

Changes and choices YOU can make — little by little, bit by bit, day by day, to create a healthier environment, bolster your immune system and reduce the risk of breast cancer.

Healthy Lifestyles

2025 Calendar

by Breast Cancer Options

A not-for-profit organization dedicated to supplying information, support and advocacy.





844-BREAST-6



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The Precautionary Principle: Can We Save the Planet

The precautionary principle is organized around the notion that it is better to be safe than sorry.

Can Earth survive climate change? Yes, we can still take action to mitigate its worst impacts and "save the planet" by drastically reducing greenhouse gas emissions, transitioning to renewable energy sources, and implementing sustainable practices across all sectors of society; the key is to act quickly and to limit global warming to manageable levels. No matter how high humans cause the mercury to rise and how much damage we do to the planet, Earth and life will survive. It just might no longer be in the form we prefer or the form that allows us to thrive.

Climate Change & Toxic Chemicals Can Increase Your Breast Cancer Risk – Climate change is increasing cancer risk by increased exposure to carcinogens after extreme weather events like hurricanes and wildfires. It also impacts cancer survival. Extreme weather events can impede patients' access to cancer care and the ability of cancer treatment facilities to deliver care. Warmer temperatures increase exposures to toxic chemicals and affect how chemicals behave. They allow certain chemicals to vaporize into toxic byproducts and enter the air we breathe. Hotter temps make it harder for our bodies to break down and get rid of toxic chemicals. Hotter temps make more volatile, toxic chemical pollution in the air we breathe. Chemicals like pesticides become more harmful to our bodies with warmer temperatures. Severe weather events pollute the water we drink and the air we breathe.

Toxic chemicals can inhibit the body's ability to stay healthy – Many toxic chemicals are endocrine disruptors. They alter metabolism and hinder our ability to adapt to changing temperatures. These effects occur particularly in communities without access to heating or air conditioning. Most of us are exposed to a cocktail of environmental toxins on a daily basis at relatively low levels of exposure. Hotter temperatures make it harder for our bodies to break down, cleanse and get rid of toxic chemicals.

You Can Help Stop Global Warming! Save carbon dioxide by doing some simple things:

- 1. Change a light. Replace one regular light bulb with an LED bulb. Save 150 lbs of carbon dioxide a year.
- 2. Drive less. Walk, bike, carpool or take mass transit. Save 1 pound of carbon dioxide for every mile you don't drive!
- **3. Check your tires.** Keep your tires properly inflated to improve gas mileage by more than 3%. Every gallon of gas saved keeps 20 lbs of carbon dioxide out of the atmosphere.
- **4. Recycle more. S**ave 2,400 lbs of carbon dioxide per year by recycling half of your household waste. Even better, reduce waste by bringing your own reusable container.
- 5. Use less hot water. Take shorter, cooler showers. Washing clothes in cold water is just as effective and saves 500 lbs of carbon dioxide per year.
- **6. Avoid products with a lot of packaging.** Reduce your garbage by 10%. Save 1,200 lbs of carbon dioxide.
- 7. Adjust your thermostat. Move it down 2 degrees in winter and up 2 degrees in summer. Save 2,000 pounds of carbon dioxide a year.
- **8. Plant a tree.** A single tree will absorb one ton of carbon dioxide over its lifetime.
- 9. Turn off electronic devices. Turn off your TV, DVD player & computer when you're not using them. It saves thousands of pounds of CO2 a year.

Adopt a better-safe-than-sorry approach in order to reduce contact with known and suspected carcinogens. They are present in everything from fire-resistant couches to endocrine disruptors in shampoo and personal care products. Protect yourself – control what you can; limit exposures where you can.

Remember: There are 85,000 chemicals in use today and only 7% of them have been tested for safety. Precaution is overdue. These chemicals are used in everything from preservatives in our personal care products to flame retardants in household furnishings – from plasticizers in our water bottles to pesticides on our fruit and vegetables – in household cleaning products and electro-magnetic radiation from cell phones and computers.

Only about 5-10% of breast cancers are due to hereditary factors. Reasons for the other causes are unclear but are likely due to preventable factors. Safety tests are needed in laboratories, not in our bodies.

