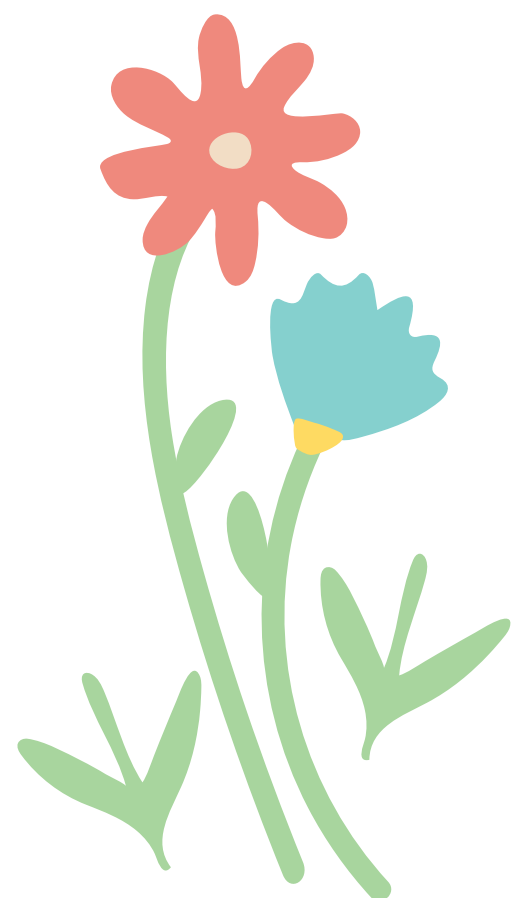


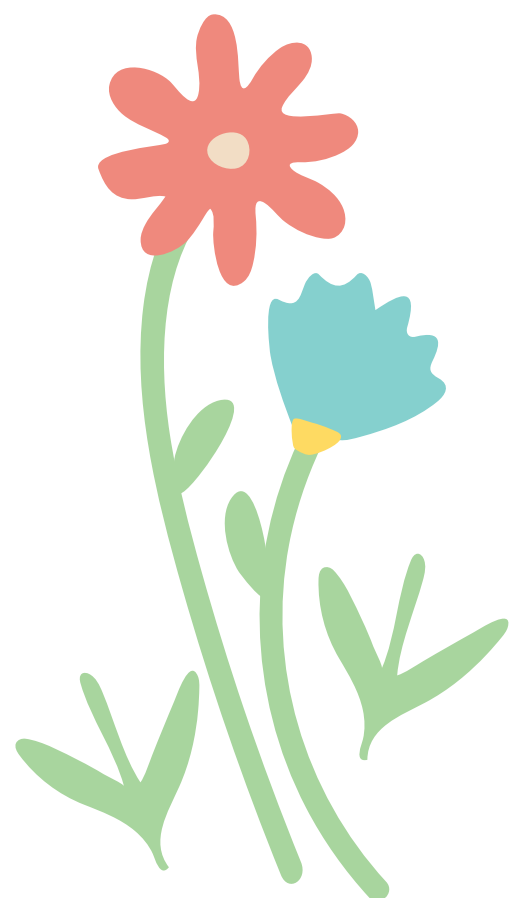
A guide to
understanding
**Early Breast
Cancer**

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Helping you move forward with a diagnosis of early breast cancer

A diagnosis of early breast cancer (eBC) is a life-changing experience that can send your world into a tailspin. Feeling overwhelmed, anxious, sad, or worried is very common. To cope with these feelings, it often helps to be informed.

Many people feel better when they learn the facts about their disease and understand their treatment plan. This guide was created to help you take the next steps in your treatment journey with confidence.

Inside, you'll find:

- Helpful information about eBC, including understanding the risk of cancer returning even after initial treatments (recurrence)
- Treatment options
- What to expect along the way
- Ways to manage the day to day

Learning about your diagnosis can help answer your questions and build confidence. The more you know, the more you're able to make informed decisions about your treatment.

Remember, you're not alone. Whether it's family and friends or online support communities, your journey ahead is one you don't need to take on your own.





1 *in* 8

women in the United States will develop some form of breast cancer in her lifetime.

