

# What Now?

## A Practical Guide for New Breast Cancer Patients

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# Step 1: Choosing Your Breast Cancer Team

One of the first things most patients try to decide is who will treat them. This is a good place to start. Should you see a breast cancer surgeon first or an oncologist who specializes in breast cancer? We recommend both.

- A breast cancer specialist is a medical oncologist who specializes in all aspects of treating breast cancer. This includes collaborating with the surgeons as well as other physicians who are a part of each patient's care.
- A breast cancer surgeon specializes in removing breast cancer through various types of surgery. A surgeon who specializes in breast cancer is trained in the best ways to make the outcome as cosmetically pleasing as possible and works regularly with a plastic surgeon who can rebuild the breasts if desired.

These two key breast cancer treatment team members need to have a good relationship and consult with one another about the treatment plan. At Rocky Mountain Breast Specialists (RMBS), the breast surgeon and medical oncologist work closely together. Although they aren't always both at your initial consultation, they will talk with one another about the best treatments and the timing of them when developing your plan of care. They'll also review each newly diagnosed patient during Cancer Conferences. During these regularly scheduled meetings, the entire RMBS breast cancer team discusses newly diagnosed patients to be sure there is agreement on the best treatment plan.

You'll quickly realize that there are many people on your breast cancer team in addition to the medical oncologist and surgeon. At Rocky Mountain Breast Specialists, every one of the team members is dedicated to helping you through treatment physically, mentally, and emotionally.

## Other Physicians Who Are Part of the Breast Cancer Treatment Team

The following physicians work closely with the RMBS medical oncologist leading the breast cancer treatment process.

Radiation oncologist: These are doctors who specialize in treating cancer with radiation therapy. They will review the patient's needs to determine if and when radiation therapy is most appropriate. The radiation oncologist will also recommend the type of radiation therapy to be used. If external beam radiation is recommended, they will set up a "simulation" session using CT scans and a simulator to determine the correct angle of the radiation beams and the dosage.

Plastic surgeon: This surgeon helps reconstruct the breast after a mastectomy. Not everyone chooses to have reconstructive surgery. If you do, try to meet with the plastic surgeon before your breast cancer removal surgery to discuss types of reconstruction and the timing. The breast cancer surgeons at RMBS can recommend plastic surgeons who are experienced in breast reconstruction after cancer surgery.



# Who Else is on the Breast Cancer Team?

Here are other breast cancer treatment team members who often help patients. Because every treatment plan varies depending on the specifics of the diagnosis, your course of treatment will be uniquely yours.

Advanced practice providers (APP): Advanced practice providers are nurse practitioners or physician assistants who work side by side with the oncologists to provide care, education about treatments, and help with side effect management. On some visits, you might see the APP. Feel free to tell them everything you would tell the oncologist.

**Triage nurses:** These nurses work side-by-side with the medical oncologist to be sure your treatment plan is carried out. They play an important role in your communication with the practice and will make sure the physician is aware of any concerns or questions you have so they can be addressed. They also help you manage side effects, assist with placing prescription orders for use at home, and can point you in the right direction for assistance with other challenges you might encounter throughout treatment.

Infusion nurses: These nurses provide chemotherapy and other infusions as needed per the treatment plan created by the medical oncologist. They're with the patients in the cancer center's infusion room throughout their treatments and can help you with any treatment side effects you may experience.

Radiation technicians: These technicians help to get you in the proper position for each radiation therapy treatment and help address any radiation therapy side effects.

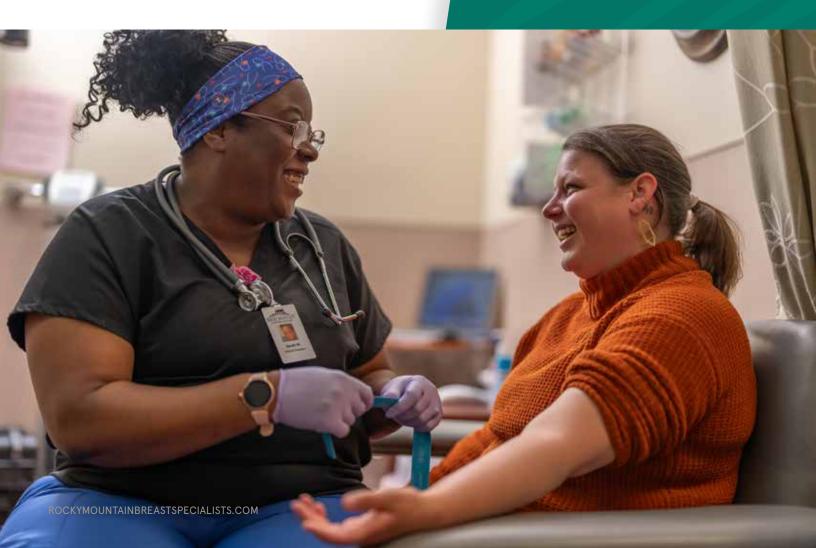
**Genetic counselor:** For some patients, genetic testing is performed to see if there is a hereditary gene related to the development of breast cancer. Your doctor may request this test to determine if any adjustments need to be made to the standard treatment plan. The test results can also provide important information for your family to better understand their risk factors for certain diseases.

