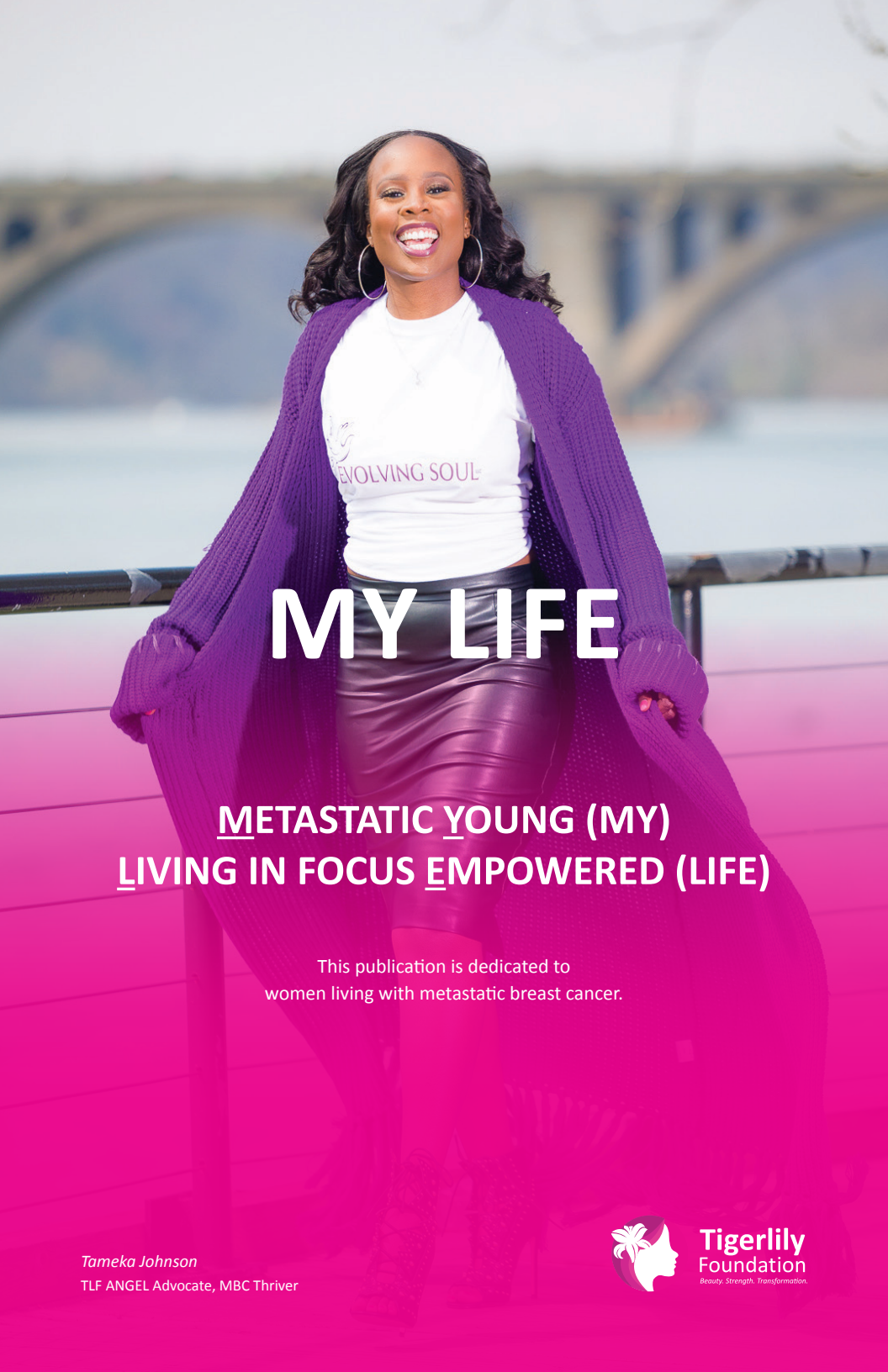

MY LIFE

METASTATIC YOUNG (MY) LIVING IN FOCUS EMPOWERED (LIFE)

This publication is dedicated to
women living with metastatic breast cancer.

Tameka Johnson
TLF ANGEL Advocate, MBC Thriver

Tigerlily Foundation
Beauty. Strength. Transformation.

Dear Sisters

Getting diagnosed with metastatic breast cancer (MBC) is a lot to handle. While we all want a breast cancer diagnosis to end with the words “cancer-free," this isn’t the case for many young women. We know that this diagnosis is not an easy one, and we are here to hold your hand as you navigate this journey. We hope this guidebook helps you to understand your diagnosis and make educated decisions as you decide what to do next. In it, you’ll find resources and the perspectives of other young women living with MBC.

You have a voice, and we want you to feel empowered to use it to engage your healthcare team going forward. Your feelings and stories are important and valid, as are the fears and challenges you experience. We are here for you as you navigate the path of your diagnosis and treatment. The content in the guidebook was created with the support of young women diagnosed with metastatic breast cancer and reviewed by young women just like you.

Thank you for trusting us on this journey. We look forward to helping you navigate your diagnosis, become even stronger, and live an even more fearless life going forward with us by your side. We look forward to your input and your voice; and to working with you to improve outcomes for women like you, living with MBC.

Blessings, hope, and much love,

Maimah S. Karmo

@tigerlily_foundation

@tigerlilyfoundation.org

@tigerlilycares

Metastatic breast cancer is the reality for far too many women across the world, many of these diagnoses can be prevented by early detection and treatments. Our mission is to one day see MBC as not a terminal disease but as a chronic disease, and one with which women can have a high quality of life.

My Life. My Legacy. My Words.

The Metastatic Young (MY) Living in Focus Empowered (LIFE) Program is one of the most important initiatives we have ever embarked on.

As an organization, Tigerlily Foundation's mission is to educate, advocate, empower, and support young women during one of the most critical times of their lives. In addition, it is important to us to remind young women that they are beautiful, strong, and can be transformed by their experience with breast cancer. Our President and Founder, Maimah Karmo, holds a core belief that even though breast cancer and other challenges happen to us, we must ask ourselves, "why are we here, and what is our soul here to do?" With that in mind, we want to ensure that our programs not only provide you with the educational information that you need but inspire you to think about how your warrior spirit can rise up and live even more passionately and purposefully. As you navigate this journey, ask yourself why you're here and what it is you're here to do? What is the meaning of your life? What is the legacy you leave behind? How are you using your words and actions to change your world as a whole?

As we developed the MY LIFE program offerings, our goal was to ensure that we were offering initiatives for young women with MBC with input from young women with MBC. We wanted to give you what YOU need. To ensure that we did this, we launched a national survey to get the viewpoints of young women living with MBC. The top needs expressed were: better communication, more education of MBC and accessibility to information, resources, and stories, programmatic support to help through day-to-day life, engagement and advocacy events, and an increase in the quality and quantity of clinical trials and research.

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Metastatic Breast Cancer Facts

Metastatic breast cancer is breast cancer that has spread beyond breast tissue and the surrounding lymph nodes to form tumors on other parts of the body such as bones, brain, liver, and lungs. Metastatic breast cancer is also known as stage IV or advanced breast cancer.

Stage IV breast cancer is diagnosed in about 6 -10% of newly diagnosed breast cancer patients.[1] More than 150,000 breast cancer survivors are living with metastatic disease, 3/4s of whom were originally diagnosed with stage I-III.[2]

An estimated 284,200 people (281,550 women and 2,650 men) in the United States will be diagnosed with invasive breast cancer. Breast cancer is the most common cancer in women, excluding skin cancer.[3]

Breast cancer is the second most common cause of death from cancer in women. It is estimated that 44,130 people (43,600 women and 530 men) will die from breast cancer this year. Metastatic breast cancer will cause the vast majority of those deaths.[4]

"Live as if you were to die tomorrow. Learn as if you were to live forever."
-Mahatma Gandhi

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4. Approved by the Cancer.Net Editorial Board, 01/2021 Cancer.net

Being Diagnosed with Metastatic Breast Cancer

Many people live for years or even decades with stage IV breast cancer with a good quality of life; it is estimated that approximately 155,000 people in the United States are currently living with metastatic breast cancer. While many young women can live a long time with the disease, it is important to note that no one knows how long an individual can live with metastatic breast cancer, so it is important to make treatment decisions that consider quality of life. About 20 to 30% of all breast cancers that are originally localized within the breast become metastatic.

Being diagnosed with metastatic breast cancer is overwhelming. You have lots of questions and will want to make treatment decisions that are right for you. Before you do anything else, breathe. Then, make a plan. Know that you're not alone, and there are many other young women that live with metastatic breast cancer. Also, if you'd like to get a second opinion, then do so.

Where Can Breast Cancer Metastasize?

Breast cancer can come back in several ways. These include: a local recurrence (site of the original diagnosis), an original recurrence (lymph nodes in the armpit or collarbone near original diagnosis), and a metastatic/distant recurrence (part of the body not close to the original occurrence like the lungs, bones, brain, etc.).

The most common sites for breast cancer metastases are the lungs, liver, bones, and brain. Metastatic breast cancer isn't the same for everyone. According to the National Breast Cancer Foundation, symptoms at stage IV will depend on the degree to which the cancer has spread in the body.

Metastatic breast cancers can happen as a recurrence or progression of early-stage breast cancer or can occur at the original diagnosis of breast cancer. When someone is diagnosed with breast cancer for the first time at stage IV or with MBC, this is known as de novo MBC. In other words, de novo MBC is when a person who has no history of breast cancer has some abnormality discovered. This then leads to a diagnosis of breast cancer, and when the breast cancer is diagnosed, it has already spread beyond the breast and nearby lymph nodes to other body parts.

Metastatic breast cancers from a recurrence or progression are caused by breast cancer cells that remain in the body after treatment for early breast cancer. The breast cancer cells were always there but dormant (inactive) and could not be detected. Then, for some unknown reason, the cancer cells began to grow again. This process is not well-understood.

Tests for Metastatic Breast Cancer

Before and after your diagnosis, you'll have to do a series of tests to help you and your doctors understand what type of breast cancer you have, the grade (how aggressive it is), and where the cancer has metastasized to. Your physicians will need to gather your scans/imaging reports, lab tests, pathology reports, biopsy, surgical and physical exams to be able to figure out what your situation is and how to treat it.

You'll need to have a variety of tests throughout your treatment, including ultrasound, mammogram, X-ray, PET scan, CT scan, MRI, bone scan, genetic test, and blood work. Physicians also might have you take a tumor or blood marker test to look for specific tumor cells, as this helps them to make a proper diagnosis and monitor disease progression. Make sure to always keep records of all documents, tests, scans, and doctor visits.