It's estimated that in 2023

almost

300,000

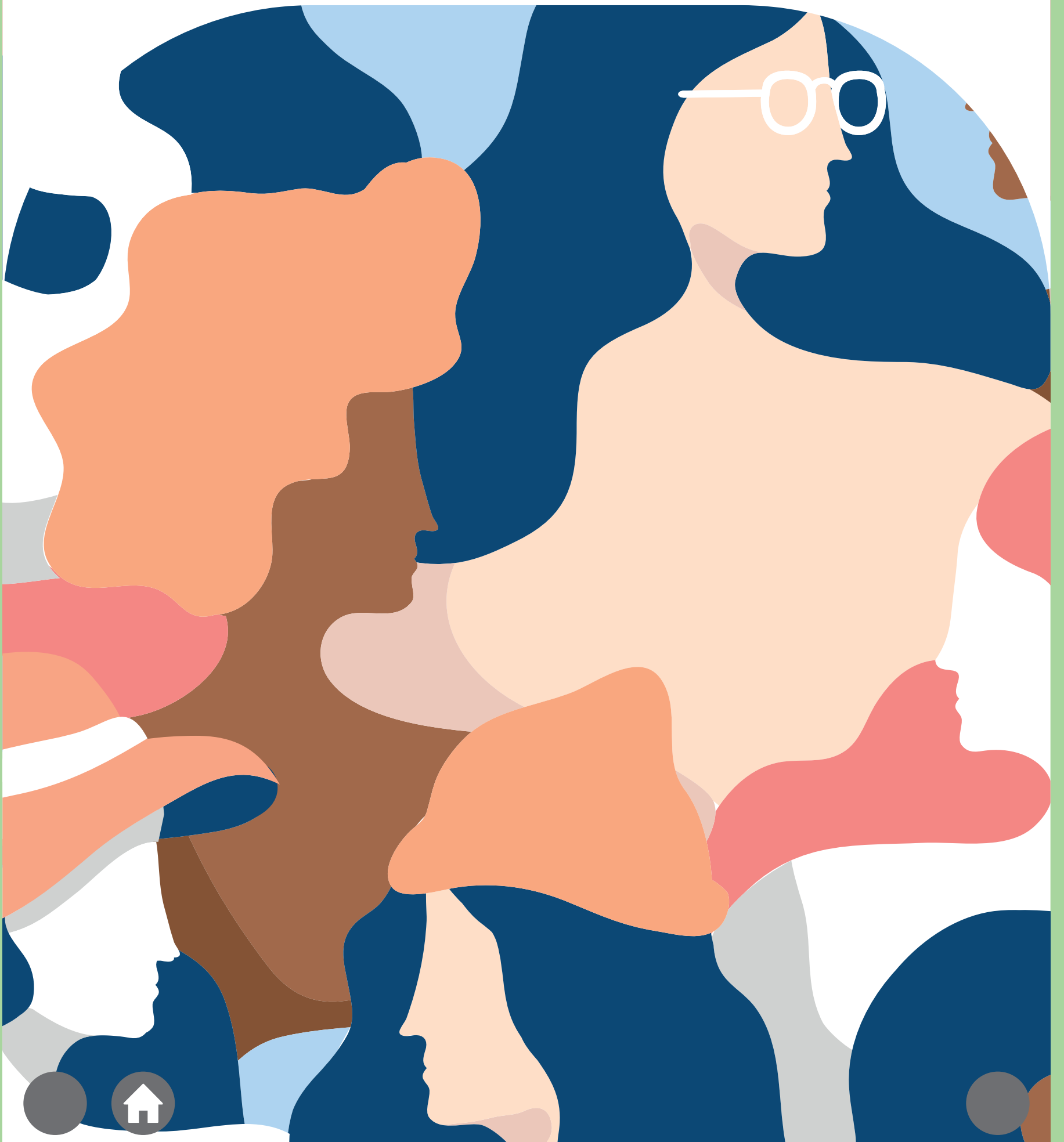
new cases of breast cancer

were diagnosed in the United States.



1

COMING TO TERMS WITH YOUR DIAGNOSIS



COMING TO TERMS WITH YOUR DIAGNOSIS

Stay informed.
Stay supported.

Right now, you might be stuck with a lot of waiting—for appointments, test results, and to start treatment. It can be frustrating and scary, but you can use this time to gather information and collect your thoughts.

NOTES



COMING TO TERMS WITH YOUR DIAGNOSIS

Here are some tips:

Research one subject at a time

Be sure to use reliable websites. A good rule of thumb is to look for sites ending in .org or .gov (like [cancer.gov](https://www.cancer.gov) or [cancersupportcommunity.org](https://www.cancersupportcommunity.org)). You can also ask a member of your health care team where to find reliable information.

Take notes

Keep a notebook handy. You may want to write down questions as you think of them when you're between visits. Some of the information you receive from your doctor may be difficult to grasp at that moment. Consider bringing a trusted family member or friend to your appointments. They can support you and help take notes.



Remember, you are not a statistic

Many people want to hear the latest statistics for eBC. Statistics represent the general population. They do not take your specific situation into consideration. **Everyone's journey with eBC is unique.**



COMING TO TERMS WITH YOUR DIAGNOSIS

Sharing your diagnosis with family and friends

Figuring out where to start is often the hardest part of telling loved ones your diagnosis. Everyone's experience is different. Here are some ideas to help you think about where to begin.

Discussing your diagnosis with...

A partner

- **Ask** if they'd like to join you at medical appointments
- **Understand** that they may have different ways of coping with your diagnosis
- **Be clear** about your needs and that they may change over time
- **Discuss** your partner's needs. This is a difficult time for both of you
- **Make time** for the two of you to be alone, outside of doctor visits
- **Prepare** for potential symptoms or side effects that may affect your sexual relationship
- **Get help** from a counselor if you feel it would be good for your relationship



COMING TO TERMS WITH YOUR DIAGNOSIS

Children or grandchildren

- **Adapt** what you say depending on their age. Use simple language that they can understand
- **Comfort** younger children by letting them know that they can't "catch" what you have and that they didn't do anything to cause your illness
- **Explain** that you want to keep the daily routine as normal as possible, but let them know about things that may change
- **Let them know** about any expected changes in your energy level or behavior and if unexpected changes occur, share those as well

Family and friends

- **Write down** or discuss what you think would be helpful for them to know
- **Designate** a trusted friend or family member to help you share the news and updates with others
- **Have someone close to you** at your side for support
- **Set clear boundaries** as to what is and what is not helpful to you
- **Use a website**, such as www.CaringBridge.org, which is designed to help people in difficult situations keep friends and family informed and updated