**Schedulers/Assistants:** These staff members help set up schedule appointments and provide other clerical support.

**Social worker:** Oncology social workers are able to help patients with the day-to-day challenges they may face with their mental and emotional health during cancer treatment. They're able to provide resources that can assist in the ways you need it most.

Patient financial counselor: This person will review your insurance coverage so you have a good understanding of what is covered and what is expected for your portion of the treatment costs. They can help you set up payment plans and can often help find resources that are used to offset the cost of some cancer therapies.

Rocky Mountain Breast Specialists is considered a multidisciplinary clinic. Our patients experience better outcomes as a result of the entire care team working together on a regular basis to coordinate treatments and guide you through the entire cancer journey. Our patients
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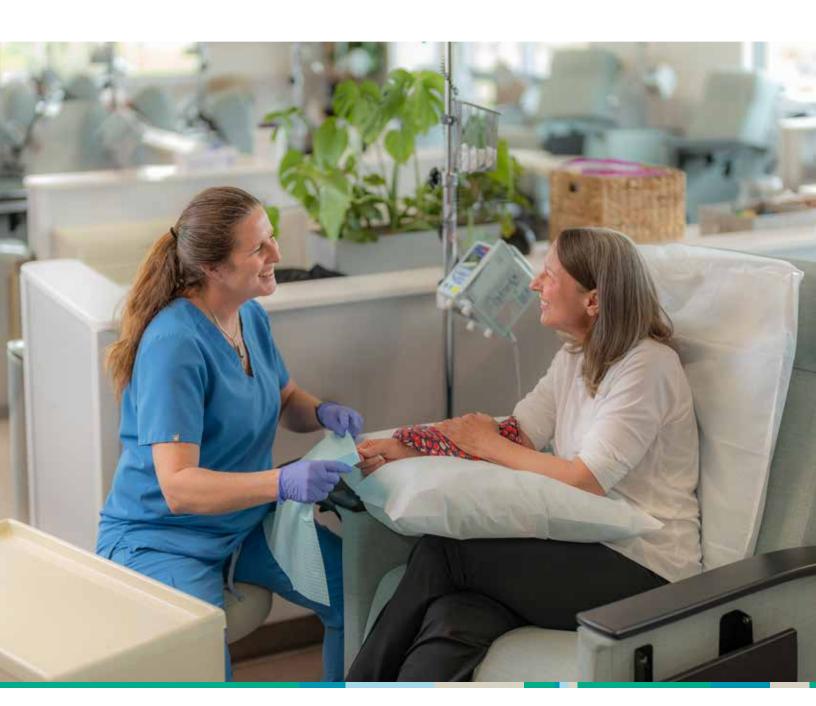


There is a lot of information provided in the breast biopsy that's done before you arrive at a cancer center. The results of the biopsy and the diagnostic mammograms and/or ultrasound images help determine the type of breast cancer and quite often the clinical stage. Based on this information, a treatment plan can be created. The medical oncologist and the surgeon will talk with you about these results and how they impact the recommended treatments.

- **Hormone receptor status:** Some breast cancers are fueled by estrogen or progesterone, which can be blocked using certain medications. Cutting off the supply of hormones slows the cancer's growth.
- **HER2 status:** If the results say the cancer is HER2 positive (HER2+ or HER2 amplified), the approach to treatment may include a targeted therapy that blocks the HER2 protein from fueling the cancer.
- **Grade:** The pathologist reviewing the biopsy will give the cells a grade. The higher the grade, the more abnormal the cells. Grade 1 looks similar to normal; Grade 3 is very abnormal. A higher grade cancer may indicate that it's more aggressive.
- **Ki-67 protein:** This protein measures the proliferative index. It can tell the oncologist how many cells were actively dividing in the biopsied mass. Rapidly dividing cells are an indication of the breast cancer's rate of growth.
- Size and location of the tumor: The images taken of the breast for diagnosis will give the team a better idea of the size and the location of the tumor in the breast(s).