Become an informed consumer: Look around your environment and identify your exposures - Read product labels & don't purchase a harmful product - Learn about the LEAST HARMFUL alternatives to the environment and human health - Be vigilant with products for children including toys, food and clothing - Eat a healthy diet. Learn how to deal with stress AND Integrate exercise into your life to lower your risk of harm - advocate for what you believe.

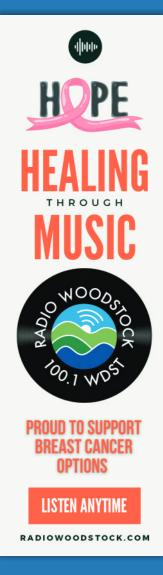
We need to do everything we can NOW to reduce the chance that our daughters and their daughters will ever get breast cancer!

845-339-HOPE www.BreastCancerOptions.org hope@BreastCancerOptions.org



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How to Research Information & Make Informed Decisions Evaluating cancer information

FIRST GET YOUR DIAGNOSIS ... THEN GET A SECOND OPINION

You want a second opinion for your diagnosis if:

- the cancer grows or spreads
- you are not getting relief for side effects
- treatment stops working and a new treatment is suggested
- for reassurance

- you want to find better access to clinical trials for breast cancer
- you want to see a specialist with knowledge of new approaches
- you are unsatisfied with the treatment or answers you are getting from your doctors

When you go for a second opinion, take a list of questions to help you get the information you need. A second opinion can ensure that you have explored your options and are getting individualized care.

The Value of a Second Opinion: For Patients Referred to a National Cancer Institute Designated Cancer Center with a Multidisciplinary Breast Tumor Board. Getting a second opinion for diagnosis, treatments and pathology will help you choose a course of care. New developments in treatments are happening so fast that it's impossible for doctors to be aware of all the most up-to-date ways to deal with the disease. See a specialist who has lots of experience in treating your type of breast cancer. Studies show that after patients had another complete workup, new cancers were identified in 22.8% patients; 20% of the patients had a change in pathology interpretation; 42.8% of patients had a change in diagnosis.

SURGERY DECISIONS IF YOU NEED MORETHAN A LUMPECTOMY

Many doctors assume that the step after a mastectomy will be breast reconstruction with either a breast implant or tissue from another place on the body. (called flap or autologous reconstruction) The decision to go through the reconstructive process after a breast cancer diagnosis — or not — is incredibly personal and is a completely valid choice. Patients with breast cancer or those who have a preventative mastectomy can choose to forgo reconstructive surgery. If your doctor doesn't present going flat as an option, be your own advocate and start the discussion yourself. It is important to find a surgeon who listens to and respects your choice. Physical recovery from a mastectomy with no breast reconstruction (going flat) is usually easier than physical recovery from a mastectomy with reconstruction. Women who have breast reconstruction with either tissue flaps or implants usually need 2 procedures to achieve the desired results — or even more to make the breasts symmetrical. Going flat usually requires one procedure, although sometimes more than one procedure is needed to achieve an aesthetic flat closure.

HELPFUL WEBSITES

- CLINICAL TRIALS: www.ClinicalTrials.gov Database of privately and publicly funded clinical studies conducted around the world. Provided by the U.S. National Library of Medicine. Listing a study does not mean it has been evaluated by the U.S. Federal Government.
- COCHRANE Review Organization: www.cochrane.org Systematic reviews of therapies. Searches of multiple databases. Up-to-date research.
- PUBMED OVERVIEW: PubMed: www.Pubmed.gov A biomedical database of abstracts. Peer-reviewed biomedical literature;
- PubMed Central: www.ncbi.nlm.nih.gov Full-text articles from reviewed journals.
- MEDLINE: www.nlm.nih.gov/bsd/medline.html Citations from journals selected for MEDLINE;
- NATIONAL CENTER FOR COPMLEMENTARY & INTEGRATIVE HEALTH: www.nccih.nih.gov. Conduct and support research. Credible information about complementary health products and practices.
- UNDERSTANDING EVIDENCE-BASED HEALTHCARE: A Foundation for Action: Register on the website.

https://courseplus.jhu.edu/core/index.cfm/go/course.home/cid/1739. Created by the US Cochrane Center as part of a project undertaken by Consumers United for Evidence-based Healthcare. Developed by Kay Dickersin & Musa Mayer to help consumer advocates understand the fundamentals of evidence-based healthcare concepts and skills.