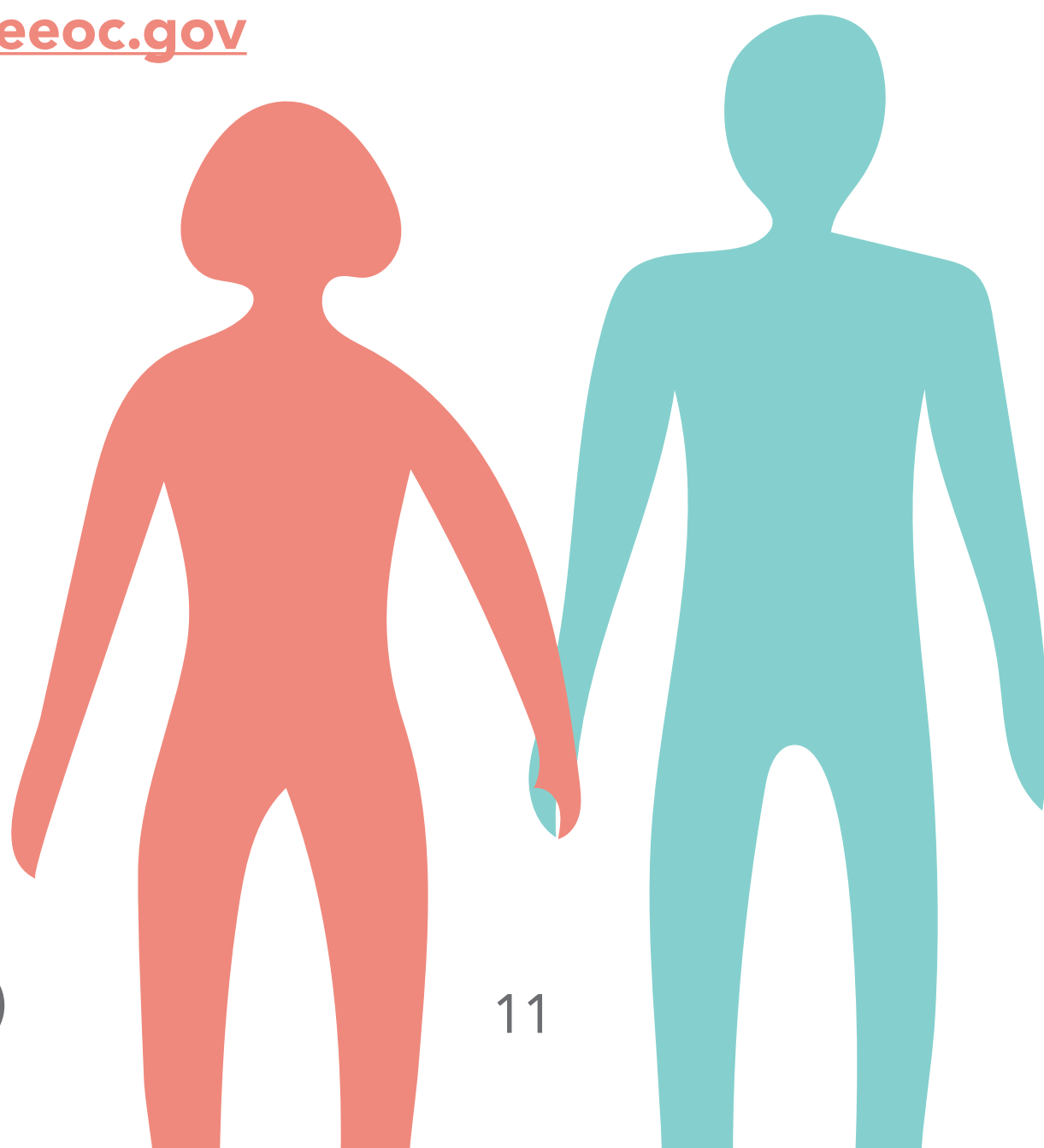
COMING TO TERMS WITH YOUR DIAGNOSIS

Discussing your diagnosis with... (cont)

Employer and co-workers

Telling your manager or co-workers about your personal health is a choice. You have a legal right to keep it private. However, if you want to take advantage of certain laws that protect employees, you may need to give your employer some information.

- **The Family and Medical Leave Act** allows eligible employees to take up to 12 weeks of unpaid, job-protected leave in a 12-month period. To get this benefit, you simply need to say that you will be unable to perform your job functions. **Learn more** about this law at www.dol.gov/whd/fmla
- **Americans with Disabilities Act** requires employers to accommodate the needs of people with cancer. Modifying a work schedule or taking time off for treatment or because of treatment are protected under this act. **Learn more** about this law at www.eeoc.gov



COMING TO TERMS WITH YOUR DIAGNOSIS

Finding the right words

Children

"My doctor told me I have something called 'early breast cancer.' It's inside my body and making me sick."

"I haven't been feeling well lately, and the doctor was able to tell us why."

Adults

"I finally found out why one of my breasts felt swollen. I have early breast cancer. Early breast cancer has not spread beyond the breast or nearby lymph nodes, so surgery and treatment after surgery may be options for me."

"I have breast cancer. It was caught early, so I'm having surgery to remove the tumor/cancer. I will need treatment after surgery to help prevent my cancer from coming back."

See pages 37 through 40
for resources to help
you with these difficult
conversations