Genetic mutations: The pathology report will not provide this information, but
a blood test can be completed to determine whether an inherited mutation of
several genes associated with breast cancer, including the BRCA1 or BRCA2 gene
is present. The surgeon will discuss different surgical options with a BRCA-positive
patient including prophylactic mastectomy (risk-reducing mastectomy) to help
prevent cancer from developing in the future.

If the breast cancer team feels the cancer might have spread further than the breast they will request further testing to see where it may be present. This could include a CT and bone scan or PET scan.





Before any type of surgery takes place, you and your breast surgeon should talk about your personal preferences.

- Is there a need for a mastectomy to remove the entire breast or will a lumpectomy be effective?
- · What about the lymph nodes? Will they need to be removed for testing? If so, how many would need to be taken out?
- · Can you have a breast reduction done at the same time as the breast surgery? This is something many women didn't realize was possible! The opposite breast can then be "matched" for symmetry often during the same surgery.
- If you opt for mastectomy, would you like to have your breast reconstructed? What is the best reconstruction technique for you?
- · If you opt for mastectomy without reconstruction, be sure to ask about "flat closures."
- · When should you meet with a plastic surgeon if necessary?

The breast surgeon will make a recommendation based on the characteristics of your cancer as well as your personal preferences for what will be effective in treating the cancer and give you the result you're hoping for.

Depending on how you want to proceed, your care team can be as aggressive or conservative as you want. Some patients opt for a lumpectomy (the removal of only cancerous tissue while leaving healthy tissue intact), and other patients may want a mastectomy (the removal of all breast tissue). Keep in mind that lumpectomies are almost always followed by radiation.

"Unless there is something that is very limiting [requiring a mastectomy] – patients have a lot of control as it regards to their surgical treatment options." - Dr. Tynan



## Other Surgeries Related to Breast Cancer

If your medical oncologist has chemotherapy, immunotherapy, or targeted therapy planned for your treatment, they are likely to recommend an IV port be surgically inserted just under the skin, usually near the collarbone. This protects your veins from repeated injections.



# Creating a Breast Cancer Treatment Plan

Breast cancer treatments are highly individualized based on your exact needs. Your oncologist develops a personalized treatment plan based on your cancer's stage, your personal preferences, and your overall health condition.

That's why you may notice that some people need more treatments while others have fewer treatments. Because of this, it's hard to use your friend or relative's experience as the benchmark for what's best for you. It may be tempting to compare yourself to other patients, but their journey is their own and will differ from yours.



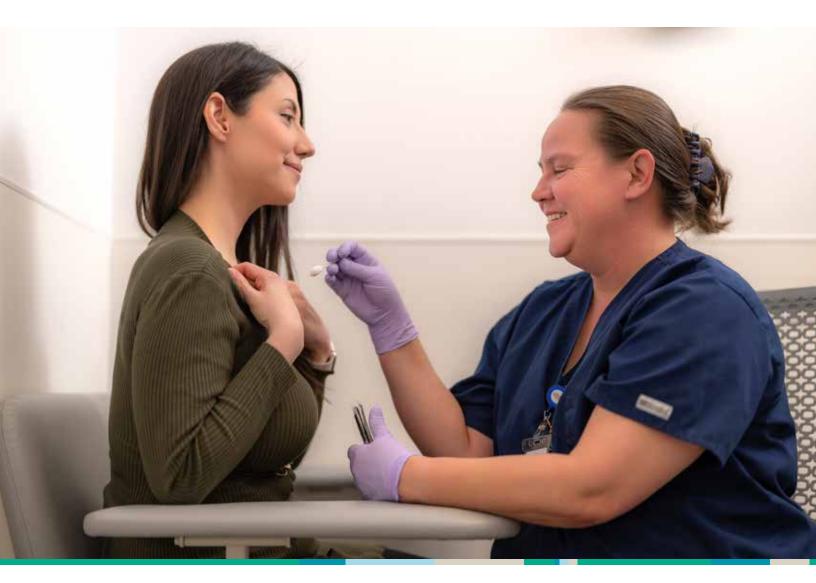
"Sometimes it seems like the plan is a bit nebulous at first, and that's good, because it's not cookie-cutter, and helps to finetune what you need. We try to avoid over and under treatment." - Dr. Tynan

# Is Surgery the First Step in the Treatment Process?

Because everyone is different, surgery is also not performed at the same point in the treatment process for every patient. Some patients need some treatment before surgery is performed. This is called neoadjuvant treatment.