The most common risk factors for breast cancer are being a woman and getting older.

Every two minutes, one case of breast cancer is diagnosed in a woman in the U.S.

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Breast Cancer Risk Factors - What You Can and Cannot Change

Some of the factors associated with breast cancer — being a woman, your age, and your genetics, for example — can't be changed. Other factors — being overweight, lack of exercise, smoking cigarettes, and eating unhealthy food — can be changed by making different choices. Choose the healthiest lifestyle options possible and you can lower your risk.

RISKS YOU CAN'T CHANGE

- Being a Woman is the biggest risk factor for developing breast cancer. Data states that there are 310,720 new cases of invasive breast cancer diagnosed annually and 56,500 new cases of non-invasive breast cancer (Ductal Carcinoma In Situ) diagnosed each year.
- Age: The risk of breast cancer goes up as you get older. About 2 out of 3 invasive breast cancers are found in women 55 or older.
- Radiation to Chest or Face Before Age 30: If you had radiation to the chest to treat another cancer (not breast cancer), like non-Hodgkin's lymphoma, you have a higher-than-average risk of breast cancer.
- Family History: Women with close relatives who've been diagnosed with breast cancer have a higher risk of developing the disease. One first-degree female relative (sister, mother, daughter) diagnosed with breast cancer doubles your risk.
- Genetics: About 5% to 10% of breast cancers are thought to be hereditary, caused by abnormal genes passed from parent to child.

RISKS YOU CAN CHANGE

- Exposure to Chemicals in Cosmetics: Many chemicals in cosmetics are hormone disruptors and can affect how estrogen and other hormones act in the body, blocking them, mimicking them and throwing off the body's hormonal balance. Estrogen can make hormone-receptor-positive breast cancer develop and grow, so limit your exposure to these chemicals.
- **Exposure to Chemicals in Plastic:** We are exposed to these plastic products every day. Food and beverage containers, some disposable plates, and toiletry bottles are all made from chemicals. Plastics may leach chemicals if they're scratched or heated. Research also suggests that some of the chemicals in these products, such as bisphenol A (BPA), may cause cancer in people.
- Exposure to Chemicals in Water: The water you drink from your home faucet or bottled water from a store may not always be as safe as it could be. Install a filter on the taps in your house or store drinking water in a pitcher with a filter.
- Pregnancy History: Having a first pregnancy after age 30, not breastfeeding, and never having a full-term pregnancy can increase your risk.
- **Light Exposure at Night:** Studies suggest that women who work at night factory workers, doctors, nurses, and police officers— have a higher risk of breast cancer compared to women who work during the day. Other research shows that women who live in areas with high levels of external light at night (i.e. street lights) have a higher risk of breast cancer. Light at night lowers melatonin which modulates immune function.
- **Using HRT (Hormone Replacement Therapy)** Current or recent past users of hormonal replacement therapy (HRT) have a higher risk of being diagnosed with breast cancer

SUGGESTIONS

- Maintain a healthy weight
- Be physically active
- Don't Smoke
- Eat Your Fruits & Vegetables.
- Avoid chemicals in personal care products
- Limit alcohol the more you drink, the greater your risk of developing breast cancer
- Breastfeed, If Possible
- Avoid Birth Control Pills, Particularly After Age 35 or If You Smoke
- Avoid or limit Post-Menopausal Hormones
- •Turn out the lights at night, pull down the shades and sleep in darkness



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Food as Medicine

Lifestyle and diet can change and influence the way your genes express themselves. Nutrigenomics studies how diet and genes interact to affect a person's health. Different foods may interact with specific genes to increase or decrease the risk of common diseases such as type 2 diabetes, obesity, heart disease, stroke and certain cancers by modifying gene expression. To keep gene expression healthy, it is important to control metabolic syndrome, inflammation, hormonal imbalance, and methylation. Compounds that inhibit cancer cell proliferation include: turmeric and curcumin, EGCG, bee propolis, genistein, resveratrol, selenium, and vitamin E. Compounds that act indirectly to inhibit cancer progression include: vitamin C, anthocyanidins, proanthocyanidins. Food compounds that stimulate the immune system include: maitake or shitake mushrooms, ginseng.