2

THE FACTS

ABOUT EARLY BREAST CANCER

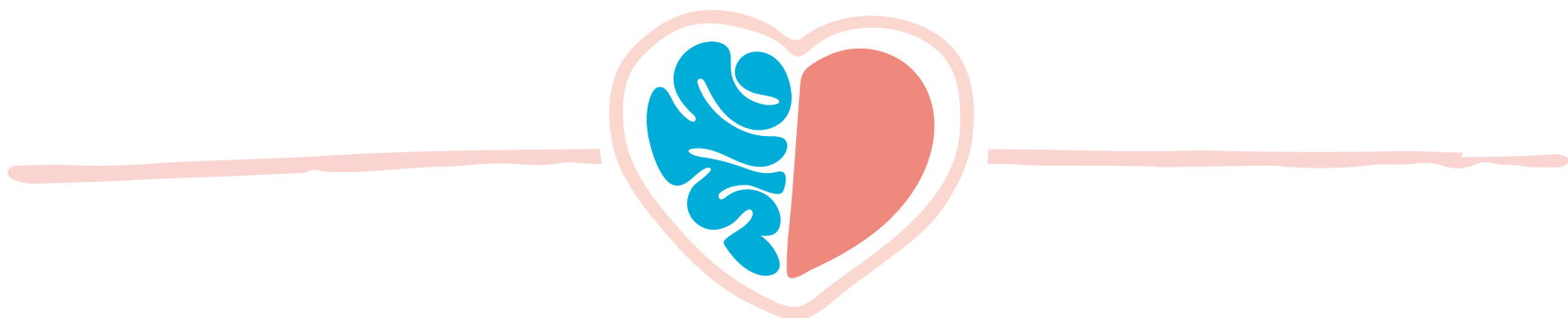


THE FACTS

ABOUT EARLY BREAST CANCER

Understanding eBC

eBC means that the cancer is found only in the breast or nearby lymph nodes. It has not spread to other parts of the body.



Staging

The stage of a cancer describes how much cancer is in the body. Staging helps determine how serious the cancer is and how best to treat it.

There are five stages of breast cancer, numbered 0, 1, 2, 3, and 4.

eBC can be stages 0, 1, 2, or 3.

Stage 0

The cancer is in the same part of the breast where it started and is sometimes called noninvasive breast cancer.

Stage 1

The tumor is small and may have spread to lymph nodes in small amounts.



THE FACTS

ABOUT EARLY BREAST CANCER

Staging (cont)

Stage 2

The tumor is either a little larger and/or has spread to more lymph nodes than stage 1 cancer.

Stage 3

The tumor is larger and has typically spread to the lymph nodes near the breast. Stage 3 is also called locally advanced breast cancer.

Stage 4

The cancer cells have spread from the breast tissue to other parts of the body, such as the liver, lungs, or bones. This is also called advanced, or metastatic, breast cancer.



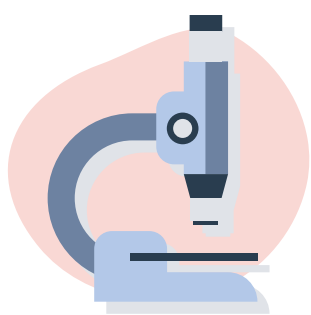
THE FACTS

ABOUT EARLY BREAST CANCER

Determining your type of eBC

Four different kinds of tests may be needed to determine the type of eBC you have.

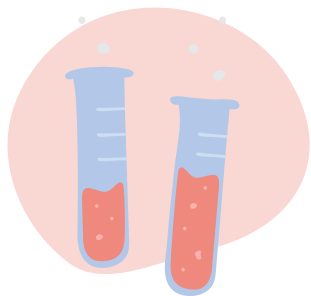
1 Biopsy



Your doctor will first remove a sample of your tissue or cancer cells. The sample is sent to a doctor called a pathologist, who tests samples of tissue to help identify diseases.

A **second biopsy** may be needed to confirm the diagnosis. This is called a confirming biopsy and this is taken from an additional tissue sample.

2 Blood tests



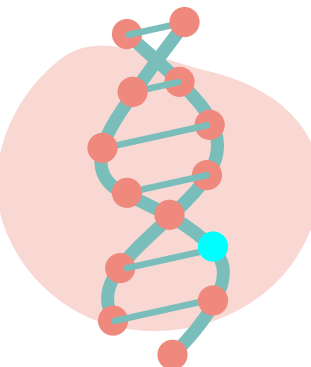
There are three types of blood tests: **complete blood count** or **CBC**, **serum chemistry**, and a **blood tumor marker test**.

3 Imaging tests



Imaging tests are used to locate where the cancer has spread: **Bone scans** and **positron emission tomography (PET)**, **computerized tomography (CT)** or **computerized axial tomography (CAT)**, and **magnetic resonance imaging (MRI)** scans are examples of imaging tests.

4 Genomic tests



Genomic tests look at a cancer's DNA to help customize treatment. A customized treatment is called **personalized medicine** or **precision medicine**. The treatments used are called targeted therapies. These test results will let your doctor know whether targeted therapy is an option for your type of cancer.

To learn more about your type of eBC, visit www.breastcancer.org



THE FACTS

ABOUT EARLY BREAST CANCER

UNDERSTANDING YOUR PATHOLOGY REPORT



Subtype
(eg, HR+, HER2-)



**Location
within
the body**



Growth rate



**Treatment
course**

Your doctor uses your test results to determine which treatment is best for treating your specific cancer.

Your pathology report is the result of a series of tests that should tell you and your doctor:

- What type of cancer you have
- If the cancer is fast or slow growing
- Where the cancer is located

For help understanding your pathology report, visit www.breastcancer.org/pathology-report and download the “Understanding Your Pathology Report” guide or talk to your doctor.



THE FACTS

ABOUT EARLY BREAST CANCER

Subtypes of eBC

Your subtype determines how your cancer may respond to different treatments. Knowing your subtype helps you and your doctor determine treatment options for you.

A subtype is also a way of grouping cancer based on what fuels its growth. Breast cancer subtypes are made up of two things:

1 Hormone-receptor, or HR, status:

Your cancer grows with the help of hormones including estrogen. A plus sign (+) after HR means that your cancer cells have hormone (estrogen and progesterone) receptors. A minus sign (–) means that your cancer cells don't have hormone receptors.

HR+ eBC is often treated with hormone therapy. Hormone therapy works to stop estrogen from helping cancer cells to grow.