Typically, the decision on whether neoadjuvant treatment is needed is based on your biomarkers (specific hormones and the growth rate of your cancer). The surgeon and medical oncologist will discuss and agree on this before it's recommended to you.

Treatments that are given before surgery can include chemotherapy, immunotherapy, or hormone therapy. The neoadjuvant treatments will be given for about 4-6 months to help shrink the breast cancer prior to surgery, reduce the risk of cancer recurrence, and improve surgical outcomes.



# Will You Need Treatment After Surgery?

Depending on the stage of cancer, there may be treatments given to help reduce the risk of breast cancer recurrence. These treatments can include:

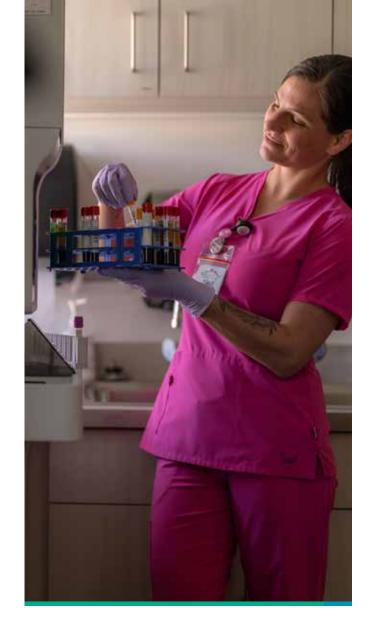
- Radiation Therapy
- Chemotherapy
- Targeted Therapy
- Hormone Therapy

Immunotherapy is used most often for patients with metastatic (distant) disease and those whose breast cancer does not express estrogen receptor, progesterone receptor, and HER2 is not amplified. This is called triple-negative breast cancer.

Your oncologist may recommend treatment after surgery has been completed. This is called adjuvant therapy. This could include radiation, chemotherapy, and medications that block estrogen production in your body.

If the oncologist feels a treatment plan isn't working as they'd expected, they will discuss options with you for other treatments. Clinical research trials are also an important option for some patients. Rocky Mountain Breast Specialists participate in these trials to help develop new treatment options for all patients.





## How Quickly Must You Decide on a Treatment Plan?

Your medical oncologist will determine if neoadjuvant treatment is needed before surgery. If so, it can be started within one to two weeks. However, in other cases where surgery is first, it may be a few weeks before your surgery is completed. Each cancer center will have its own timeline of events, so be sure to ask more questions about their exact timeline. Knowing this information can help you plan accordingly.



There are a few reasons why people want a second opinion. You may like the team you met with first but would like to hear another professional's opinion to see if they have a similar approach. That's a completely valid reason to seek a second opinion. It also gives you exposure to the way each practice operates to see what might work better for you.

Other times, patients aren't comfortable with the team they met with initially. It's really important that you feel comfortable talking to the staff at your cancer treatment center. They're going to give you a lot of information and you need to have a line of communication that is clear and easy. If you don't like your treatment team, you'll be less likely to ask questions, more likely to be frustrated, and all of these things greatly influence your mental and emotional health during treatment.

There is almost always time for you to seek a second opinion. And you shouldn't feel bad about getting a second opinion. Doctors understand that this is normal. The second opinion appointment is usually covered by insurance and it will give you the peace of mind that you've got a treatment plan you feel is best for you.



You're going to have a big to-do list of things to do before you go in for surgery or start cancer treatment. Here are some tips from our breast cancer specialists on what you can do to ease your mind and help your family through your treatment and recovery process.

#### **Prior to Treatment**

Talk with the financial counselor at the practice to be sure you understand how your medical insurance will cover your treatments. At RMBS, you will typically talk to the financial counselor after your initial consultation, but before treatments begin. This will give you a chance to develop a plan for payments if needed.

# **Prep for Your Time in the Cancer Center and Side Effects of Treatments**

- Start to moisturize more often with a lotion or cream such as Aveeno or CeraVe to help keep your skin softer. Cancer treatments can cause your skin to dry out, which can be incredibly uncomfortable.
- Purchase clothing that buttons or zips in the front and is comfy to help make chemotherapy days easier for the nurse to insert the needle into the port on your chest.
- Buy some fuzzy or fun socks so you can kick your feet up at home or at the cancer center during infusions.
- Do what you can to keep up with exercise and eating a healthy diet, especially before you go into surgery. Sometimes you might not feel like it, but try to get up and get moving at least once a day.