At every doctor visit, take your journal with the questions you would like to ask. You may want to record the visit too so you can listen to it again, or take someone with you to help take notes as well (and for support).

Almost 170,000 American women were living with MBC in 2020, and its prevalence keeps increasing.

Although metastatic breast cancer has no current cure, it can be treated. Getting the right treatment can increase both your quality of life and longevity.

Treatments can control MBC for a period, but tumors stop responding to treatment and progress. When that happens, the patient and their health care providers have to talk about other therapies or explore clinical trials that can target the cancer. Each treatment is called a "line of treatment." Some MBC patients may talk about their 5th line of treatment, etc. -- this means that they have been on four previous treatments that stopped working for them.

"One day you will tell your story of how you overcame what you went through and it will be someone else's survival guide."
-Unknown

Managing Your Records and Health Information

You'll have a lot of information coming at you, so we want to make sure you keep track of it. Also, it's a lot to take in.

Make sure to:

1. Have a folder where you can keep all your records. You can also take screenshots and save these medical records on your phone so you have them at all times.
2. Keep a journal of notes of all your health information – you can do this via handwritten notes, voice recorder files, or notes on your phone.

Keep a journal of how you feel and make sure to include a list of all your doctors' contact information, and the current medications and treatments you are taking.

Treatment Options for Metastatic Breast Cancer

Metastatic breast cancer is not curable, but it is treatable. You can live with it for a long time, but having MBC means you will live with it for the rest of your life. Treatment options are based on the characteristics of the tumors and can include targeted therapy medicines, medicines that target specific genes to slow or stop cancer cell growth, and hormone therapy to stop cancer cells that are growing in response to the hormones estrogen and progesterone. Your physician's goals will be to manage and control the cancer by slowing disease progression, minimize treatment symptoms and side effects, and help you have a good quality of life.

The goal of treatment is to manage the tumors long-term. Aggressive treatments might be too toxic for you. However, if you have had breast cancer before, your body may be persistent and have adapted to some of the treatments. Some patients can be on a treatment regimen for a long time, and other patients may have to change treatments more often. Everyone's body reacts differently. Sometimes certain treatments are tough and leave you feeling sick, tired, in pain, and unable to have the quality of life you want. It is important to communicate with your doctor how you are feeling and whether you need to change treatment plans. In some cases, you may want to talk with your physician about clinical trials.

"Trauma creates change you don't choose. Healing is about creating change you do choose."
-Unknown

Talking With Your Medical Team

When you or someone you know is first diagnosed with metastatic or advanced breast cancer, you may have a lot of questions. Some questions to ask your medical team include treatment options and goals, information about diet and nutrition, exercise goals, managing pain, fertility, potential impact on your work and finances, resources, and support groups available in your local community. As you work with your medical team to put together a treatment plan, you may have questions or concerns about side effects too. Don't hesitate to talk to your medical team about side effects or any other concerns that you have. It is important to make treatment decisions that work best to slow or stop cancer growth. Also, make sure to let your medical team know what side effects you want to avoid.

Some patients need "treatment breaks" or may lower the dose of the medication to lessen the side effects. A lot of cancer treatment centers also offer palliative care to help patients better their quality of life. Palliative care teams help you balance emotional, mental, and physical changes. They can help you navigate that decision and give you options that help your quality of life.

Managing Your Medical Records

There may be many different medical professionals caring for you, including your primary care physician, medical oncologist, radiation oncologist, surgeon, therapist, and others. Each of these professionals are keeping a record of your care. However, keeping your own records with information about your medication, surgeries, treatments, treatment schedules, imaging reports, pathology reports, and other details of your care is a good idea for several reasons. Having your complete health history allows you and your caregivers to be active participants and make decisions about your care. Also, in case of an emergency, all of your information will be in one place. Computer flash drives or hard drives can be a good place to store records, as can three ring binders or file folders. To make keeping track of information easier, you should also take a recording device with you to your doctor's appointments, using your phone or other device. Make sure to label the recordings so you can keep track of visits and find information easily. It is also a great tool to share with caregivers who cannot attend appointments or treatments with you.

Consider keeping your health information in a secure online area (Google Doc, Dropbox or other online storage) so that people you trust can access them easily. This also helps to lessen the chances of losing information. Ask someone on your support team to help with the task of uploading documents for you. Choose one system that you think will be easiest for you and your caregivers to keep all your information in one place and up-to-date.

Living with Metastatic Breast Cancer

Living with a condition like MBC can be very emotionally and physically draining. You may have trouble sleeping. You may be very concerned about the future, worrying if your treatments are going to work, or worrying if you'll have painful side effects. All of these concerns are normal. Talk to your medical team about ways to help with these feelings. Pain management may be an important aspect of your care. Your medical team wants to know what pain you are experiencing so they can help reduce your pain.

It may be very hard for you to talk to your friends and family about your metastatic breast cancer diagnosis. However, open and honest communication with your spouse or partner about needs – yours and theirs – is very important. It's also important to involve them in your medical care as much as possible. A professional such as a psychologist or social worker can help if you're having communication or relationship issues.

You can also create a list of your daily routines, responsibilities, appointments, and treatments to allow your support team to know where and how to best help you. Make sure to include activities you enjoy: meditation, yoga, fulfilling hobbies, travel, etc. Perhaps map out a week or month in your life to best help yourself and those who want to help you along the way.

Also, take time to familiarize yourself with the world of metastatic breast cancer and the many amazing people within it. Have you watched the #MYLIFEISMYLEGACY video series or read the My LIFE Matters Magazine? There is a community dedicated to supporting you and that wants to help you. There are countless numbers of support groups that you can find through internet searches and social media. They are filled with men and women across the world, ready to welcome, love, and support you. Through these groups you will make new friends, and become well educated, connected, supported, and empowered by those who can relate to you near and far. Join one or multiple groups, create great connections, and get involved in advocating or volunteering in some way. What better way to change your perspective on things than to become involved in the big picture. You will quickly begin to see that "you are not alone."

Managing Side Effects

There will be side effects for your treatment and it is important to communicate them to your doctor. Some side effects are short-term and others are ongoing. Long-term treatment is associated with more side effects. Side effects can include bone pain, chemo brain, hair loss, fatigue, depression, anxiety, heart issues, mouth sores, neuropathy, and menopause. Side effects are also treatment-specific, meaning that they vary depending on what treatment regimen of medication you have. Side effects can be challenging, but there are ways to lessen and/or prevent them. Talk to your doctor about ways to manage side effects through medication or complementary treatment.

"If you're going to live, leave a legacy. Make a mark on the world that can't be erased."
-Maya Angelou

Clinical Trials

Clinical trials are research studies that help scientists determine if a medication, medical device, or other intervention is safe and effective. Researchers create clinical trials to investigate whether an intervention will have benefits on a medical condition or disease. Clinical trials are enacted when scientists want to achieve a medical breakthrough, for instance, a new drug targeting a specific type of cancer.

New drugs go through a series of studies called phases before being approved by the FDA and becoming available to the general public. Joining a clinical trial may be an option for you to gain access to a new drug before it reaches the market. To participate in a clinical trial, you have to meet certain criteria, such as having a certain stage or type of tumor, to be sure that researchers believe you will be safe and have the potential to benefit while participating. It's always a smart idea to ask your medical team if there is a trial near you that would be appropriate. "Trials in life are not meant to make us fail, but to see how far we can fly."

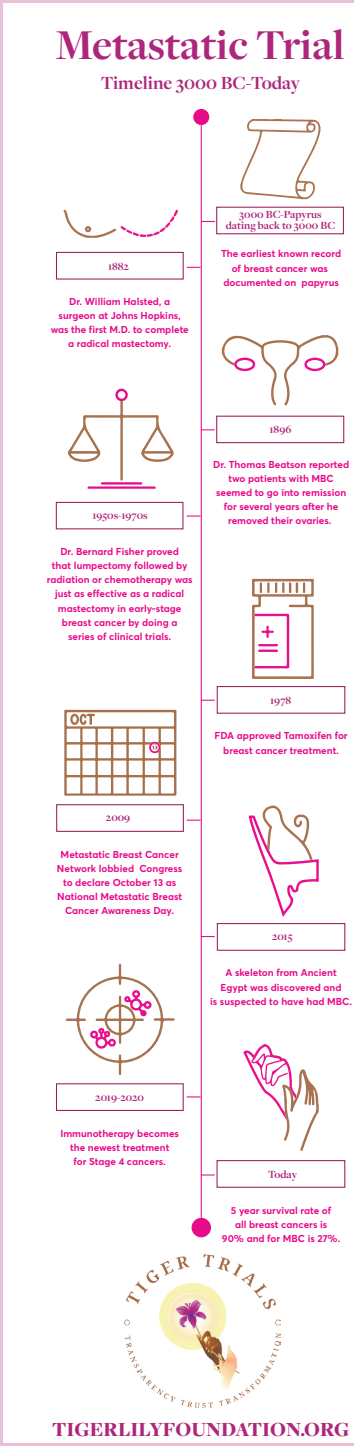
Besides having access to new potential treatments, many people say the major benefit to participating in a trial is that they know they are contributing to medicine in a way that will help future generations, maybe even their own children! The disadvantages include the possibilities of experiencing side effects, the medicines or treatments may not work, and additional trips to the hospital or clinic.
Be sure to talk with your patient navigator or clinical trial coordinator if the cost of the trial, travel, checkups, and scans become too

Look for the Tiger Trial stamp of approval.

expensive. Various advocacy groups offer resources to help you cover the costs. Visit our resource page for a list. For more information, check out our Barrier Toolkits! We have organized resources into 13 easy to use Barrier Toolkits that re your guide to information on topics such as **BREAKING THE BARRIERS TO CLINICAL TRIALS, BREAKING FINANCIAL & SOCIOECONOMIC BARRIERS TO CARE**, and several other barriers to care.

Tigerlily Foundation's Clinical Trials Program, Tiger Trials, launched in May 2021. Tigerlily Foundation's Tiger Trials Program is working to increase diversity and inclusion in clinical trials. Through Tiger Trials, we provide patient education, resources, and support aimed at empowering people living with cancer and arming them with the tools needed to find and participate in a potentially life-saving clinical trial. Did you know that less than 5% of adult cancer patients enroll in a clinical trial? People of color are vastly underrepresented in these clinical trials too, even though cancer mortality is higher among these groups.

