

FACTS FOR LIFE If Breast Cancer Returns

Many women say that facing cancer the first time around was one of the hardest things they have ever had to do. There were so many new things to learn and tests to go through. When breast cancer returns (recurrence), a woman may know what to expect, but that does not mean that it is any easier.

Women who have a recurrence of breast cancer often feel angry and afraid. It does not seem fair that a disease they fought so hard to destroy would come back. Some women even second-guess the treatment choices they made earlier and wonder if they have the strength to go through it all again.

If you have had some of these thoughts, you are not alone. But, you must believe that you made the right decision at that time in your life. There is likely nothing more you could have done to stop your cancer from recurring.

Never give up hope that you will live a long life. Make a plan for treating your cancer. Find a support group for women who have had a recurrence of breast cancer. While it may be difficult at first, continue living your life as you want. Find the energy to do the things that make you happy. Talk to others about how they can help you live well each day.

Facts about recurrence

- Many recurrences are limited to the breast and can be completely removed by surgery.
- Nearly one-third of breast cancer recurrences are found by mammography, about half by physical exam and one-fifth by both.¹ That's why it is so important to get regular screenings after your first diagnosis.
- About 3 out of 5 women who treat a local recurrence by having a total mastectomy are disease-free 5 years later.²

Your cancer is less likely to recur if:

- You had no or few cancerous lymph nodes found during surgery.
- Your breast cancer was found early and was small.
- You had adjuvant therapy (chemotherapy and/ or hormone therapy) along with surgery.
- You have lived 5 to 10 years without a recurrence.
- 1 Orel SG, Troupin RH, Patterson EA, et al. (1992): Breast cancer recurrence after lumpectomy and irradiation: role of mammography in detection. Radiology, 183(1): 201-206.
- 2 Harris, Diseases of the Breast. 3rd ed. See Local-Regional Recurrence after Breast-Conserving Therapy or Mastectomy by Solin, L. et. al., 2004 (Lippencott).

For more information, call Susan G. Komen for the Cure[®] at 1-877 GO KOMEN (1-877-465-6636) or visit www.komen.org.

Starting a new treatment plan

Learn as much as you can

Find out as much as you can about where your breast cancer has recurred. A recurrence means that the cancer you had before is still in your body. However, the location and characteristics of the recurrence may be different from your original breast cancer. Learning about your cancer will help you decide what your treatment options are.

Find an advocate

An advocate or co-survivor (family or friend) is someone who will support you and help you to weigh your options. These are difficult, emotional issues to face. An advocate can help you by taking notes at doctor's appointments, gathering your medical records and making sure you understand your treatment options. You do not have to face this alone.

Pick your medical team

You may want to use the same medical team you had before, or you may want to ask different doctors to join your team. Even if your medical team is the same as before, get a second opinion on your treatment options. Another doctor may see things differently than your medical team and can provide you with more information.

Choose your treatment goal

The location and extent of the recurrence will affect your treatment goals. If your cancer recurrence is minimal, you will most likely try everything you can to get rid of the cancer with surgery, radiation, chemotherapy or hormonal therapy. If that is not possible, you may want to begin treatment to get relief from cancer symptoms and/or maintain your quality of life for as long as possible. Talk to your doctor about realistic treatment goals, your treatment options, a treatment plan and what kinds of plans you need to consider.

Second primary tumor—A second primary tumor is not considered a cancer recurrence. A second cancer is different from the original breast cancer in its location and possibly in its characteristics.

Tests for recurrence

There are three types of cancer recurrence: *local*, *regional* and *distant*.

Local — A recurrence of the cancer in the same breast or same side of the chest wall.

Regional — A recurrence of the cancer in the axillary lymph nodes or nodes around the collarbone.

Distant — A recurrence of the cancer in other places of the body. This means the cancer has spread outside the breast and the surrounding lymph nodes. Even if the cancer spreads to other places, it is still considered breast cancer because the breast is where the cancer began.

Resources

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

American Cancer Society 1-800-ACS-2345 www.cancer.org

National Cancer Institute 1-800-4-CANCER www.cancer.gov

Related fact sheets in this series:

- Current Research on Drugs and Treatments
- End-of-life Care
- Getting the Support You Need
- Metastatic Breast Cancer
- Treatment Choices An Overview

The above list of resources is only a suggested resource and is not a complete listing of breast health and 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 for the Cure 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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