Eat regularly throughout the day, choosing foods from the main food groups: Fruits, vegetables, protein, whole grains and healthy fats. A healthy diet consists of natural, whole foods, including lots of vegetables, fruits, clean protein, whole grains, healthy fats as well as plenty of fluids. Foods that contain compounds that can inhibit negative epigenetic effects and can help reverse or help prevent cancers include cruciferous vegetables, I (cauliflower, broccoli, brussel sprouts, bok choy, cabbage), as well as green tea, fava beans, grapes and turmeric.

Why you should eat organic: Many pesticides and herbicides sprayed on fruits, vegetables and grains are "estrogen mimics" (xenoestrogenic) and can stimulate the growth of breast tumors causing hormonal imbalances in both women and men. Organic food is grown without chemicals, hormones or antibiotics. Organic foods are higher in important nutrients. Organic eggs, dairy products and meats are free of the estrogen-like hormones and antibiotics that are fed to animals and stored in their fat. Avoid genetically modified foods as the long-term risks are unknown.

Foods to Quench Inflammation

- Wild, cold-water fish (Omega-3) & seaweeds
- Grass-fed (pastured) meat, free range dairy, eggs
- Berries (blueberries, cherries, raspberries)
- Spices: curry, ginger, garlic, parsley, paprika, hot peppers
- Leafy green & cruciferous vegetables
- ·Olive oil, fish oil
- Green tea (Organic)
- · Apples, pomegranate, kiwi

DIET CAN MODULATE ESTROGEN SYNTHESIS, RECEPTOR ACTIVITY, DETOXIFICATION AND METABOLISM OF ESTROGENS. Nutritional Approaches to Improving Hormone Balance

- Increase natural estrogen phytoestrogens consumption (flaxseed, 1-2 cups of cruciferous vegetables daily)
- Eat organic foods to minimize intake of xenoestrogens, hormones & antibiotics
- Use filtered water (reverse osmosis) to eliminate xenoestrogens
- Use garlic for sulfur and to help with detoxification
- Consume a high-fiber diet (25-50 g a day, including legumes, whole grains, nuts and seeds, vegetables, fruit) Fiber helps modulate blood sugar, boosts immune function, supports weight management.
- Increase intake of omega-3 fatty acids (small, non-predatory cold-water fish: wild salmon, sardines, herring) and flax seeds
- Balance glucose metabolism through a low glycemic load, high phytonutrient index

Foods That Cause Hormonal Imbalance

- Saturated and transfatty acids
- Refined sugars and carbohydrates
- Dairy products
- Processed foods and artificial sweeteners
- Xenobiotics, antibiotics, and hormones (in commercially raised livestock (meat & dairy)

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Reading Fruit or Vegetable Food Labels

Here are the basics:

- 1. Conventionally grown with the use of pesticides. There are only four numbers in the PLU. The last four letters of the PLU code tell what kind of vegetable or fruit.

 le..bananas are labeled with the code 4011
- 2. Genetically Modified fruit or vegetables. There are five numbers in the PLU code, and the number starts with "8". Genetically modified fruits and vegetables trump being organic. So, it is possible to eat organic produce that are grown from genetically modified seeds. A GMO banana would be: 84011
- 3. Organically Grown: There are five numbers in the PLU code, and the number starts with "9". Grown organically and is not genetically modified. An organic banana would be: 94011

Beginning in October foods will be labeled as belonging to one of four categories:

one of four categories:

100% Organic: Made with 100% organic

USDA

ingredients

Organic: Made with at least 95% organic ingredients

Made With Organic Ingredients: Made with a minimum of 70% organic ingredients. Strict restrictions on the remaining 30% including no GMOs (genetically modified organisms)

Products with less than 70% organic ingredients may list organically produced ingredients on the side panel of the package. May not make any organic claims on the front of the package.

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Comprehensive Breast Care Program

Risk Assessment, Diagnosis and Treatment

Located inside the Outpatient Services Building on Garnet Health Medical Center's main campus, the Ray W. Moody, MD Breast Center is dedicated to helping individuals attain optimal breast health, diagnose and treat breast cancer and identify those who are at high-risk for developing breast cancer.