Tiger Trials brings together patients, advocates, researchers, pharmaceutical companies, and healthcare professionals with the goal of making trials more patient-centric. We are committed to supporting our industry partners as they rethink the way their trials are designed, to ensure that patients' voices are included from start to finish. For the latest Tiger Trials information, go to www.tigerlilyfoundation.org.



"In the midst of movement and chaos, keep stillness inside of you."
-Deepak Chopra

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Alternative Treatment Options

Complementary medicine can help you reduce stress, relieve treatment side effects, and improve your quality of life. Complementary therapies could include acupuncture, aromatherapy, art therapy, journaling, massage, meditation, music therapy, Reiki, support groups, tai chi, yoga, and many others. Talk to your medical team if you'd like to try some complementary therapies. They may have recommendations on providers and groups in your area. Some complementary treatments are partially covered by insurance companies, while others like journaling and support groups are free.

Precision Medicine

Since no two breast cancers are the same, treatment that's as personalized as possible is vital. Due to advances in breast cancer treatment as a result of years of research and clinical trials, precision medicine is utilized much more frequently. By testing to get information on a patient's genes, proteins, and environment, and using this information to prevent, diagnose, and treat breast cancer, health outcomes are becoming more and more successful. With precision medicine, doctors use a patient's biomarkers, molecular testing, and targeted therapies to steer a patient's prevention, diagnosis, and treatment plans.

Biomarker Testing

Biomarker testing helps doctors get information on a person's cancer. By looking at the tumor's genes, proteins, and other substances, doctors can make a more personalized treatment plan. For example, targeted therapies and immunotherapies might only work for patient's whose tumors have specific biomarkers. Biomarker testing can also help patients find new clinical trials to not only help treat their cancer, but help contribute to the research to aid future generations.

Genetic Testing

About 10% of breast cancers are hereditary breast cancer, caused by genetic changes that are passed on from generation to generation. Changes in the BRCA1 and BRCA2 genes are responsible for most hereditary breast cancers. You and other family members can see a genetic counselor to determine if you have changes in these genes. Information from your genetic test can be used to customize your treatment plan.

If you have one or more relatives with a history of breast, ovarian, pancreatic, prostate, or other cancers, you may carry genes that put yourself or family members at high risk. You can talk to your healthcare team about genetic testing for yourself or family members. Also, because scientists are rapidly learning about new genes that are associated with cancer risk, you may want to check with their genetic counselor and/or provider every few years to see if new tests are available and appropriate.

Want to Help?

Getting more educated about MBC helps you work better with your healthcare team and make decisions that are right for you. Now, you're also in a position to educate others. You can join our efforts to educate more women about MBC by engaging in our Twitter chats and getting more educated. Engaging in the breast cancer community helps you work better with your healthcare team and make decisions that are right for you.

You can join our efforts to educate more women about MBC by engaging in our Twitter chats, podcasts, blogs, sharing our social media information, and sharing our video series #MYLIFEISMYLEGACY, BREATHE TV, or Master Class to name a few. Now, you're also in a position to educate others. Email info@tigerlilyfoundation.org to find out about other ways to become an advocate.

Tiger Tip

Self-advocacy is getting educated, staying informed, and being confident that you are as much of an expert on your own body as a doctor. There's a great saying that every patient has a PhD--personal history of disease.

"Patients have a PhD - personal history of disease." So, we are the experts in understanding what it feels like."
Julia Maues, an MBC patient advocate

My LIFE – Be your own Best Advocate

Know What Your Rights Are

It is important to know your rights when it comes to your insurance, work leave, or potential discrimination. It is illegal for an employer to discriminate against an employee because of a serious illness such as cancer.

Tiger Tip
Consider making a friend or family member your advocacy warrior buddy, someone you can talk through issues with.

If you feel that you have been discriminated against in the workplace because of your metastatic breast cancer, you can take action. Keep a record of the examples of the discrimination, and consider talking to your supervisor, company human resources department, and possibly a discrimination lawyer.

Disability

You may want to take a leave of absence from your job during part or all of your breast cancer treatment. The Family and Medical Leave Act (FMLA) provides certain employees with up to 12 weeks of unpaid, job-protected leave per year. It also requires that their group health benefits be maintained during the leave. Contact your employer's human resources department to find out more about short-term (often 3-6 months) disability policies, which pay a percentage of your paycheck even if you are not able to work, like during an illness. Long-term disability (longer than 6 months) might be right for you if you want to take a long-term leave of absence from your work and focus on your treatment and recovery. However, you may not receive your paycheck or benefits during this time.

Insurance

If you have health insurance, your policy will probably cover many of the expenses associated with your tests, diagnosis, and treatment. Make sure that you know what policy you have and what is covered. You can look this up on your company's human resources website or call your health insurance company and ask them to send you a summary of your benefits. It's a good idea to keep insurance paperwork, receipts, copies of claims that you have submitted, bills, and other paperwork related to your healthcare costs in a three-ring binder or folder.

Work

Talk to your medical team if you'd like to keep working during your treatment. It may be possible to schedule tests and treatments around your work schedule! Start an electronic or paper calendar with work projects and deadlines, along with your treatment dates, so that you have all of this information in one place. It's important to stay flexible, as you may experience side effects and might need to work less hours than usual during treatment. Having a backup plan, such as being able to work from home and/or delegate essential tasks to coworkers, is a good idea. Keep this backup plan in a three-ring binder or folder!

My LIFE- Be Empowered

Family

Tiger Tip
To keep everyone updated, choose a communication method that can provide updates to everyone at once; or designate one person to post updates for you regularly.

Think about how you want to tell family members about your diagnosis. Will you share the news in-person, on the phone, or via FaceTime, Zoom or Skype? Would you prefer to send a group text or a group email to all family members, and then follow up with individuals at a later time? When people hear your news, they may ask you what they can do to help. Make a list of tasks that your family members could do (meal preparation, household chores, transportation for you or other family members). Perhaps a family member could coordinate a web page on a site such as CaringBridge.org to provide family and friends with updates; you may find it draining to continually provide updates to concerned family and friends.

Caregivers

It is normal for spouses/partners of those with breast cancer to feel many emotions such as anger, anxiety, discouragement, and fear for the future. Many treatment facilities offer support groups for co-survivors, and there are many blogs, telephone hotlines, and social media groups focused on supporting those who are caring for breast cancer survivors. The Cancer Support Community has a good list of tips for caregivers and links to other resources.

Talking to Children

Children and teens feel many of the same emotions as spouses and partners. Some families try to protect children by not telling them too many details. No matter their age, children can sense family stress. Talk to your medical team about how and what to tell your children about your cancer. At the end of the day, what and how you tell your children is up to you. What matters most is that they feel that they are still connected with you, don't feel left in the dark, and they feel they are able to support you, whatever you decide that to be.

Reassure your children that it's normal to feel sad, mad, scared, or upset. Tell them about any possible changes in your appearance and/or family routines. Answer their questions when they feel comfortable asking them. There are many local, regional, and national support groups for children and teens with parents who are living with cancer. Your children may find it helpful to connect with peers who are experiencing similar emotions.

Dating

Being single and dating can be challenging even without having metastatic breast cancer. Whenever you tell someone you're dating that you have metastatic breast cancer is up to you. In the end, honesty is often the best policy; consider sharing information about your diagnosis, treatment, and side effects with your partner once you're ready to do so.

“There are only two days in the year that nothing can be done. One is called Yesterday and the other is called Tomorrow. Today is the right day to Love, Believe, Do and mostly Live." -Dalai Lama XIV

Managing your Emotional, Spiritual, Mental Self

Learning that you have metastatic breast cancer can be overwhelming at first, but eventually you will find "a new normal." Make time to nurture your emotional and spiritual self. Depending on your practices, connect or reconnect with a religious congregation. Try meditation or daily yoga, pray often, start a new hobby, or take up an old favorite, like crocheting or knitting, reading, drawing or painting. Join a support group or social network. Take a class at your local community college. Make a vision board and map out your life - this is the time that you can purposefully design life - just as you want it to be.

Pain Management

Controlling pain is a crucial part of treatment for individuals with metastatic breast cancer in order to improve quality of life. It is important to find the right combination of medication for pain control, while limiting side effects.

Make sure to tell your health care provider about any pain or discomfort you experience, as soon as it starts. Typically, the causes of pain are easier to treat when the symptoms first appear, so don't wait until the pain becomes more severe before talking to your provider and getting treatment. Doing so can make it harder to control and may require more medication. Different individuals experience pain differently, as no two people are the same and no cancer is the same. To ensure that your provider can offer you the best pain management, it is important to explain exactly what you are feeling and experiencing.

Palliative medicine is a medical specialty focusing on giving patients relief from the symptoms and stress of a serious illness. Your provider may refer you to a palliative care specialist who treats pain and helps patients maintain the best quality of life possible.

The Tough Stuff

Because there is no cure for metastatic breast cancer, there will be a time when treatments are not successful, or you decide to stop treatment because of severe side effects. Think about what kind of medical care you want to have at the end of your life and who you would like to make decisions about your medical care if you are not able to. A living will is a document that lists your choices for medical care such as if you want machines to keep your kidneys and lungs functioning, cardiopulmonary resuscitation (CPR) if your heart stops beating, receive nourishment through a feeding tube if you aren't able to swallow foods, withhold food or fluids. A medical power of attorney is a document that lets you list whom you would like to make decisions about your medical care if you are not able to. Once you have prepared and signed a Living Will and/or a Medical Power of Attorney, make copies and give them to your family members and your medical team. Make a few extra copies for your medical records folder too.

When or if you decide to stop treatment, you will still receive medical care to help reduce your pain and maintain a good quality of life. This is called palliative care. Hospice care provides support to you and your family at the end of your life. The goal of hospice is to make your quality of life the best it can be in the time that you have left. Hospice care can be provided at your home, at a hospice facility, or in a hospital. Clergy, counselors, home health aides, nurses, and social workers often work together to provide hospice care.

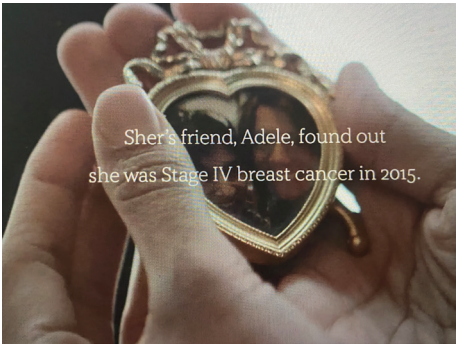
"How lucky am I to have something that makes saying goodbye so hard."
–Winnie The Pooh

You may decide to pre-plan or even prepay your funeral or memorial service. Some details to consider are what kind of service, any particular music or hymns, and your preferences in terms of your physical remains (cremation, burial location, donating your body to the medical community). Write your wishes down and save them either on paper or electronically for your loved ones.

