

What's next?

The diagnosis of breast cancer is almost always unexpected. The news may put you in a state of shock, leaving you at a loss for what to do next or where to turn. There is much to deal with, both emotional and practical. Each woman tackles the resulting issues in her own way and there is no *right* way. Your life will change for a while as you undergo treatment; at first, the changes will be unwanted intrusions in your life. Later, as you recover, the changes take on a more positive quality. Hold on to hope; women survive breast cancer at all stages, going on to lead full and productive lives.

Although breast cancer is very serious, speed in getting treatment is not critical in most cases. Your emotional well-being is the most important factor in deciding how to go about management. Some women choose to have treatment immediately, however, just as many women need to research the various available options and plan treatment and therapy into their lives. Whether you choose to move slowly on treatment or get it going rapidly, you will want to set up appointments and referrals to see the various doctors who will be involved in your care fairly quickly. They will give you the information necessary to make decisions about treatment.

There are many different types of breast cancer. Because of this, there are many different options for treatment. Your cancer is unique to you and will require a specific plan for treatment.

Practical Matters

First things first: Call your referring doctor. Elizabeth Wende Breast Care will also contact your referring physician. Your primary doctor will coordinate the next steps in your care.

We will send reports to the doctors that you listed on the day of your visit to the clinic. This report will include results from your visit and any imaging tests that we performed: the mammogram, ultrasound and physical exam. The results of core biopsies and fine needle biopsies are sent after we receive the pathology report. If you would like the reports sent to anyone else, call the EWBC and we will see that it is done.

In most cases, **Breast MRI** is the next step in your care. MRI is valuable to help determine the extent of the cancer and in evaluating the opposite breast for any indications of disease. This information will influence your treatment options. Breast MRI can be performed right at EWBC with a referral from your doctor.

A **lumpectomy** (removal of the tumor) is usually done next to determine cancer type, grade and aggressiveness. Evaluation of lymph node involvement (the glands in the underarm that act as a filter) may also be necessary and may be done at the same time as the lumpectomy or at a later date. Several hours before this surgery you may require a **needle localization** in the radiology department to point out the area in the breast for the surgeon. The EWBC or most hospitals can provide this service. Your surgeon will arrange this if it is necessary.

At this point, your surgeon will discuss treatment options with you based on the information he has received from the radiologist and pathologist. Most likely, you will be referred to both a medical oncologist and a radiation oncologist, who will work with you to plan and administer treatments.

When the doctor told you about your breast cancer, you were probably unable to concentrate on anything else that was discussed. After you leave our office, you and your family may still have questions about the tests we did and the results.

We would be happy to discuss any questions you have. In addition to the private office number that you can call between 8am and 5pm (585-442-8029), our doctor has given you his/her personal phone number. If the doctor is not available, he/she will return your call as soon as possible.

If you are having trouble contacting a doctor in our office, ask for Tess Wade, our office administrator.

Or, if you have any questions or concerns but you're not sure if you really need to speak with a doctor, ask for one of our patient advocates. They can answer most questions or will direct you to where you can be helped. You can call them directly:
Denise Sigel, (585)758-7026; or
Amy Rhoda, (585)758-7044.

COPING WITH THE DIAGNOSIS OF BREAST CANCER





Our clinic does not recommend a surgeon; most insurance companies want your primary care physician to do this. You may choose any surgeon you want. Your doctor will give you the names of one or more surgeons.



When you decide on a surgeon or an oncologist, please call us at (585) 758-7053 and give us your doctor's name. We will send or fax all reports.



In some cases, we have already given your mammogram films to you. Bring these films with you to the surgeon's office. If we did not give you the films, you may pick them up prior to your other doctor appointments. Please call at least 24 hours ahead of time and we will have your films ready for you. Mailing the films can take up to a week to reach you so we prefer not to mail them unless you live out of town.



Treatments you might need to consider -

The following treatments are commonly used in some combination for breast cancer:

Surgery – This is an operation to remove the tumor. Depending upon the extent of the cancer, more surgery may be required after initial tumor removal.

Lumpectomy - surgery to remove only the area of tissue that is affected by cancer

Mastectomy - surgery to remove all the breast tissue.