Our nationally accredited program offers:

- 3D Mammography 40% more effective in detecting breast cancer
- · Breast Cancer Patient Navigator
- Breast Cancer Risk Assessment Program
- Breast Ultrasound
- Breast MRI and Breast MRI Biopsy
- Stereotactic Vacuum-assisted Breast Biopsy
- Ultrasound-guided, Vacuum-assisted Core Biopsy
- Ductograms

To schedule an appointment, call (845) 333-7040 or visit garnethealth.org/breastcenter

Interactions of Medications, Supplements & Food

Many cancer experts advise people to avoid dietary supplements while undergoing cancer treatment.

Please discuss your diet and supplements with your doctor or cancer care team.

QUESTIONS YOU NEED TO ASK YOUR DOCTORS ABOUT SUPPLEMENTS, MEDICATIONS, FOOD AND DRINK

Does my chemotherapy and radiation interact with any of my other medications?

Does my chemotherapy and radiation interact with any foods or beverages, such as grapefruit, grapefruit juice, milk or soda? What herbal supplements, vitamins or over-the-counter medications can I take safely? Which should I avoid during treatments?

MEDICATIONS, FOOD & SUPPLEMENTS: What can interact with breast cancer treatments and cause adverse reactions.

Supplements: Some supplements can interfere with the effectiveness of chemotherapy, radiation, and prescription medications. For example, patients taking Tamoxifen should avoid Red Clover, St John's Wort, and Black Cohosh. Patients with estrogen receptor-positive breast cancer should use caution with Panax Ginseng, Soy Isoflavones, Dong Quai, Gingko Biloba and Licorice. Patients undergoing radiation therapy should use caution with Rhodiola and Vitamin A.

Antioxidants: Patients undergoing chemotherapy or radiation should avoid antioxidants, ie. vitamins A, C, and E, carotenoids and Coenzyme Q10. Studies have shown that taking antioxidants during treatment can increase the risk of breast cancer returning.

Foods: Grapefruit and Seville oranges can affect the cytochrome P450 (CYP) enzymes that metabolize many cancer drugs. Your doctor or pharmacist can advise you on which foods or drinks to avoid.

Soy: Women with a history of hormone-sensitive cancers should be cautious about taking soy supplements due to the potential for isoflavones to stimulate cancer cell growth in certain situations. Isoflavones are similar to the hormone estrogen which can stimulate the growth of some cancers.

ANTIDEPRESSANT INTERACTIONS: Antidepressants can cause a number of troubling interactions for chemotherapy patients. 1 in 8 Americans take an antidepressant, which is also the same percentage of women in the US who will develop invasive breast cancer over the course of her lifetime. Studies have shown that women on Tamoxifen® who also take certain antidepressants have a much higher risk of death—91%, according to one study—than Tamoxifen patients not taking high-risk antidepressants. Women stay on Tamoxifen 5-10 years. It's possible that another doctor might unknowingly prescribe an antidepressant.

FOOD AND DRINK TO AVOID DURING CANCER TREATMENT: CYP enzymes: Enzymes called cytochrome P (CYP) are an important part of the process of how drugs are broken down in the body after they've been absorbed into the blood. Certain ones affect how cancer drugs are broken down in the body. Foods that affect CYP enzymes: Grapefruit and Seville oranges. This includes juice and products made from these, i.e. marmalade. Grapefruit has the potential to interact with many medications, from chemotherapy to heart medicines. *At least ten chemotherapy drugs can interact with grapefruit.* So, avoid it until chemotherapy is completed. Don't drink grapefruit juice if you're taking: Chemotherapy, Statins, antihistamines, blood pressure drugs, Valium, HIV drugs.