2 Human epidermal growth factor receptor 2, or HER2, status:

HER2 is a protein found in healthy, normal cells. However, in some cases there is too much of the HER2 protein, leading to accelerated cancer growth. These breast cancers are called HER2+. A minus sign (–) after HER2 means your cancer cells either have a small amount of HER2 or none at all.



THE FACTS

ABOUT EARLY BREAST CANCER

FOUR SUBTYPES OF BREAST CANCER

1 HR+, HER2–

HR+, HER2– cancer cells have hormone receptors but make small amounts of HER2 protein or none at all.

2 HR+, HER2+

HR+, HER2+ cancer cells have hormone receptors and make large amounts of HER2 protein. This type of breast cancer is also called triple-positive because it is positive for estrogen receptors, progesterone receptors, and high levels of the HER2 protein.

3 HR–, HER2+

HR–, HER2+ cancer cells don't have hormone receptors but do make large amounts of HER2 protein.

4 Triple-negative (HR–, HER2–)

Triple-negative cancer cells don't have hormone receptors for estrogen or progesterone, plus they also don't make HER2 protein.

This type of cancer grows without the help of estrogen, progesterone, or the HER2 protein, but we're still trying to learn what fuels its growth.

HR+, HER2– breast cancer is the most common subtype of breast cancer.
About 7 out of 10 breast cancers are HR+, HER2–.



THE FACTS ABOUT EARLY BREAST CANCER

Understanding the risk of cancer coming back

Even after surgery and treatment, there is still a chance that eBC can come back in the future. When cancer returns after initial treatment, **it's called a recurrence.**

In HR+ breast cancer, **risk of recurrence is highest during the 5 years after diagnosis, but cancer can return within 20 years of diagnosis or later.**

After completing 5 years of hormone therapy...

1 in 3

people with Stage 2

AND

1 in 2

people with Stage 3

will have their **cancer return and spread to other parts of their body** within 20 years.



THE FACTS

ABOUT EARLY BREAST CANCER

KNOW YOUR RISK

Each person with eBC has a different risk of recurrence. Your risk is based on several factors, including:

- Age at diagnosis
- Tumor size
- Number of lymph nodes with cancer in them
- Mutations in your genes or abnormal activity of your genes that may cause cancer to grow

Your doctor can help you better understand your personal risk of recurrence. Knowing your risk factors and taking an active role in your treatment plan can help you feel confident you're doing all that you can to reduce the chance of your breast cancer returning.

Questions you may want to ask your doctor about your risk of recurrence:

- Does my type of breast cancer make me at risk for recurrence?
- Are there any tests that can predict the chance of my cancer coming back?
- What treatment options can help address my level of risk?
- Is there anything else I can do to prevent cancer from coming back?



3

FINDING THE RIGHT TREATMENT



FINDING THE RIGHT TREATMENT

The goals of eBC treatment

The options for treatment depend on different factors, like the subtype and stage of the cancer.

WITH eBC THERE ARE MULTIPLE TREATMENT GOALS. IMPORTANT GOALS INCLUDE:

- 1 Removing or killing cancer cells
- 2 Reducing the chance of cancer coming back after treatment
- 3 Maintaining quality of life while on treatment

Your doctor will consider these goals when creating a treatment plan for you.



FINDING THE RIGHT TREATMENT

QUESTIONS TO ASK YOUR DOCTOR ABOUT THE GOALS OF TREATMENT



How can I know if a treatment is likely to help me?



Should I consider the possibility of side effects or just focus on finding the treatment that should work best for me?



Will I need treatment before surgery?



What kinds of treatment will I need after surgery, and what do each of them do?



What happens if my cancer returns?
Will I need additional treatment?



Will my breast(s) be saved?



FINDING THE RIGHT TREATMENT

Your eBC treatment plan

Your eBC treatment plan will be tailored to meet your individual needs. Generally, several steps may be needed for treating HR+, HER2– eBC once it has been diagnosed.

1 Before surgery, or neoadjuvant, treatment options

Treatments may be used before surgery to shrink the tumors in your breast or lymph nodes so they are easier to remove.

CHEMOTHERAPY AND RADIATION:

Chemotherapy shrinks large tumors so that some people may be able to have a lumpectomy (removal of the tumor and surrounding tissue) instead of a mastectomy (removal of the breast and breast tissue). It can also shrink tumors in your lymph nodes so that they are easier to remove.

Radiation kills cancer cells in or around the breast or nearby lymph nodes using high-energy radiation.

HORMONE THERAPY:

Hormone therapies shrink tumors so that some people may be able to have a lumpectomy (and radiation) instead of a mastectomy.

Hormone therapy targets hormones, like estrogen, that can bind to cancer cells in HR+ breast cancer. It can help prevent cancer cells from growing and reduces the risk of cancer coming back.



FINDING THE RIGHT TREATMENT

2

Surgery

Surgery removes as much of the tumor in your breast as possible.

Even though surgeons can remove most of the cancer, cancer cells in harder-to-reach places may remain. This is why additional treatment after surgery may be needed.

3

After surgery, or adjuvant, treatment options

Treatments after surgery are used to kill as many of the remaining cancer cells as possible or stop them from growing to reduce the chance of your cancer returning.

CHEMOTHERAPY AND RADIATION:

Chemotherapy shrinks large tumors so that some people may be able to have a lumpectomy (removal of the tumor and surrounding tissue) instead of a mastectomy (removal of the breast and breast tissue). It may be given after surgery to reduce the risk of your cancer returning.

Radiation kills cancer cells in or around the breast or nearby lymph nodes using high-energy radiation. Radiation may be given after chemotherapy.