"My story with breast cancer can be seen as tragic. But instead, I want people to see it as hopeful and inspiring. I'm still a dynamic, loving 37 year-old woman. And at every moment since my diagnosis, I am still LIVING. Cancer is part of my life but it doesn't define me."
-Julia Maues

Saying See you Later to Friends and Family

This is the part that no one likes to talk about. Life is a wonderful blessing, and at Tigerlily Foundation we like to believe that it never ends. We think we transition from the physical to a spiritual form, and that we can be with our loved ones in a different way. So, transitioning can be looked at as a "see you later" and a new beginning. There's a lot of unknowns, and it isn't to say goodbye for you or your loved ones. So, here's an approach:
Live your life now like you never have before – be open, vulnerable, live out loud, love as wide as you can.



Make a bucket list and DO IT!

Make a list of your favorite memories with your parents, siblings, children, grandchildren, and special friends. and share your thoughts with them either in writing or by recording video messages to them.

If you have children, consider recording advice for them for the future and tell them how much you love them. If you enjoy scrapbooking, put together a photo book for loved ones or your favorite holiday, travels, or other good times together. Also, before the time comes, begin a dialogue with your family, including your children, about what they are thinking and feeling. Explore the option of adopting a pet or planting a tree together, so they can nurture it, watch it grow, and sit under it. Leaving your family with happy, living reminders are great ways they can feel close to you, or help them soften the fear of you "leaving them."

Celebrating Life

Thinking about the past or worrying about the future is inevitable. But as much as possible, try to be present and live in the moment. Consider keeping a gratitude journal and taking time to savor the "little things" in life, like a beautiful sunrise, the ritual of brewing tea, or the changing colors of the seasons. Make time for favorite hobbies and visits with cherished family and friends. Enjoy every breath. Put your hands on your heart – hold it there and "feel "your heartbeat. Take in every sight and sound. Enjoy the touch of heat and cold, hugs, kisses, textures. Above all, say all that needs to be said. Laugh. Do it all. Live.

Metastatic Breast Cancer

The most common sites for breast cancer metastases are the lungs, liver, bones, and brain. Metastatic breast cancer isn't the same for everyone. According to the National Breast Cancer Foundation, symptoms at stage IV will depend on the degree to which the cancer has spread in the body.

Metastatic breast cancers can happen as a recurrence or progression of early-stage breast cancer or can occur at the original diagnosis of breast cancer. When someone is diagnosed with breast cancer for the first time at stage IV or with MBC, this is known as de novo MBC. In other words, a person has no history of breast cancer, has some abnormality discovered that leads to a diagnosis of breast cancer and when the breast cancer is diagnosed, it has already spread beyond the breast and nearby lymph nodes to other body parts.

Metastatic breast cancers from a recurrence or progression are born from breast cancer cells that remain in the body after treatment for early breast cancer. The breast cancer cells were always there but were dormant (inactive) and could not be detected. Then, for some unknown reason, the cancer cells began to grow again. This process is not well-understood.

Although metastatic breast cancer has no current cure, it can be treated.
Getting the right treatment can increase both your quality of life and longevity. Treatment can control MBC for a period, but often cancer stops responding to treatment and progresses. When that happens, the patient and their health care provider have to talk about other therapies that can target the cancer. Each treatment is called a "line of treatment." Some MBC patients may talk about their 5th line of treatment, etc., which means that they have been on four previous treatments that stopped working for them.

Why MBC Research is So Important

Researchers create clinical trials to investigate whether an intervention will benefit a medical condition or disease. MBC research is important because we need to meet the unique needs of women living with MBC and find treatments that can offer survivorship. As we mentioned before, it is currently not well understood why or how breast cancer cells lay dormant and undetected, or why they then become active and grow again once again at a later time. Tigerlily Foundation and our network of ANGEL advocates and community partners need to drive research and clinical trials to improve health outcomes and quality of life for the women and men living with breast cancer. We also need to better understand these pathways for metastasis, as when this is better understood, more targeted and effective treatments can be developed and possibly provide cures for MBC.

Currently, the 5-year survival rate, i.e., the percentage of people that live at least five years after diagnosis for breast cancer that has spread to a distant part of the body (MBC), is 27%.[7] However, everyone's outlook is different. With new MBC therapy breakthroughs, there is hope that we can get a drug that increases the survival rate, prolongs the progression-free period, and ultimately improves the quality of life of those living with MBC.

"Learn from yesterday, live for today, hope for tomorrow. The important thing is not to stop questioning."
-Albert Einstein

Understanding Survival Rates

Survival rates for breast cancer are based on studies of many people who have been diagnosed with breast cancer. But these statistics can't predict each individual's personal outcome.

Each person's prognosis, or outlook, is different. While a quick Google search may show you that statistically, the five-year survival rate for MBC is 22% or the median survival for MBC is three years, there are many MBC thrivers living with their MBC for 15+ years! You can read some of these stories on the Tigerlily website in our ANGEL blogs and on our partner Metastatic Breast Cancer Network's website on their 10+ year stories page found here: http://mbcn.org/blog-3-columns-masonry/.

There are other examples of how powerful sharing your story can be! You never know when someone in a similar situation as yours will see inspiration in what you share. This is the 'Power of One' and your power as an ANGEL Advocate!

While there is no formula to determine life expectancy for someone living with MBC, it is important to note that the following factors can affect life expectancy with metastatic breast cancer:

- Age
- General health
- Hormone receptors and HER2 receptors on cells with cancer
- The types of tissue that the cancer has affected

It's important for MBC thrivers to find health care providers that will treat them as a whole person, look at their quality of life along with treatment plans, and do not subscribe to a set prognosis without considering their patient's individual situation.

Unique Needs of MBC

There are various treatment and emotional needs of women living with MBC. Let's talk about the treatment needs first.

7. Breast Cancer - Statistics. Cancer.Net. Published June 25, 2012. Accessed February 15, 2021. https://www.cancer.net/cancer-types/breast-cancer/statistics

Treatment Needs of Women with MBC

There are several options for treating MBC, including chemotherapy and the oral agents cyclophosphamide, capecitabine, tucatinib, lapatinib, and neratinib. But although there are several options available, MBC has the following unmet needs:

1. Treatment to prolong the interval to intensive chemotherapies.
2. New treatment options to prolong the time to start intensive chemotherapy. Extending the start time helps because chemotherapies have serious adverse effects that can decrease the quality of life.

Currently, researchers are exploring metronomic therapy (frequent, long-term administration for chemo at low doses) as an option to prolong the interval before intensive chemotherapies. Also, metronomic therapy can be oral, which can eliminate the adverse effects associated with conventional chemotherapy. However, more studies on metronomic therapy are needed.

Tiger Tip

You are a part of a living legacy; Tigerlily Foundation are here for you! We are more than a community; we are a family and together we support each other. We are always just a phone call away and even have 24/7 prayer lines, weekly support groups, resources, and support for anything and everything you are going through. Don't ever hesitate to reach out!

Treatment Related Complications

The current therapies for MBC have serious adverse effects. Taxanes, which are widely used in treating MBC, are very hydrophobic (do not dissolve in water easily) and insoluble. Some examples of taxanes used in MBC therapies include paclitaxel and docetaxel. The solubility property of a drug is very important because it determines how easily the drug would pass through the cell membrane. To solve the problem of the insolubility of paclitaxel, it is dissolved in polyoxyethylated castor oil and ethanol.

These agents usually cause adverse reactions in patients. So, before treatment, patients are usually pre-treated with corticosteroids (steroid hormones used to lower inflammation), H2-receptor antagonists, and antihistamines to prevent side effects. However, some patients receiving IV paclitaxel still have fatal hypersensitivity reactions to the polyoxyethylated castor oil and ethanol.

Also, patients with preexisting conditions like diabetes may not be able to tolerate the corticosteroids, and this can cause them to have the complication of high blood sugar (hyperglycemia).

Tiger Tip

Many pharma companies offer discount programs or reduced pricing for these therapies Patients can look online or contact the manufacturers of some of these drugs to apply for this assistance.

Apart from hypersensitivity reactions, the solvents in taxanes are known to cause neutropenia, an abnormally low number of neutrophils (a type of white blood cell) in the blood. A count of fewer than 1,500 neutrophils per microliter of blood is classified as neutropenia, and less than 500 per microliter is classified as severe neutropenia.[8]

Neutrophils are important for protecting our bodies against infections. So, if neutropenia is very severe, a person can have a life-threatening infection. When someone has neutropenia, even the normal bacteria in the mouth and gut can cause serious illness.[9]

There's a great need for treatment regimens that are less burdensome for patients and their caregivers.

8. Neutropenia | AAAAI. The American Academy of Allergy, Asthma & Immunology. Accessed February 14, 2021. https://www.aaaai.org/conditions-and-treatments/conditions-dictionary/neutropenia
9. Neutropenia (low neutrophil count). Mayo Clinic. Accessed February 14, 2021. https://www.mayoclinic.org/symptoms/neutropenia/basics/definition/sym-20050854

Need for Reduced Health Care Costs For Cancer Therapy

People often have to pay exorbitant costs for cancer therapy. The costs don't make sense. If you think about it, the reason why cancer therapy is so expensive is because of the costs of developing drugs from clinical trials to the bedside, specialized supplies and equipment, and highly-trained personnel for administering drugs.

Insurance companies may also complicate cancer therapy. The level of reimbursement by insurance companies can affect the type of chemo selected by physicians. In an analysis of Medicare claims from 1995 to 1998, insurance coverage did not affect physicians' decisions on whether to administer chemo, but it affected the type of chemo used.10 Sometimes, doctors want to prescribe oral cancer meds, but most insurance companies only cover traditional chemo, which may not be the best treatment option.

In the past, the primary methods for cancer therapy were IV and injections. Today, modern medicine has caused treatment to progress to patient-administered chemotherapy in the form of oral pills. It's great that personalized medicine is paving the way for easier drug administration, but oral chemo is now much more expensive than traditional chemo.

According to the Association of Community Cancer Centers (ACCC), while traditional chemo is covered under a health plan's medical benefit, oral anticancer medications are covered under a health plan's pharmacy benefit, which means that patients will need to pay disproportionate out-of-pocket costs through coinsurance (requiring patients to pay a percentage of the overall cost of the drug). A person's co-pay can be hundreds or thousands of dollars per month as a result.