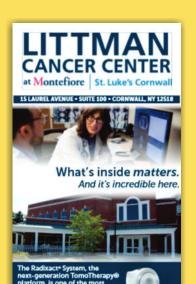
INTERACTION CHECKER WEBSITES

- Drugs.com Check Drug-drug interactions and Drug-food/beverage interactions. www.drugs.com/drug_interactions.html
- WebMD Enter two or more drugs, OTC's, or herbal supplements to check for interactions. www.webmd.com/interaction-checker
- Memorial Sloan Kettering Cancer Center. Detailed information for over 200 herbs, including many uncommon supplements used by cancer patients. Click on "Potential Interactions" listed on each herb. www.mskcc.org/cancer-care/diagnosis-treatment/symptom-management/integrative-medicine/herbs/search

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THE LITTMAN CANCER **CENTER OFFERS:**

- MEDICAL ONCOLOGY
- SURGICAL SERVICES
- RADIATION ONCOLOGY
- INFUSION SUITE
- PALLIATIVE CARE
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Breast Cancer Facts

SOME FACTS:

We don't know YET how to prevent breast cancer.

1 in 8 women in the United States will be diagnosed with breast cancer in her lifetime. In 2024, an estimated 310,720 women and 2,800 men will be diagnosed with invasive breast cancer.

Today, breast cancer is the most prevalent type of cancer in women and the leading cause of cancer deaths among women aged 40 to 55. About 9% of all new breast cancer cases in the U.S. are diagnosed in women younger than 45 years old.

In 2024, an estimated 42,250 women will die from breast cancer in the U.S.1 In the 1960s a woman's lifetime risk for breast cancer was 1 in 20. Today it is 1 in 8.

Only 5% to 10% of breast cancers occur in women with a genetic predisposition: Other known risk factors include age, obesity and low physical activity.

When breast cancer shows up on a mammogram, it may have been in your body for 6-10 years. The research in the fight against breast cancer focuses on treatment and cure. The National Cancer Institute spends \$600 million on breast cancer research. Only 5% of the money is allocated for cancer prevention and only 3% is allocated for investigations of environmental causes.

A study of newborns done by the Environmental Working Group detected 230 chemicals in umbilical cord blood: The industrial pollutants in the cord blood were lead, mercury and polychlorinated biphenyls (PCBs)

Exposure to harmful environmental toxins during certain periods of rapid breast development is more harmful than the same exposure once the breast tissue is fully developed. These "windows of susceptibility or vulnerability" include in utero, puberty, pregnancy and menopause.



WHAT YOU CAN DOTO PROTECT YOURSELF

- Become an informed consumer. Read product labels and don't purchase a product that can harm you or your family;
- · Select alternatives least harmful to the environment and human health; be particularly vigilant with products for children including toys, food and clothing;
- · Lower your risk of harm by making responsible health choices: Eat a healthy diet; Learn how to deal with stress; Integrate exercise into your life; Identify and lower your exposure to environmental risk factors; Advocate for what you believe.

Thank You to Our Supporters

Adams Fairacre Farms

Hannaford Supermarkets

Bank of Greene County

United Breast Cancer Foundation

Radio Woodstock Cares

Miles of Hope Breast Cancer Foundation

Ulster County Recovery & Resilience

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Be your own hero **Putting yourself** first matters **Book your** mammogram Nuvance You Matter Most

How Lifestyle Choices Impact Breast Cancer Risk

The causes of breast cancer are complex, but certain factors – lifestyle, hormonal and genetic – are known to play key roles in breast cancer development. When it comes to prevention, the risks you can't control – age and genetic makeup – cannot be changed. You may have many risk factors and never develop breast cancer. But once you have had a cancer diagnosis you are at increased risk for developing another cancer. Obesity, alcohol use, lack of exercise and smoking significantly increase the risk for second invasive breast cancers. Changes in your lifestyle may help you reduce your breast cancer risk.

INTERMITTENT FASTING: Improves Breast Cancer Prognosis – Studies have shown that the duration of nightly fasting predicted recurrence and mortality among women with early-stage breast cancer. There is a benefit from prolonging the period of time in which women abstain from food at night – the fasting period between dinner and breakfast. Women who fasted fewer than 13 hours per night had a 36% higher risk of breast cancer recurrence. Latenight eating also disrupts circadian rhythms. Eat an early dinner and a late breakfast. Evidence shows that short term fasting can decrease toxicity and increase efficacy of a wide variety of chemotherapeutic agents as well as enhance the effects of radiotherapy. May also reduce side effects and DNA damage in healthy cells in response to chemotherapy.