HORMONE THERAPY AND TARGETED THERAPY:

A common type of hormone therapy is aromatase inhibitors. Aromatase inhibitors lower the amount of estrogen that can bind to cancer cells, which can prevent cancer cells from growing. An aromatase inhibitor is taken for at least 5 years, and in many cases up to 10 years.

CDK4/6 inhibitors or blockers are used in combination with hormone therapy to further reduce the risk of cancer returning by interrupting the process that helps cancer cells divide and multiply.



FINDING THE RIGHT TREATMENT

Deciding on a treatment

Don't be afraid to ask questions when discussing treatment options with your doctor. Even better, write down any questions you may have and bring them to your appointment. The more prepared you are, the more productive the conversation may be with your doctor.



What to ask when considering treatment options

- What treatment options are available for my type of breast cancer?
- What are the benefits and side effects of each?

If your doctor has recommended a treatment or treatments:

- Why are you recommending this type of treatment?
- In the clinical trials, did people taking this treatment live longer without their cancer coming back than the people who did not take this treatment?
- Does it work alone or in combination with other treatments?
- What are the possible side effects? Are there ways to prevent or manage them?
- How much will this treatment affect my day-to-day life?
- Can I continue working through treatment?
- Will this treatment interfere with my other noncancer-related medications?
- How do I take it, how often, and for how long? Can I take it at home? What if I travel?
- How will you know if this treatment is working for me?
- Does my insurance cover this treatment?



FINDING THE RIGHT TREATMENT

Getting a second opinion

You may feel a sense of urgency about getting your treatment started right away. But usually there is time to get a second opinion from another doctor. A second opinion may give you peace of mind by confirming your original diagnosis, or another oncologist may recommend treatment options you may not have considered. You can get a second opinion at any point in the treatment planning process—even if you've already started treatment.

You should check with your insurance company before scheduling an appointment with another oncologist. Understanding the costs associated with your care is important.

Advances in treatment

Scientific advances have brought forth more effective cancer treatments. There may be treatment options for you that you haven't heard of before. Ask your doctor if there are new treatment options that may be right for you.

It is important to make an informed decision about your treatment plan. Talk to your doctor.
Don't hesitate to seek a second opinion or explore new treatment options.



FINDING THE RIGHT TREATMENT

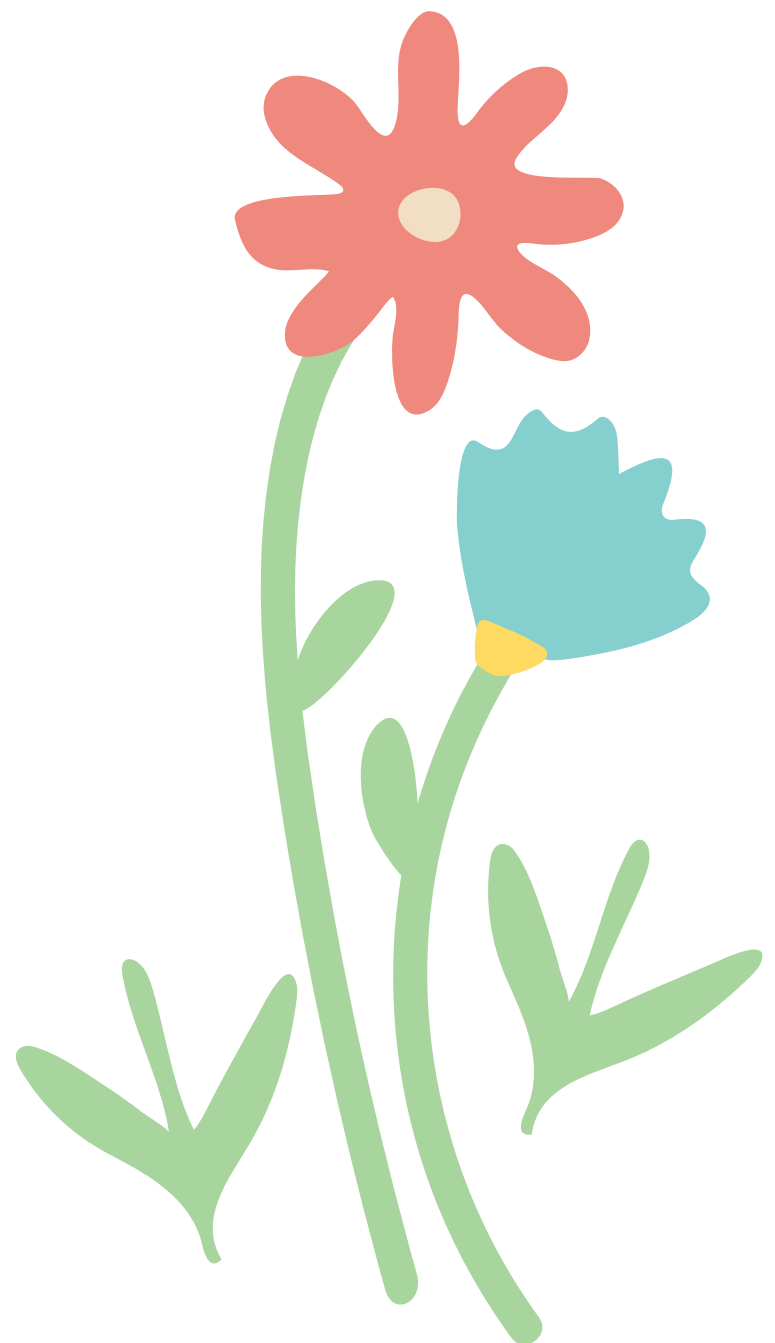
Managing side effects

One of your goals for treatment may be to have the best possible quality of life. If your side effects are getting in the way of that goal, say something to your doctor.