The Cancer Drug Parity Act of 2019 requires "any health plan that provides coverage for chemotherapy treatment to provide coverage for self-administered anticancer medication at a cost no less favorable than the cost of IV, port-administered, or injected anticancer medications." However, this law is not a mandate. It only applies to health plans that already cover chemotherapy. Currently, more legislative actions are needed to push this law to all insurance coverage for all anticancer therapies.

It's important to note that newer oral anti-cancer medications do not have IV or injected alternatives. This means that for patients who are prescribed this option, this is their only choice. Therefore, as oral anticancer medications become more widely used, legislative laws should require that they are equally as affordable as their IV counterparts. While many states have passed laws with these types of protections, there is still no federal law ensuring these protections. The high costs of cancer therapy leads to a lack of patient adherence. Some patients end up not filling their prescriptions, leading to a worsening of their health condition.

10. Siddiqui M, Rajkumar SV. The High Cost of Cancer Drugs and What We Can Do About It. Mayo Clin Proc. 2012;87(10):935-943. doi:10.1016/j.mayocp.2012.07.007

It's important to note that these issues are heightened for Black patients and also exist for EBC patients. In a 2015 study looking at why some breast cancer patients receiving long-term hormonal therapy to reduce their risk of recurrence discontinued their treatment or did not adhere to their treatment as prescribed, Black women were 24% less likely to adhere to treatment compared with their white counterparts. Namely, this was due to the fact that Black patients were less likely to have a high income or net worth (4.4% vs. 20.5% of white women) and more likely to have a higher co-payment (42.5% vs. 38.4% of white women). In a later study (which again found Black patients less likely to adhere to their treatment as prescribed), the patients that did not adhere to their prescribed treatment were surveyed. The Black patients in this study reported at higher rates that the importance of adhering to their treatment in order to reduce their risk of recurrence was not explained to them in a way they understood. This further highlights the need for culturally competent physicians and educational materials.

Creating a Living Legacy

When you hear the word “legacy,” what comes to mind? Does it bring up thoughts of someone passing? Or history, a monument, material possessions, or other physical creations that people pass on after they are gone?

The truth is, legacy is about SO MUCH MORE than what is left behind after you are gone. At its core, legacy is about LIVING this life in the present and caring about the world around you in your lifetime. With our time on earth, each of us has a unique opportunity to use our POWER OF ONE to help others in a meaningful way.

A legacy is also a symbol of HOPE for the future, which means...

- Taking and developing a part of yourself that will be timeless
- Creating personal meaning and purpose
- Realizing that small actions that we take on a daily basis multiply into something truly significant
- Knowing that we have an obligation and the POWER to help make the future better than the past

“My story with breast cancer can be seen as tragic. But instead, I want people to see it as hopeful and inspiring. I’m still a dynamic, loving 37 year-old woman. And at every moment since my diagnosis, I am still LIVING. Cancer is part of my life but it doesn’t define me.”
-Julia Maues, ANGEL Advocate and GRASP co-founder.

The Importance of Legacy

All of this talk of “legacy” might be starting to sound a little daunting, so let’s take a step back and talk about exactly what a legacy is and why it is so important.

The Oxford Dictionary defines “legacy” as “something handed down by a predecessor,” but you can also think of legacy as the footprints you’ve left and the contributions you have made to this world.

And YOUR legacy is important, because your life MATTERS! Deep down, most of us want to feel that we have made (and currently are making) a difference in this world. A legacy can be a reflection of your life experiences, interests, and core values. A legacy can also bring into focus what matters most to you and how you hope to be remembered.

Being here today with us and becoming a Tigerlily ANGEL Advocate is an amazing way to start creating a living legacy!

How a Legacy Can Benefit your Life Now

Legacies also play a big part in the human experience and what it means to truly be living. Research shows that without a sense of purpose and working to create something bigger than ourselves, we can lose a sense of meaning in our lives. Pursuing the idea of a legacy gives us the opportunity to look deeper into our relationship with our family, friends, communities, as well our very own mind and spirit.

The bottom line is that a living legacy gives you a perspective on what's important! It helps us figure out what kind of life we want to live, as well as what kind of world we want to create.

As citizens of planet earth, we are connected by way more than simple biology and sharing space! Our true connections to our past and future come from traditions, stories, memories, as well as our hopes and dreams. A LEGACY is what connects us to those who came before and those who will come after us.

Legacies Aren’t for After You’re Gone

A big misconception people have about legacy is that it’s only something you leave behind after you are gone. That couldn’t be further from the truth! We can all make a big impact while we are still here through a LIVING legacy. Legacies are truly about living in the present while building the future at the same time.

In fact, a legacy can be shaped over an entire lifetime. Just as we have built a career, family, or any other accomplishment, we can also build an enduring legacy for those who come after us. Don't miss the opportunity to create your own living legacy, because the sooner you create the plan, the greater potential you have to make a big impact. So... there's no better time to start working on your legacy than TODAY!

The Time to Start is Now

Just the thought of creating a legacy may seem like an insurmountable task. Especially as you get started, break it down into small things you can do every day. This can include 10 minutes of online research on endeavors that match your passion, or just calling up a friend or family member to let them know that you care.

Here's a great ANGEL Advocate example of creating a living legacy: Nunny Reece took the idea of a bucket list to a new level creating her own Live, Love, Life list. This was based on her commitment to choosing to live her best life and not view metastatic breast cancer as a death sentence. That is what she wanted her living legacy to be. On Nunny's Live, Love, Life list, she was advocating for those who don't have access to equitable healthcare. Nunny danced through life with faith, fortitude, and her contagious love of life.

Creating small tasks that support your legacy can make it seem MUCH more doable, and it can also keep you from procrastinating. When you take that action, no matter how small, it means you have truly started your living legacy!

Consistency is also important in building a living legacy. Habits and the things we do day-in and day-out are what truly make us who we are and the legacies we create. A helpful exercise could be setting an intention when you wake up each day, and this intention exercise can also be done in combination with many of the activities we discussed in the self-care section, including meditation, yoga, or taking a walk.

POWER OF ONE

A living legacy can take on an endless number of forms. For example, volunteer work, or:

- Children
- Grandchildren
- A Business
- A charitable organization or volunteerism
- Ideals or causes you have pursued
- Books or writings
- Art you create
- Building a community garden
- Community events or traditions
- The home you build
- And really ANYTHING that represents a piece of YOU

Taking all of this into consideration, we hope that you have discovered that legacies aren't about passing away or leaving behind. Legacies are all about your LIFE and LIVING today.

Building a Legacy is for Everyone

Another misconception many people have is that legacies are only created by famous individuals or those in the public eye. We can each design our life as living legacies! Think about your family: holiday traditions, the meals we put on our tables, how we take care of our homes and raise our children are all part of an intimate legacy that has been passed down from parents, grandparents, and even great grandparents. Think about the powerful conversations you could have about family health history or establishing healthy habits. These are living legacy acts. Or, think about how you could share all that you've learned with your friends. You could change the course of their lives.

You are your own history book. You can create meaning in your life, and have your life's work and creations live on.

There is no right or wrong on how or what we choose to do when creating our living legacy, and deciding what matters to us most. A legacy can range from a widespread change in society, to a deep impact made to a single person helping them grow and become the best version of themselves.

#MYLIFEISMYLEGACY

Just because you may be shy about being in the spotlight, does not mean you should be shy about your living legacy and sharing your contributions with the world. You can start this habit of sharing with those closest to you, and be sure to surround yourself with those people who will lift you up with positivity and support you. We all need to be on the lookout for people who bring out the best in us and empower us to see our gifts. We need to live as our MOST authentic selves.

In order to be able to build something, particularly a living legacy, you need to have ultimate goals in mind. Taking some time to think about some deep, and at times tough questions, can help point you in the right direction. These questions can include any or all of the following:

- What has been the most meaningful experience in your life?
- What advice or knowledge would you like to share with others?
- What are you grateful for in your life?
- What would you like to change for others following in your footsteps?
- What matters most to you in life?
- How do I want people to describe me? To describe what matters to me?

These questions are great ways to start thinking about what your living legacy is and how you want to shape it. As we mentioned earlier, becoming a Tigerlily ANGEL Advocate is a great way to do this. After considering the earlier questions, let's now think about what kind of activities you are interested in, either because they fit a passion or talent you already have or because it's something you would like to learn more about and build new skills around. This ANGEL training and program are designed to help you do those things and learn or amplify the information and skills to do them. Keep this in mind as we continue exploring what it means to create a living legacy. You'll have a chance to let us know what some of those interests are in just a bit.

"The great use of this life is to spend it for something that will outlast it."
--William James

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#MYLIFEISMYLEGACY

Series of Intimate Vignettes

Metastatic breast cancer is the reality for far too many women across the world. But many of these diagnoses can be prevented by early detection and treatments. Our mission is to one day see MBC, not as a terminal disease, but one that can be treated with a 100% success rate.

Join Maimah Karmo, President and Founder of Tigerlily Foundation, as we launch the "My Life is My Legacy" hero campaign, with a vision of ending disparities of age, stage, and color. If you've ever asked yourself, "why should I care?" We hope you will be inspired to share this video and how you and others can make a difference that could save lives for generations to come.

For more information on My Life Is My Legacy visit https://tinyurl.com/4ktykvs4 or scan the QR code.

The Hidden Costs of Cancer

Kimi was diagnosed with triple-negative cancer (TNBC) in 2019 after being misdiagnosed with benign tumors one month prior. After having a lumpectomy, six months of chemotherapy, and 33 rounds of radiation, Kimi was ultimately forced to make the impossible choice between being able to afford cancer treatment that could prolong her life…or providing basic needs for herself and her family. No one should ever have to make this choice, but many women have to.

This is Kimi's Legacy.
What's Yours?
#MyLifeisMyLegacy

I am Not Afraid of Dying

Rebecca has an open heart full of vigor and vitality. She is not afraid of her cancer diagnosis, because for many years she was afraid of living. Today, living with cancer, she feels more alive than ever… and is not afraid of dying. Healing from generational trauma that consumed her life was transformational. Rebecca has learned to love herself and invite wellness into her life, becoming an energy healer and using her gift to light the world she lives in and help awaken others.

