatment plan as prescribed by your doctor. People who complete their treatment plan have a higher chance of survival than those who don’t. If you have any side effects, tell your doctor right away. He/she may be able to manage these side effects or change your treatment plan to ease symptoms.

**Related Educational Resources:**

- Breast Reconstruction & Prosthesis After Mastectomy
- Clinical Trials
- Complementary and Integrative Therapies
- Lymphedema

**Resources**

Susan G. Komen®
1-877 GO KOMEN (1-877-465-6636)
www.komen.org

Komen Treatment Assistance Program
1-877-465-6636

National Cancer Institute’s Cancer Information Service
1-800-4-CANCER (1-800-422-6237)
www.cancer.gov

National Coalition for Cancer Survivorship
1-877-NCCS-YES (1-877-622-7937)
www.canceradvocacy.org

The Patient Advocate Foundation, Co-Pay Relief
1-866-512-3861
www.copays.org

The above list of resources is only a suggested resource and is not a complete listing of breast cancer materials or information. The information contained herein is not meant to be used for self-diagnosis or to replace the services of a medical professional. Komen does not endorse, recommend or make any warranties or representations regarding the accuracy, completeness, timeliness, quality or non-infringement of any of the materials, products or information provided by the organizations referenced herein.

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