It's common to experience some side effects from cancer treatments. The good news is there are things you can do to help manage them. Some people turn to supportive or complementary care, such as meditation and yoga, to help cope with side effects.

Before choosing a treatment

- 1 Discuss possible side effects with your doctor
- 2 Ask if any of the side effects can be prevented or managed, and how
- 3 Discuss what kind of things you should report to your doctor
- 4 Consider how the potential side effects would affect your lifestyle



FINDING THE RIGHT TREATMENT

WHAT TO DO IF YOU EXPERIENCE SIDE EFFECTS WHILE ON TREATMENT

Call your doctor's office at the earliest sign of a side effect. You don't have to wait until your next appointment

If a medication is suggested to treat the side effect, ask if that medication has any side effects of its own

Ask if there are any complementary or supportive care methods you could try to manage your side effects

Some side effects may not be easy to manage. If you have trouble managing certain side effects, your doctor may adjust your treatment or treatment plan.

Supportive medications can help control or prevent side effects, such as pain, nausea, or fatigue. They can also help with depression caused by your disease or treatment. Talk to your doctor about how you're feeling physically and emotionally. You and your doctor can work together on managing or preventing side effects.

Be sure to share with your care team a list of any medications, vitamins, or herbal supplements you are currently taking. It's important to make sure that all your medications work safely together.



4

TIPS FOR HEALTHY LIVING

WHILE GOING THROUGH TREATMENT



TIPS FOR HEALTHY LIVING WHILE GOING THROUGH TREATMENT

Treating all of you

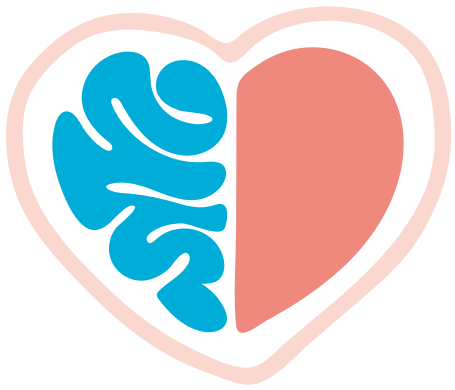
Cancer can bring up a lot of emotions you're not used to dealing with. Being involved in your treatment, focusing on things you can control, and understanding what makes you feel better can help. It's important to take care of your mind, body, and spirit as you go through treatment.

To be matched with another early breast cancer survivor, call the breast cancer helpline, SHARE, at 1-844-275-7427 or www.sharecancersupport.org

See page 38 for additional resources.