Chemotherapy – Treatment with strong medication to kill cancer cells.

Radiation therapy – Treatment with x-rays or radioactive materials to eliminate the tumor or residual cancer cells following surgery.

Autologous stem-cell replacement – Used with high-dose chemotherapy. This is a modern form of bone marrow transplant.

Hormone therapy – Treatment with hormones that suppress the cancer promoting hormones in your body.

Physicians you might encounter -

The following are the various doctors you may need to talk with in deciding your treatment. These doctors usually work as a team to devise a plan that will suit your specific needs.

Radiologist — A doctor who specializes in interpreting x-rays and other imaging exams to diagnose disease. Radiologists also use imaging modalities to localize and biopsy areas that are suspicious. The doctors at the EWBC are radiologists who specialize in breast disease diagnosis.

Pathologist — A doctor who uses a microscope to diagnose the cells of the tumor. You will not meet the pathologist, but this doctor will make the diagnosis of breast cancer and report on all its characteristics, which is important for treatment planning.

Surgeon — A doctor who performs surgical procedures, or operations. In most cases the surgeon makes the referral to the oncologists.

Surgical Oncologist — A surgeon who specializes in cancer surgery.

Medical Oncologist — A doctor who specializes in cancer treatment with chemotherapy.

Radiation Oncologist — A doctor who specializes in cancer treatment with x-rays and radioactive materials.

Plastic Surgeon — A surgeon who specializes in cosmetic surgery. If your breast needs to be removed (mastectomy) this doctor can craft a new "breast" if you wish.

Vascular Surgeon — A surgeon who specializes in blood vessel surgery. This doctor often assists the plastic surgeon.

Hematologist — A doctor who specializes in blood and bone marrow diseases and treatments. This doctor coordinates bone marrow treatments.

Common Questions



How did I get breast cancer? No one knows for sure. All research indicates that breast cancer appears to be caused by a number of factors — not just one causative incident. You did not cause your breast cancer. After treatment, you may decide to live a healthier lifestyle than before. Do this because it is a good way to live and will improve the quality of your life, not because it will prevent breast cancer.



I have a mammogram every year - how can this happen to me? Mammography cannot prevent breast cancer. However, in most cases it detects the cancer at an early stage where treatment can be 97% effective.



I just had my mammogram and the doctor said everything was fine. How could I have breast cancer now? Mammography is the best test we have to detect cancer — finding 85 to 90 percent of breast cancers - but some cancers are just not visible on the mammogram. While we are always researching new screening and diagnostic methods, mammography combined with a physical exam by your doctor, and regular monthly breast self-exam by you is still the best plan to detect breast cancer.



My cancer was not found by a mammogram. Does this mean chances of survival are reduced? Breast cancer occurs in many forms. While early detection offers the best chance of survival, many other tumor characteristics factor into survival. The most important thing for you to know is that more women are surviving breast cancer at all stages than ever before.

Support

Since each woman faces this disease in a different way, we offer some suggestions to a variety of contacts (both personal and educational) to help you find the support and strength you will need throughout your treatment. If you need assistance or direction in finding the right group for you, please contact our Patient Advocate, Denise Sigel, at (585)758-7026 and she will be happy to help.



The American Cancer Society:

Phone: 585-288-1950 or 1-800-ACS-4844

Web Site: www.cancer.org

(also provides links to other useful sites)

In addition to providing a great deal of information about all aspects of breast cancer from diagnosis to treatment, the ACS offers a program providing contact with breast cancer survivors. The Reach to Recovery Program will put you in touch with a breast cancer survivor. Please contact Denise Sigel at our office to help arrange this service.

Breast Cancer Coalition of Rochester

Phone: 585-473-8177

Web site: www.bccr.org

BCCR offers a variety of education and support services including crisis counseling and programs for women who are newly diagnosed with breast cancer.

Gilda's Club:

Phone: 585-423-9700

Web site: www.gildasclubrochester.org

Gilda's Club of Rochester is an organization that provides information, guidance and support to people with cancer and their families. They do this through a number of programs, including support groups, counseling and visitation.

National Cancer Institute

www.nci.nih.gov — information from the National Cancer Institute about breast cancer, current treatment and clinical trials.