This is Rebecca's Legacy.
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

Not Today

Kelli was not listened to when she initially began to experience symptoms and doctors did not start treating her disease a LOT sooner. Even though she feels at times that she is living a life that will be cut short before her time, she boldly shares her truth and pours herself into advocacy, Kelli has become a powerful voice in metastatic breast cancer advocacy, sharing with patients – "you are not alone, you are worthy of treatment and getting to a better place in life". Her wrist tattoo, "Not Today", reminds her that each day she can see the tattoo, she is not dying of cancer today. Kelli wants you to know that every day 115 lives are taken by Metastatic Breast Cancer (MBC), in the United States alone. As a co-founder of the Metsquerade Gala, she works working with METAvivor to advocate, educate and champion funding that will go to MBC research, and grants to support patients living with metastatic disease.

This is Kelli's Legacy.
What's Yours?
#MyLifeisMyLegacy

Twins Proving Miracles Really Do Exist

Tonya's twin sister Sonya is her best friend. These sisters share their lives together and their genetic makeup – they are both BRACA1 positive, have a family history of cancer, and have a mother who was diagnosed with breast cancer four times. Tonya was diagnosed with Triple Negative Breast Cancer (TNBC), and had a double mastectomy, chemotherapy, and radiation - all with her sister by her side. "I felt like it was happening to me" – Sonya. This dynamistic duo - together are not letting anything slow them down from living and helping others. Today, Tonya is NED (no evidence of disease) and Sonya is exploring a preventative mastectomy to decrease her chances of breast cancer. The miracle of life is what drives these women to help family, friends, and patients get educated about their health history and be proactive with cancer.

This is Tonya's Legacy.
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

The Future of Healthcare is Inclusivity for All

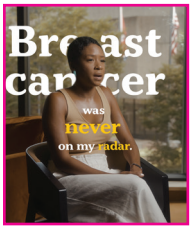
Mandi's Dad taught her as a child to know that everyone has an equal human worth. The words her Dad taught her ring as true today as they were the day they were spoken: "You are not better than anyone and no one is better than you, never let anyone make you feel less, and don't ever make anyone feel less." Mandi believes that it's not race that causes disparities. It's not being queer that causes disparities. It is RACISM, it is TRANSFOBIA, it is HOMOPHOBIA. It's denying someone's equal human worth. Dr. Pratt-Chapman's legacy is moving the future of healthcare to provide INCLUSIVITY FOR ALL.

This is Mandi's Legacy.
What's Yours?
#MyLifeisMyLegacy

THRIVING with MBC for 25 Years

Her oncologist said "you're the longest living person I know of" and the doctors don't know why? Diagnosed with Stage IV from the start, Lori just completed her PhD and was ready to begin a new career when cancer entered her life. Lori's ambitions streamlined into one goal and that was to live as long as possible. Congratulations Lori, 25 years and THRIVING with metastatic breast cancer. Lori says she is the luckiest person she knows, showing the world how to thrive with MBC.

This is Lori's Legacy.
What's Yours?
#MyLifeisMyLegacy



Embracing My Unique and Whole Self, My Dreams, Passions & Purpose

While breastfeeding, Aisha, a mother of four detected the lump that forever changed her life. Most of us judge our bodies, but these very insecurities can take on a whole new perspective when facing cancer. Aisha's treatment journey included a double mastectomy - her pain went more than skin deep - it was physical, emotional, and traumatic. From what started as a prayer to God, "You can use me, I will inspire and advocate for other young women" has turned into a living legacy to advocate, empower, and inspire others to be their own unique selves and to fully embrace themselves as they are. To live and love one's life fully is our greatest gift.

This is Aisha's Legacy.
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

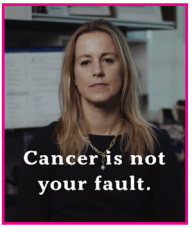
Series of Intimate Vignettes

Boob Inclusive

Dana was a 28-year-old fashion designer in New York when cancer forever changed her life. Diagnosed with a very aggressive HER2+ breast cancer, her medical team had one goal – to at least extend her life for 5 years. This all changed when she was able to receive new drug treatments that specifically targeted HER2+ proteins. This revolutionary medical advancement has her living her best life for 12 years and counting. Beyond the physical and emotional pain, Dana was not able to find a bra to fit her body, so she decided to do something about it and her mission to create the most comfortable and beautiful bras for all boob types. Dana is the Founder and CEO of AnaOno, boob-inclusive lingerie. Her creativity has completely revolutionized the bra industry, "whether you have two boobs, one boob, no boobs or F(oo)Bs" Dana has thought of you. Since launching AnaOnoin 2014, she has received countless accolades, but most importantly, she is able to reach thousands of individuals impacted by breast cancer, as her most satisfied customers are her breasties!

This is Dana's Legacy.
What's Yours?
#MyLifeisMyLegacy

We Should All Be Thinking About Clinical Trials



Dr. Hamilton is committed and passionate to break down barriers and make clinical trials more accessible to all people. It is her love for oncology and passion around cancer care, specifically clinical trials is where Dr. Hamilton and her team are finding new ways to improve treatments and the quality of life for patients. At any point during the cancer journey, we should all be thinking about clinical trials. Dr. Hamilton wants clinical trials to become a household name and is working with her research team at the breast cancer research program at @SarahCannonResearchInstitute at Tennessee Oncology to provide access, education, and support to decrease disparities in clinical trials and improve the quality of life for all.

This is Dr. Hamilton's Legacy.
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

You Are Not Alone

Noelle wants kids out there who have a parent who has or has had cancer that YOU ARE NOT ALONE. Growing up with a parent with cancer is scary, overwhelming, and can be all-consuming, causing stress and anxiety that can have a lasting impact on your life. Noelle has also had other life-altering experiences. "The last few years I have dealt with mental health illness, and I know how hard that can be for people." While she's still navigating what can be a lifelong journey, Noelle had life-changing support through therapy, her healthcare team, and family and by implementing lifestyle changes, that have altered the trajectory of her life. Noelle is now studying psychology with the intention to dedicate her career to helping others with mental health. She wants to use her experiences as a gift.

This is Noelle's Legacy.
What's Yours?
#MyLifeisMyLegacy

Living Life Now

Lisa wants Women Of Color living with breast cancer to be passionate about living life now. Lisa did not have an easy life growing up, but her fierce determination to be successful and make something meaningful of her life brought her to the U.S. Navy at a young age. Military life provided many life lessons, it helped Lisa evolve physically and mentally while providing her with the skills to take on any challenge. Faith is a guiding force in Lisa's journey. One of her mantras is, " I shall live and not die, but declare the works of the lord." These words are a constant reminder to make every moment count.

Lisa was told she could expect 5 years to live, to know Lisa is to know she would beat those odds. As a 2x breast cancer survivor and metastatic breast cancer THRIVER, Lisa refused to live life on a timer - she makes every moment count. "If you do not fight for you, who will?" Lisa is a mentor, leader, and role model not only in the breast cancer community but for us all.

This is Lisa's Legacy.
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

A Man of The People

Ray is committed to helping communities overcome racial inequities. He has spent his entire life and dedicated his career to working to educate, empower and transform his community. Ray knows firsthand what a broken healthcare system looks like - as he serves the community in which he lives, works, and prays. He knows how important it is to raise his voice to create change for the poor, voiceless and vulnerable.

What he's most committed to is helping people through mobile health clinics that offer breast cancer screenings to those who don't have access to health insurance or primary care physicians.

This is Ray's Legacy.
What's yours?
#MyLifeisMyLegacy

A Family's Journey

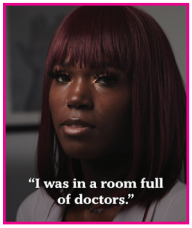
Families often are overwhelmed when a loved one is diagnosed with cancer. In some families and in some cultures, cancer is often kept private, and families do not discuss health matters, family health history and how they feel about what's happening to the one they love. This has an impact on family health and how families cope through illness. Maimah comes from a Black, African family, and is first-generation American. In her family, many personal matters were not discussed. When Maimah went through her cancer journey she had the full support of family, but talking about CANCER and how people or how she felt, was like the elephant in the room. Through Tigerlily Foundation Maimah is working to change the trajectory cancer has within families and encouraging others to start these important and healing conversations.

Listen as Maimah has an honest and heartwarming conversation with her brother for the first time about cancer since she was diagnosed with Triple Negative Breast Cancer 17 years ago.

This is Maimah's Legacy
What's Yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes



Breast Cancer at 14

Young women are being diagnosed with breast cancer at alarmingly rapid rates. In Tamekia's case, she didn't let childhood cancer stop her from accomplishing her dreams. And this is just the beginning… She has evolved into a strong woman and an advocate to be reckoned with.

This is Tamekia's legacy.
What's yours?
#MyLifeIsMyLegacy

Running Out of Treatment Options

Lisa believes she has only two years left to live. She is tirelessly advocating for herself and others, as well as being the voice for her friends who have died from metastatic breast cancer. Stage IV breast cancer needs more research, more funding, more treatments...and we are running out of time. Lisa is showing others her best self and teaching those in her present, past, and future how to live their best life.

This is Lisa's legacy.
What's yours?
#MyLifeIsMyLegacy

I Don't Know How I'm Going to Handle This

Debijo is a melanoma survivor, but cancer was not the only battle she would have to survive. Debijo lost her husband and best friend, Howard, to leukemia. She shares her impactful story about navigating the grieving process to comfort and educate others. Debijo is an incredible advocate and uses her experience in the medical field to help other caretakers and spouses. Her free spirit and bright outlook on life have helped her carry on years after Howard's death. Anyone who has lost someone to cancer will relate and learn from Debijo's story. Watch this video and share love

This is Debijo's legacy.
What's yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

Hashtag Battling Cancer Like a Boss

She is the type of person who remains strong for the rest of us by fighting medical injustices and educating others through advocacy.

We cannot keep letting young women like Amina down.

This is Amina's legacy.
What's yours?
#MyLifeisMyLegacy

It's Going To Get Hard But You Can Do This

Tameka Johnson's cancer journey began at the young age of 13. Present-day, after persevering over many battles, Tameka uses her voice and platform to share her story on her blog, 'Evolving Soul.' She is a thriver and a dedicated advocate who inspires others to keep hope.

This is Tameka's legacy.
What's yours?
#MyLifeisMyLegacy

Thriver - Warrior - Unicorn

"We have to learn to make our lives sacred". This is the mantra Maimah Karmo lives by.

Her transformation came about after being dismissed by a healthcare provider and receiving a delayed diagnoses of triple negative breast cancer, for which there then was no targeted treatment. She made a promise to God to give her life in service to others and woke up the next morning with the vision to create Tigerlily Foundation.