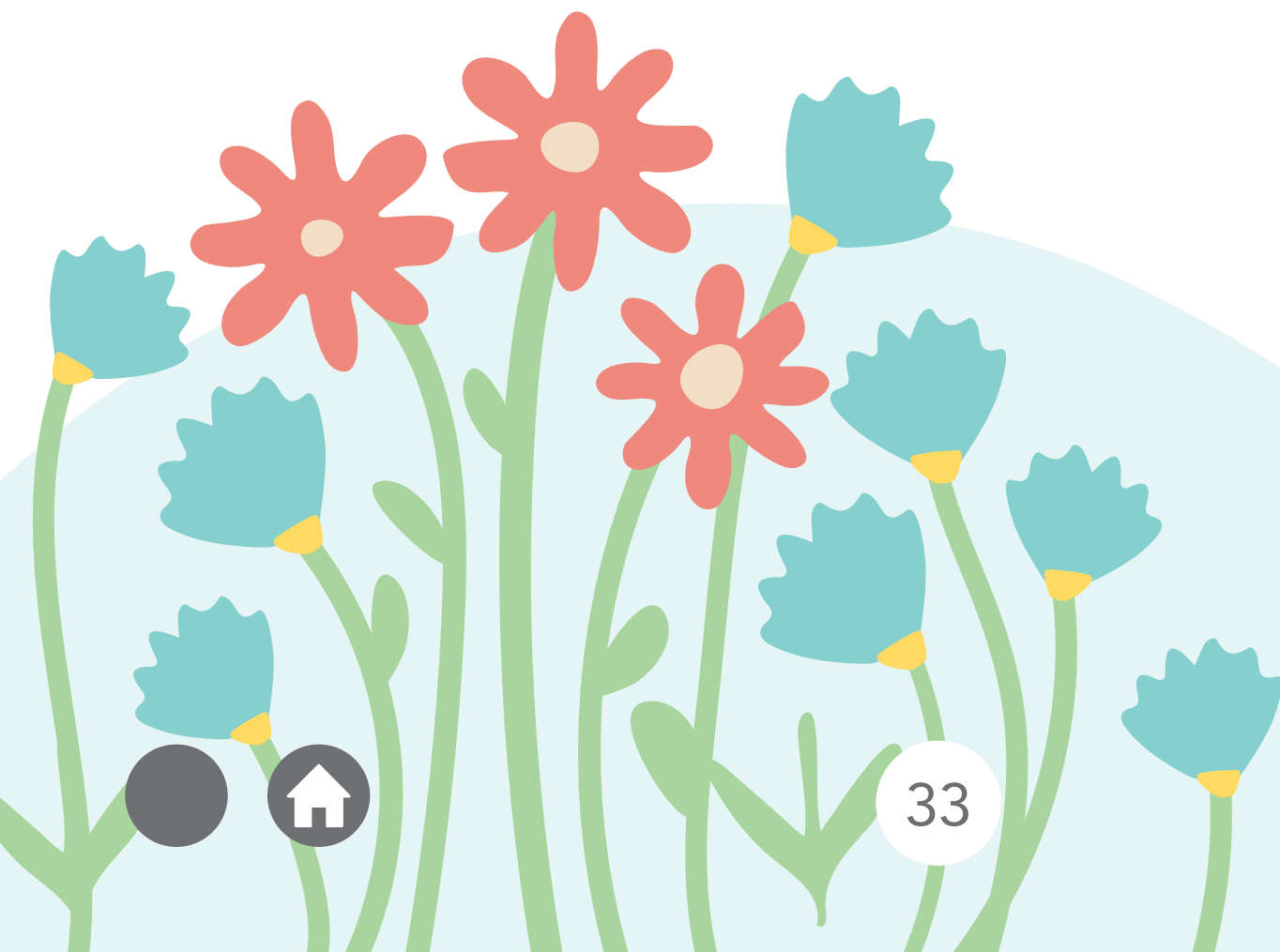


TIPS FOR HEALTHY LIVING WHILE GOING THROUGH TREATMENT



Mind

- **Connecting with other people** who are currently going through, or who have already gone through, eBC treatment can help you feel less alone and more understood. You may find it helps to learn about how others manage day-to-day challenges
- **Consider joining a local or online support group.** Talking with other breast cancer survivors can help you feel confident in your ability to manage day to day while living with cancer
- **Talking to a counselor or therapist** can help you explore your feelings and thoughts in a judgment-free environment and develop coping skills. You may want to choose someone with experience in counseling people with eBC. You may need to try several therapists before you find one you feel comfortable with



TIPS FOR HEALTHY LIVING WHILE GOING THROUGH TREATMENT



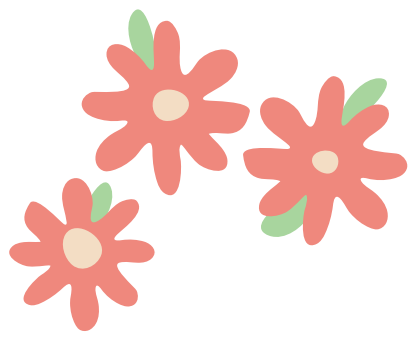
Body

- **Exercise can help ease side effects.** Movement, like walking, swimming, yoga, dance, and strength and aerobic training, can help you feel better mentally and physically, and even improve your sleep. Ask your health care team if they can help you create an exercise routine that could work for you
- **A nutritious diet can also help you manage side effects and improve how you feel.** Ask your health care team if they can help you create healthy meal plans. You can also ask them to refer you to a dietitian
- **While some women still find sex to be a positive experience, others may find it difficult.** eBC can have a negative effect on your body image and disrupt your sex life. It's important to communicate openly and honestly with your partner. Discuss what's comfortable for both of you and what's not. Your health care team may be able to help find solutions or refer you to a counselor with expertise in this area. Whatever your situation, maintaining some form of intimacy can improve your emotional health and quality of life

Always check with your doctor before starting a new diet or exercise routine.



TIPS FOR HEALTHY LIVING WHILE GOING THROUGH TREATMENT



Spirit

- **Whether you find spiritual support from your religion, your community, or a passion, such as art or volunteering,** a connection to something bigger can help alleviate anxiety and give you a sense of inner peace
- **Speaking with a spiritual advisor or counselor** may help guide you through the emotions you are feeling
- **Contact** your local religious organizations, holistic wellness centers, hospitals, or treatment center to find the support you need



5

SUPPORT AND RESOURCES



Finding the right support and resources for you

Your cancer experience is unique to you. How you feel, how you manage, and the type of support you need is specific to you. Getting the right support and resources can help make living with eBC and managing treatment less overwhelming.

On this and the following page, you'll find support groups and resources to help you with different aspects of living with eBC. This list includes financial assistance, transportation assistance, support groups, and much more.

You can also ask your care team about local support services available near you.



Understanding your diagnosis and connecting with others

American Cancer Society, Inc.

www.cancer.org

Young Survival Coalition

www.youngsurvival.org

Unite for HER

www.uniteforher.org

Breastcancer.org

www.breastcancer.org

CancerCare

www.cancercare.org/services

Cancer Support Community

www.cancersupportcommunity.org

LIVE Today Foundation

www.live-today.org

Living Beyond Breast Cancer

www.lbbc.org

LBBC: HR+ eBC Information

www.lbbc.org/about-breast-cancer/types-breast-cancer/hormone-receptor-positive

National Cancer Institute

www.cancer.gov/types/breast

Sharsheret

www.sharsheret.org

Sisters Network Inc.

www.sistersnetworkinc.org

Susan G. Komen

www.komen.org

ALAS-WINGS

www.alas-wings.org

Latina Sisters Support

www.latinasisterssupport.org

Touch: The Black Breast Cancer Alliance

<https://touchbbca.org>



Talking about cancer

Telling Others

www.cancer.org/cancer/diagnosis-staging/telling-others-about-your-cancer.html

Talking to Kids and Teens

www.cancersupportcommunity.org/talking-kids-teens-about-cancer

Home cleaning

Cleaning for a Reason

www.cleaningforareason.org

Preparing healthy meals

Cook for Your Life

www.cookforyourlife.org

Transportation and lodging support

Air Care Alliance

www.aircarealliance.org

Joe's House

www.joeshouse.org

Support groups and peer counseling

Cancer Support Community

www.cancersupportcommunity.org

Support Connection

www.supportconnection.org

SHARE Cancer Support

www.sharecancersupport.org



Support in the workplace

Cancer and Careers

www.cancerandcareers.org/en

Cancer Legal Resource Center

www.thedrlc.org/cancer

All organizations listed are not-for-profit and/or government agencies, and are independent from Novartis Pharmaceuticals Corporation. Novartis has no financial interest in any organization listed but may provide occasional funding support to them. This is not an exhaustive list of resources.





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