ALCOHOL INTAKE - Alcohol is estimated to account for **6% of cancer cases** in the U.S. – more than 75,000 per year – and **nearly 19,000 cancer deaths** according to the American Cancer Society. Alcohol is the 3rd biggest controllable risk factor for the disease, after tobacco smoking and excess weight. Alcohol interferes with estrogen pathways, influencing hormone levels, effects the estrogen receptors and disrupts absorption of folic acid, a B vitamin needed for DNA repair. Women who drank 1 to 2 drinks a day were 32% more likely to develop ER+/PR+ breast cancer compared to teetotalers. Having 3 or more drinks daily raised the risk of by 51%. Alcohol intake is linked to increased breast densities. The type of alcohol consumed – wine, beer or mixed drinks – makes no difference. **SUGGESTIONS:** Cut down on alcohol, or avoid it altogether. Take at least 400 micrograms of folic acid if you must drink.

SMOKING: There is interaction between breast cancer risk, smoking, and genes that break down tobacco smoke carcinogens. Smoking damages the milk ducts and damages DNA. Premenopausal women exposed to passive smoking increased the risk of breast cancer by 68%. Active smoking increased the risk of breast cancer by 46%. There is a 30-40% increased risk among – Women who are current or long-term smokers – Women who started smoking at a young age – Women who started smoking before the birth of their first child. Smoking is also associated with increased risk of breast cancer before age 50 in BRCA1 and BRCA2 mutation carriers. **IT'S NEVER TOO LATE TO QUIT!** Breast cancer risk decreases once a woman quits smoking. Within 10 years the risk of breast cancer is back to the level of a woman who has never smoked.

PHYSICAL ACTIVITY: Women who increased their physical activity after a breast cancer diagnosis lowered their risk of death by 45%. Women who cut back on physical activity after diagnosis had a fourfold increase in mortality. Exercise has many benefits. It can chase the blues, help fight stress and raise energy levels. It stimulates lymphatic circulation to help clear toxins and helps reduce the amount of estrogen in your body. That may help normalize body weight and reduce breast density. SUGGESTIONS: Brisk walking, Swimming, Yoga 3-5 days a week at moderate intensity for 20-60 minutes. Lack of physical activity is a modifiable risk factor for breast cancer recurrence and mortality.

BREAST DENSITY: Breast density is a major risk factor for breast cancer. Density makes it difficult for radiologists to see trouble spots on mammograms. Women with dense tissue in 75% or more of the breast have a 4 to 6 times higher risk for breast cancer than women without dense tissue. Increased density is a risk factor equal to age and *BRCA1 - BRCA2* mutations in increasing risk. **CAN BREAST DENSITY BE REDUCED? YES!** Vitamin D and calcium help decrease breast densities. Studies show that high fiber-low-fat diets (organic, high in vegetables and fruit) can alter density through their effect on sex hormones and circulating estrogens. Increasing physical activity among obese postmenopausal breast cancer survivors may help to reduce breast density.

HIGH STRESS LEVELS: Studies show that stress may contribute to an increase in cancer by modifying cell responses to environmental factors. Stress affects the immune system lowering Natural Killers Cells and T-lymphocytes – white blood cells that are key to immune response. Studies show that feelings of happiness and optimism can play a protective role against the disease and influence the interaction between the central nervous, endocrine, and immune systems. **SUGGESTIONS:** Let go of what you can't control; Get the help you need; Do what you love. **STRESS MANAGEMENT TECHNIQUES:** Yoga, Meditation, Guided Imagery, Exercise. We may not have control over cancer recurrence, but we can have control over the worry.

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Breast cancer staging							
Stage	Tumor size	Axillary lymph nodes					
In situ							
0	Tiny clusters of cells in a breast duct (in situ); no invasive cancer seen	No spread					
Invasive							
1	Up to 2 cm	No spread					
П	Smaller than 2 cm	Has spread					
	Between 2 and 5 cm	May or may not have spread					
	Larger than 5 cm	No spread					
III	Any size	Has spread					
Metatasi	tic						
IV	Any size that has spread to other organs in the body						

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ULTRAWELLNESS CENTER

At The UltraWellness Center, we are committed to helping you reach optimal health and vitality by identifying the unique underlying causes of disease and treating them. Our team of physicians, nurses, and nutritionists work with each patient to move toward their best health.