This is Maimah's legacy.
What's yours?
#MyLifeisMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

Keeping Faith On The Cancer Journey

Derek Burns is a motivational trainer and inspiring human, helping those diagnosed with cancer reconnect to themselves mentally and physically. His connection to God has fueled his purpose and passion. Derek's unique perspective on life has given fullness to so many who feel empty after a cancer diagnosis. Going on his own journey navigating life with PTSD disorder, he relates to the ups and downs that accompany truama.

This is Derek's legacy.
What's yours?
#MyLifeisMyLegacy

Living With Stage IV Breast Cancer for 20 Years

"I'm thankful for every moment of my life. I know what it could have been…and now what it is." This November, she celebrated two major events: Her 23rd cancerversary & her 20th Stage IV cancerversary.The survival rate for people living with metastatic breast cancer is lower than it should be. She is a woman who has overcome many odds. Even more so, with a smile on her face.

This is Terlisa's legacy.
What's yours?
#MyLifeisMyLegacy

Tracing Cancer to Domestic Violence

Dr. Sher Mathew shares her story about domestic violence, trauma, and how it contributed to her cancer diagnosis in 2015. Sher is purpose-driven and carries her faith in God on her journey of navigating life and recovery. She is an advocate and inspiration in the cancer community.

This is Sher's legacy.
What's yours?
#MyLifeIsMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

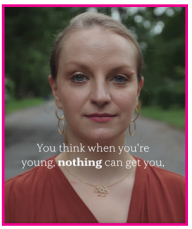
What Losing A Child To Cancer Feels Like

Sue Odderstol lost her daughter, Catherine, over a year ago to Cervical Cancer. Cat was a beautiful and vibrant free spirit who was full of life. Her light still impacts all those who knew her even after her death. Sue has overcome battles throughout her life, including one of the most harrowing experiences any parent can go through, losing a child.

This is Sue and her daughter Cat's legacy.
What's yours?
#MyLifeIsMyLegacy

Dance Teacher on a Mission To Save Lives

When you are young, it may seem you are immune to cancer, but Maggie's story, as well as many others, tells a different narrative. Watch this video about a dancing queen whose mission is to teach others how to dance through life and be an empowered advocate.



This is Maggie's legacy.
What's yours?
#MyLifeIsMyLegacy

They Delayed and Denied My Right To Survive

This is the unacceptable truth of how young Black women are disregarded in their medical rights. How do you relate to Shonte's story?

This is Shonte's legacy.
What's yours?
#MyLifeIsMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

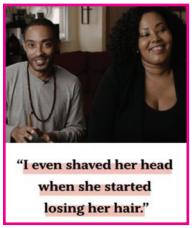
Series of Intimate Vignettes

Stupid Dumb Breast Cancer
Meet Annmarie. She accidentally revolutionized breast cancer advocacy through a personal blog intended for family and friends and that is when Stupid Dumb Breast Cancer came to life.

This is Annmarie's legacy.
What's yours?
#MyLifeIsMyLegacy

She is Trying To End Disparities Of Age, Stage and Color in Health Care
Oftentimes we don't think something matters until it happens to us… but the fact is that what affects one of us affects all of us, particularly when it comes to human life.

This is Maimah's legacy.
What's yours?
#MyLifeIsMyLegacy



They Both Had Cancer
This couple both had cancer, now they're changing the way people think about it.

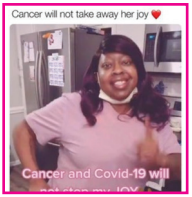
This is Jamil and Rick's legacy.
What's yours?
#MyLifeIsMyLegacy

She Was Pregnant When Diagnosed With Stage 4 Breast Cancer
Julia was about to have a baby when she received the news that changed the course of her life.

This is Julia's legacy.
What's yours?
#MyLifeIsMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

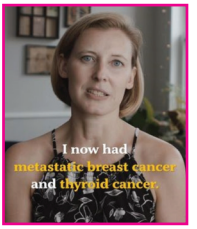
Series of Intimate Vignettes



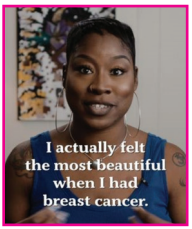
Dancing Through Cancer
Nothing will take away Nunny's will to live <3

This is Nunny's legacy.
What's yours?
#MyLifeIsMyLegacy

The Truth About Breast Cancer Awareness
The doctor said, "You are too young to get breast cancer." Christine showed her doctor that breast cancer does not care how old you are. She's teaching the world the truth about breast cancer awareness and how to better support the cause.



This is Christine's legacy.
What's yours?
#MyLifeIsMyLegacy



Defining Beauty Through Breast Cancer
Patricia wants every person to know how beautiful they are, no matter what challenges they are facing in life <3

This is Patricia's legacy.
What's yours?
#MyLifeIsMyLegacy

She's Changing The Way We Research Cancer
She was diagnosed with a rare form of cancer that affects only 300 people a year. Now, Corrie has dedicated her life to cancer research and is helping others get access to life-saving information about their diagnosis.

This is Corrie's legacy.
What's yours?
#MyLifeIsMyLegacy

If You Know Someone With Cancer, Watch This
It shouldn't have to happen to you for it to matter to you.

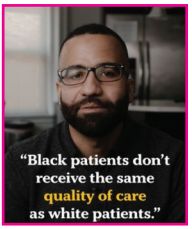
This is Tania's legacy.
What's yours?
#MyLifeIsMyLegacy

#MYLIFEISMYLEGACY *(cont.)*

Series of Intimate Vignettes

When The Doctor Becomes The Patient
Dr. Wilson is an oncological surgeon who was diagnosed with metastatic breast cancer. This is how she walks alongside how patients and is a warrior with her patients.

He's Trying To End Racism In Health Care
Shawn Johnson is a Harvard medical student who's fighting to put an end to racial injustices in our health care system. He empowers patients to become the hero of their own story.



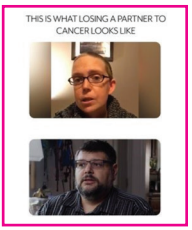
To Any Parent Who Lost Their Child To Cancer
Karen's only daughter, Amanda died from metastatic breast cancer. The gift Amanda left her was that she lived life to the fullest everyday regardless of her diagnosis. So, it's never a loss when you live fully. Living life with passion, in fullness and helping others was Amanda's and now Karen's living legacy.

This is Amanda and Karen's legacy.
What's yours?
#MyLifeisMyLegacy

This Is What Losing A Loved One To Cancer Looks Like
Caregivers go through more than most people can imagine. Jay Caldwell continues to advocate for more for the metastatic breast cancer community.

He is carrying on Beth's legacy to ensure others like her can live.

This is J's Legacy
What's yours?
#MyLifeisMyLegacy



Videos of Beth courtesy of Stupid Dumb Breast Cancer

My LIFE - Resources

There are a variety of resources that provide information about diagnoses and treatment, complementary and alternative medicines, clinical trials, legal resources, financial assistance, transportation, retreats, house cleaning services, and resources for caregivers and children. We provide a list below.

DIAGNOSIS\TREATMENT

- AdvancedBC.org
- American Cancer Society
- Cancer.org
- BCMets.org
- BrainMets.org
- BreastCancer.org
- Cancer.gov
- CancerSupportCommunity.org
- Komen.org
- LBBC.org
- MBCN.org
- Metastasis-Research.org
- Metavivor.org
- MetUp.org
- YoungSurvival.org

CAREGIVERS

- CaregiverAction.org
- Mylifeline.org

CLINICAL TRIALS

- BreastCancer.gov/clinicaltrials
- BreastCancerTrials.org
- Cancer.gov/clinicaltrials
- ClinicalTrials.gov
- ClinicalTrialsHelp.org

COMPLEMENTARY/ ALTERNATIVE MEDICINE

- AnnieAppleseedProject.org
- nccih.nih.gov

OTHER RESOURCES

- CancerAndCareers.org
- MealTrain.com
- RAISE and url

GLOSSARY

A

Ablation
Removal or destruction of a body part or tissue, or its ability to function. Ablation may be performed by surgery or moans, drugs, radiofrequency, heat, or other methods.

Access port
A small device implanted under the skin that allows access to your veins; sometimes called a Port-A-Cath.

Adjunct therapy
Additional cancer treatment given after primary treatment to lower the risk of recurrence. May include chemotherapy, radiation therapy, hormone therapy, treatment therapy, or biological therapy.

Advanced cancer
Cancer that has spread to other places in the body..

Angiogenesis
Tumor and angiogenesis are the growth of new blood vessels that tumors need to grow, caused by the release of chemicals from the tumor.

Apoptosis
Programmed cell death – cell death in which molecular steps in a cell lead to its death. This is how the body gets rid of unneeded or abnormal cells. This process may be blocked in cancer cells.

Ascites
A normal buildup of fluid in the abdomen that may cause swelling. In late-stage cancer, tumor cells may be found in the fluid in the abdomen. Ascites also occurs in patients with liver disease.

B

Benign
Not harmful.

Biological therapy
Treatment to boost back/ restore ability of the immune system to fight cancer, infections, and other diseases. It is also used to lessen certain side effects that may be caused by some cancer treatments. Agents used in biological therapy include monoclonal antibodies, growth factors, and vaccines. These agents may also have a direct antitumor effect. Also called biological response modifier therapy, bayou therapy, PRM therapy, and immunotherapy.

Biomarkers
A biological molecule found in blood, other fluids, or tissues that is a sign of normal or abnormal processes, or of a condition or disease.

Bishosphonates
A drug\substance used to treat hyperglycemia (abnormally high blood calcium) and bone pain caused by some cancers. Forms of bisphosphonates are also used to treat osteoporosis and for bone imaging. Also called diphosphonate.

Blood - brain barrier
A network of blood vessels with closely spaced cells that makes it difficult for potentially toxic substances (such as anticancer drugs) to penetrate the blood vessel walls and enter the brain.

Bone scan
A technique that creates bone images on computer film. A small number of radioactive materials are injected into a blood vessel and travel through the bloodstream. They then collect in the bones and are detected by a scanner.

BRCA1 and BRCA2
These are genes within cells that control the growth of cells. If there are changes called mutations, there is a greater chance of developing breast or ovarian cancer. These changes, or mutations, can be passed from generation to generation in a family.

C

CAM-Complementary and alternative medicine
Treatments used in addition or complementary to, instead of alternative standard treatments, which are not traditional treatments. They may include supplements, vitamins, herbals, acupuncture, energy treatments, massages, spiritual treatment, Reiki, and meditation.