### If You're Likely to Lose Your Hair...

- Your oncologist can tell you if you're likely to lose your hair from the treatments. You can talk to the team about possibly using the Paxman Cooling System during chemotherapy to keep your scalp cool.
- It may be a good idea to get your hair cut shorter before treatment begins so that it's not as shocking when your hair starts to fall out.
- You can also use silk pillowcases to help keep your head cool while sleeping and reduce friction on the scalp.
- If you think you'd like to wear a wig, go before you lose your hair so the wig stylist can see how you wear your hair normally. They can help you choose a wig that would fit nicely and match your regular color and style.



# What Can You Do to Prepare for Surgery?

- After breast cancer surgery, your doctor suggests wearing a bra at all times to reduce movement that might cause pain.
   Sports bras that zip up the front work well for many women because they're easier to get on and off when needed, while your arm has limited movement.
- For reconstruction or mastectomy patients-T-Rex arms are real. This means you're asked not to reach far from your body for much of anything, or lift anything heavy. During this period after surgery, have everything you'll need within arms reach. This avoids reaching up high into cabinets or other overhead motions for a period of time.
- Have things to do at home. Consider stocking up on your favorite books – audio or in print– that you've wanted to read. Is there a TV series or two you'd like to binge-watch? How about a game on your phone? Give yourself permission to not do much after surgery, but you can keep your mind busy.

## On the day of your infusion

We also have a list of things you may want to consider before your first chemo treatment.





If you find yourself worried about how your family will function when you're recovering, know that you're not alone. The good news is that most families adjust and life will keep going. As the caregiver for many families, you're likely to consider how you can make things easier on them before your treatment begins. Here are a few tips and considerations that may bring you some peace of mind:

- Help your family understand what is likely to happen after treatments and surgery, so they know what to expect.
- Show them how to help you track your medication doses, and give them a list of your doctors' phone numbers in case you start to feel ill and need them to contact the office for help.
- Consider creating a schedule for who will help with certain activities (cleaning the home, walking the dog, etc.).
- Prepare meals ahead of time and freeze them so they are easily popped in the oven or microwave.
- Stock the fridge or freezer with favorite snacks as healthy as possible. You might be able to have all of these things delivered to you by a grocery delivery service. Consider that as an option if you don't have someone who can easily pick out all of your favorite grocery store items.
- Have a plan in place to help with pets. Some people have their pets temporarily placed with family members or friends. If you keep your pet at home, make sure that their nails are trimmed (no accidental scratching). It might be easy to get a self-feeder that you only have to tend to every few days.

- Have the uncomfortable conversation about what you'd like medical professionals to do if you need to be revived. If you have specific orders, it's best to put them in writing and tell your family. You may never need this, but it's a good idea just in case, especially before surgery. RMBS social workers can help you through this process.
- If you have younger children, it's important to reassure them and have a plan for how they're going to get to and from school and complete their homework. This is especially important if you're normally the person who helps with these things.

# Ways Your Friends and Family Can Help

It's common for your friends and family to extend the offer to help with phrases such as, "Let me know if there's anything I can do." While they certainly mean that, they usually don't know exactly how they can help. That's why it's important to consider what you may actually find helpful from friends and family who offer their time and company. Some ideas may include:

- Rides: Treatments are mentally and physically taxing, so having rides to and from appointments is a good idea.
- Meals: It may be a good idea to use a sign-up system so that friends and family know
  which days you need meals so you're not overwhelmed. You can also include any
  dietary restrictions or preferences.
- **Pets:** If you have pets in the home, consider having a family member or friend help with them, even if it's just coming over and playing with the pets so they get some attention.
- Cleaning or running errands: Consider having loved ones help clean up around your home or run necessary errands for you while you're unable to.
- Help with young children: Children will still need to attend school and get to their activities. Allow your support network to help with your young children while you recover.
- Company at home: Visiting with friends and family can be a good mental distraction. Just ask that anyone who visits self-checks for symptoms of COVID, the flu, or even a cold before arriving. Your immune system will be low during treatment so it's best to stay away from anyone who might be sick.
- Company during chemotherapy treatments: Treatments can take some time, so having a friend or family member with you during that time can be helpful. Make sure to check with the cancer center to ensure they allow someone to come into the infusion room with you.