Chemotherapy
Systematic treatment with drugs that kill cancer cells.

Clinical trials
Research done in humans to test the medicine or new treatment to see how well it works and if it is safe.

Chronic condition
A disease that progresses over a long period of time.

Complementary medicine
Non-medical treatments or therapy used in addition to medical treatment.

CT scan end computerized tomography
These are detailed pictures of areas inside the body taken from different angles, created by a computer linked to an x-ray machine. Also called CHT scan, computerized tomography scan, computerized axial tomography scan.

D

Disease-free survival
Length of time after treatment for a specific disease during which a patient survives with no evidence of the disease. Disease-free survival may be used in clinical studies or trials to help measure how well a new treatment works. Also called DFS and disease-free survival time.

Duct
The pathways that carry milk from the lobules to the nipple.

Ductal cancer
Cancer that grows in the ducts of the breast as a mass and may later spread through the duct wall into the breast tissue.

E

Effusion
Any abnormal collection of fluid in hollow spaces/ between tissue of the body. For example, a pleural effusion is a collection of fluid between two layers of membrane covering the lungs.

Estrogen
One hormone made in females by the ovaries that has effects on reproduction. Some breast cancer cells may grow in response to this hormone.

G

Gene
Coded information within cells in the body that contain instructions for cell growth and other processes.

Genetics counsellor
A medical professional who specializes in talking with patients and their families about their risk of developing diseases caused by changes in genes.

Growth factors
A substance made by the body that functions to regulate cell division and self survival. Some growth factors are also produced in the laboratory and used in biological therapy.

H

Hand foot syndrome
Side effects of some cancer treatments which causes redness, swelling, and pain on the palms of the hands and/or soles of the feet. Also called palmar-plantar erythrodysesthesia.

HER2/Neu
Protein involved in normal cell growth. It is found in some types of cancer cells, including breast and ovarian. Cancer cells removed from the body may be tested for the presence of HER2 blocks/NEU to help decide the best type of treatment. HER2\NEU is a type of receptor tyrosine kinase. Also called c-erbB-2, human epidermal growth factor receptor 2.

Hormone
A chemical made and released by a gland in the body that affects cells or organs in another part of the body.

Hormone receptor status
The measure of hormone receptors on cancer cells.

Hormone treatment
Treatment that adds, blocks, or removes hormones. For certain conditions (such as diabetes or menopause), hormones are given to adjust low hormone levels. To slow or stop the growth of certain cancers (such as prostate and breast cancer), synthetic hormones or other drugs may be given to block the body's natural hormones. Sometimes surgery is needed to remove the gland that makes a certain hormone. Also called endocrine therapy, hormonal therapy, and hormone therapy.

Hormone therapy
Medicine that stops the action or production of hormones.

Hospice care
Caring for the whole person at the end of their lives by supporting their emotional, physical, social, and spiritual needs.

Infiltrating/invasive breast cancer
Cancer that has the ability to spread beyond the breast and nearby lymph nodes.

In situ cancer
Cancer that has not invaded the walls of the ducts or acinus. It is also called stage zero, or non-invasive cancer.

L

Lobule
The glands that produce breast milk.

Lobular Cancer
Cancer that starts in the acinus of the lobule but does not cause scar tissue or form a mask, making it harder to find.

Local therapy
Treatment that is directed to a specific organ or limited area of the body. Examples are: surgery, radiation, cryotherapy, laser therapy, or topical therapy.

M

Malignant
Cancerous.

Metastasize
Cancer that spreads beyond the breast or near nearby lymph nodes to distant areas of the body.

Medical oncologist
A doctor who specializes in treating cancer with medicines.

Metastatic
Cancer that has spread beyond the original location to other parts and organs of the body.

MRI - Magnetic Resonance Imaging
A procedure in which radio waves and a magnet linked to a computer creates detailed pictures of areas inside the body, which can show the difference between normal and diseased. Magnetic resonance imaging makes better images of organs and soft tissue than other scanning techniques, such as computed tomography (CT) or x-ray.

Median Survival Time
The time from diagnosis or treatment at which half of the patients with a disease are found to be, or expected to be alive. In a clinical trial, median survival time is the way to measure how effective treatments are. Also called median overall survival and median survival.

Medical Oncologist
A physician specializing in diagnosing and treating cancer using chemotherapy, hormonal therapy, biological therapy, and targeted therapy. The medical oncologist may also be the main treating physician, and can provide and/or coordinate the treatments given by other specialists.

Monoclonal antibodies
A protein made in the laboratory that can locate and bind to substances in the body, including tumor cells. Each monoclonal antibody is made to find one substance. Monoclonal antibodies are being used to treat some types of cancer and are being studied in the treatment of other types. They can be used alone or to carry drugs, toxins, or radioactive materials directly to a tumor.

N

NED
A period where tests show no evidence of disease.

Non-invasive
Cancer that stays within the ducts or lobules of the breast. Also called in situ or stage 0 cancer.

NSAID - nonsteroidal anti-inflammatory drug
A drug that decreases fever, swelling, pain, and redness.

Neuropathy
A nerve problem that causes pain, numbness, tingling, swelling, or muscle weakness in different parts of the body. It usually begins in the hands or feet and can worsen or improve over time.

O

ONJ - Osteonecrosis of the Jaw
Cancer patients taking certain bone drugs called bisphosphonates may develop bone damage in the jaw, which disrupts the blood supply to the bone and causes tiny breaks that can eventually lead to bone collapse.

Oophorectomy
Surgery to remove one or both ovaries.

Opioid
A substance used to treat moderate to severe pain. Opioids are like opiates, such as morphine and codeine, but are not made from opium. Opioids bind to opioid receptors in the central nervous system. Opioids used to be called narcotics. An opioid is a type of alkaloid.

Osteoblastic/ Osteolytic Bone Metastases
Metastatic bone lesions are also known as osteolytic, osteoblastic and mixed, and are most common where the destructive processes outstrip the laying down of new bone. Osteoblastic lesions result from new bone growth stimulated by the tumor.

Ovarian Ablation
Surgery, radiation therapy, or a drug treatment to stop the functioning of the ovaries. Also called ovarian suppression.

P

Palliative Care
Medical care given to reduce pain and maintain the best quality of life.

PARP Inhibitor
A substance that blocks an enzyme involved in functions of the cell, including repair of DNA damage which could have been caused by normal cell actions, UV light, some anticancer drugs, and radiation used to treat cancer. This is a type of targeted therapy that may cause cancer cells to die. Also called poly (ADP-ribose) polymerase inhibitor.

Pathology report
A profile of your test results that helps doctors figure out a treatment plan.

PET Scan
A procedure in which a small amount of radioactive glucose (sugar) is injected into a vein and a scanner makes detailed, computerized pictures of areas inside the body where the glucose is used. Because cancer cells often use more glucose than normal cells, the pictures can be used to find cancer cells in the body. Also called positron emission tomography scan.

PICC Line
A thin, flexible tube inserted into a vein in the arm and into a larger vein in the body that is used to administer chemotherapy treatment.

Placebo-controlled Studies
Clinical trials in which one group of participants does not receive the treatment being tested so that researchers can compare the new treatment against standard treatments.

Primary Diagnosis
The first diagnosis of breast cancer.

Progesterone
A hormone made in females by the ovaries that has effects on reproduction. Some breast cancer cells may grow in response to this hormone.

Progression
The course of a disease. In cancer, the growth of tumors or spread of the disease.

Progression Free Survival
The length of time during and after treatment in which a patient is living with a disease that does not get worse.

Progression-free survival may be used in a clinical study or trial to help find out how well a new treatment works. Also called PFS.

Proliferation Index
A number that shows what percentage of the cancer cells are actively dividing at a given time.

Q

Quality Life
The quality of an individual's daily well-being.

R

Radiation Oncologist
A doctor who specializes in treating cancer with radiation.

Radiation Therapy
The use of high-energy radiation from x-rays, gamma rays, neutrons, protons, and other sources to kill cancer cells and shrink tumors. Radiation may come from a machine outside the body (external-beam radiation therapy), or it may come from radioactive material placed in the body near cancer cells (internal radiation therapy). Systemic radiation therapy uses a radioactive substance, such as a radio-labeled monoclonal antibody that travels in the blood to tissues throughout the body. Also called irradiation and radio- therapy.

Radiofrequency Ablation
A procedure using radio waves to heat and destroy abnormal cells. The radio waves travel through electrodes. Radiofrequency ablation may be used to treat cancer and other conditions.

Recurrent Disease
Cancer that has come back.

Regression
Decreases in the tumor size or spread of cancer.

S

Side Effect
Unwanted effects caused by medicines or treatments, including emotional and physical.

Stages of Breast Cancer
These describe the extent of the cancer in the body, and is based on whether the cancer is invasive or non-invasive, tumor size, lymph node involvement, and whether or not it has spread to other body parts. Cancer staging is one of the key factors that allow healthcare providers to determine prognosis and treatment.

Staging
Performing tests to determine the extent of cancer within the body, especially whether the disease has spread from the original site to other parts of the body, in order to plan the best treatment.

Systemic Therapy
Medicines/treatments that treat the whole body by traveling through the bloodstream.

T

Targeted Therapy
Treatment that uses drugs or other substances, such as monoclonal antibodies, to identify and attack specific cancer cells. Targeted therapy may have fewer side effects than other types of cancer treatments.

Treatment Breaks
Short breaks in treatment that allow for rest or for special events.

Tumor Marker
A substance that may be found in tumor tissue or released from a tumor into the blood or other body fluids. A high level of a tumor marker may mean that a certain type of cancer is in the body. Examples of tumor markers include CA 125 (in ovarian cancer), CA 15-3 (in breast cancer), CEA (in ovarian, lung, breast, pancreas, and gastrointestinal tract cancers), and PSA.

V

VEGF
A substance made by cells that stimulates new blood vessel formation. Also called vascular endothelial growth factor.

Seagen AMGEN sanofi

Daiichi-Sankyo Lilly ONCOLOGY MERCK

Myriad genetics Eisai Genentech

Tigerlily Foundation
Beauty. Strength. Transformation.

Tigerlily Foundation
42020 Village Center Plaza; #120-156
Stone Ridge, VA 20105
Email: info@tigerlilyfoundation.org
Toll Free: 1-888-580-6253
Fax: 703-663-9844

@tigerlily_foundation

@tigerlilyfoundation.org

@tigerlilycares