# Taking Care of Your Mental and Emotional Health During Breast Cancer Treatment

Breast cancer comes with a significant amount of physical and emotional changes. You're going through a lot, and it's only natural that it'll be on your mind. It's important to focus on your mental and emotional health as much as possible because it's just as important as your physical well-being.

#### What Relaxes You?

Let's take a moment to consider what you can do to give yourself some mental relief. It's good to stop thinking about cancer for a while every day. Perhaps you can consider distractions such as visiting with family members or friends, doing puzzles, or even listening to soothing music or meditation sounds. Take a moment to take stock of what brings you a few moments of peace, and then lean into those activities as much as you can.

If you had a glass of wine or another alcoholic drink as part of your relaxation process before cancer, talk to your doctor about whether that's safe to use during cancer treatment.

### **Watch for Signs of Depression**

A breast cancer diagnosis can be a difficult thing to accept. It's important that you know the signs and symptoms of depression and how that may look for you. Common signs may include:

- Ongoing sadness
- Anxiety
- · Indifference
- Loss of interest in activities
- Sleep disturbances
- Fatigue feeling like you just can't get up and do anything or even get out of bed

- Loss of appetite
- Excessive hunger
- Lack of concentration
- Weight fluctuations
- Thoughts of suicide

Please note that signs of depression can be different for each person. Certain signs, such as fatigue or weight changes, may be side effects of treatment. While anxiety may also be a sign of depression, it may present itself more after treatment is complete due to concerns about recurrence.

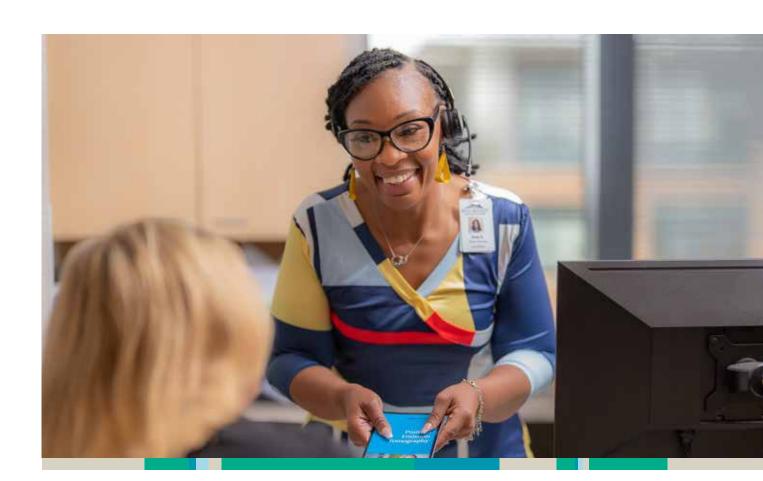
### **Resources to Help with Depression**

If you are experiencing signs of depression, know that there are members of your team who can help. Talk to your oncologist and/or nurse navigator. They may also have you talk with a social worker who is familiar with how to help patients through the mental challenges of cancer treatment.

They can be as involved as you'd like and can offer support for your mental and emotional health. Your team is there to support you, so be sure to utilize them as you need to.

### **Community Programs that Help Support Mental Health**

There are opportunities for cancer patients throughout Colorado (or wherever you may live) to participate in complementary therapies such as yoga, art class, music class, and other types of activities that are designed to keep cancer patients' minds, and in some cases, bodies engaged. Talk to your nurse navigator or social worker about what's available where you live.





The team at Rocky Mountain Breast Specialists, located throughout Colorado, understands the challenges you're facing. We are here to not only provide the expert medical treatments you need to overcome breast cancer, but we're also here to help you with the mental, emotional, and social challenges that come with a breast cancer diagnosis.

### Request an appointment at one of our locations near you.

**Aurora** | 303-418-7600 **Boulder** | 303-385-2000

**Centennial** | 303-805-7744

**Colorado Springs - Penrose Pavilion |** 719-577-2555

**Colorado Springs - St. Peregrine Pavilion |** 719-577-2555

**Denver - Midtown** | 303-388-4876

**Denver - Rose Medical Center** | 303-321-0302

**Englewood - Swedish Medical Center** | 303-740-8200

**Lakewood** | 303-430-2700 **Littleton** | 303-730-4700

**Lone Tree - Sky Ridge Medical Center** | 303-925-0700

Longmont | 303-684-1877 Louisville | 303-684-1877 Pueblo | 719-296-6000 Thornton | 303-386-7622



Visit us at <u>RockyMountainCancerCenters.com</u> for more information about breast cancer treatment and to request an appointment.