We work with cancer patients to help create an environment in their body where cancer is less likely to grow. For those who are in treatment we work with the oncologist team and focus on nutrition and lifestyle modification to strengthen the immune system, enhance detoxification and support the patient through their treatment. Post treatment, we work to decrease the risk of recurrence.

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Integrative Therapies that Can Help with Treatment Side Effects

Side effects are very individual and may not be the same for two people with similar diagnoses that are receiving the same treatment. They may vary for the same person from one treatment session to the next. Some side effects may show up immediately and go away when treatment ends and some continue when treatment ends. Some may show up long after treatment has stopped. People use a variety of therapies to reduce treatment side effects, improve their physical and emotional well-being and help with their cancer recovery. Therapies can include: Massage, Supplements, Mind-Body Practices, Acupuncture, Massage, IV infusions, Ozone therapy, Hyperbaric Oxygen therapy, Exercise.

There are only limited studies for many of these therapies.

MASSAGE THERAPY: Evidence shows that massage can significantly reduce anxiety and depression, nausea from chemotherapy, pain and fatigue. The goal of **massage** is to relieve muscle tension and stress and promote relaxation. It improves sleep after treatments; improves Immune function by increasing natural killer cells which are crucial to the immune system; relieves pain associated with treatments and surgery; improves mood; allows relaxation; can help relieve lymphedema. Massage is well established as a stress-relieving therapy.

ACUPUNCTURE AND ACUPRESSURE: Studies show that acupuncture is effective for cancer related fatigue management, joint pain caused by aromatase inhibitors and helps to manage insomnia caused by cancer or cancer treatments. (radiation, chemotherapy, endocrine therapy). Both acupressure and acupuncture reduce chemotherapy-induced nausea and vomiting. Women with peripheral neuropathy had improvements in symptoms from an 8-week treatment regimen. It is a helpful integrative therapy for breast cancer patients but more trials of adequate sample size, appropriate control group, and longer follow-up are necessary.

IV VITAMIN C INFUSIONS: Recent studies show that Intravenous Vitamin C administration improves quality of life in breast cancer patients during chemo/radiotherapy and aftercare. High dose IV therapy affects C-reactive protein levels and pro-inflammation cytokines in cancer patients. It reduced side effects of chemo and radiation: nausea, loss of appetite, fatigue, depression, sleep disorders. No side-effects of the IV vitamin C were documented. IV vitamin C was shown to be a well-tolerated therapy and reduced quality of life-related side-effects.

HYPERBARIC OXYEN THERAPY: It is FDA approved to treat the following: Wounds that break the skin; Radiation wounds; Anemia; Severe bone and skin infections; **Skin grafts**. It can be an effective healing stimulant. May also help with depression. You should only receive hyperbaric oxygen therapy for an approved condition and from an experienced healthcare provider in an accredited medical facility. Therapy should not last more than two hours.

EXERCISE: Managing Fatigue from Chemotherapy and Radiation. Studies show that the best remedy for fatigue is exercise. It is important to make sure there are no underlying medical issues adding to the fatigue, like anemia, iron deficiency or low thyroid function. The main difference between cancer-related fatigue and just being tired is that you *DO NOT* feel better after getting more rest. Exercise at least 3 hours a week, and if you can, exercise 5 to 6 hours a week. Yoga is useful because it incorporates concentration and stretching.

REIKI: The practice of reiki aims to balance a person's energy flow. The therapy is passive for the person receiving it and has no known side effects. Studies have shown that it may reduce pain in people with cancer and may ease anxiety and depression and help patients feel more relaxed and cope with the emotional stress of cancer treatment. Find a qualified Reiki practitioner.

HELP FOR VAGINAL DRYNESS & LOSS OF LIBIDO: Some breast cancer hormone treatments can cause vaginal dryness, discharge and hot flashes which can lower sexual desire. **Solutions that may help:** *Personal lubricants* – Replens & coconut oil are often recommended by OBGYNS. The benefits of coconut oil are that it's long-lasting, readily available. *Vaginal moisturizers* – Use regularly over time, not specifically in the moment of a sexual encounter. Over-the-counter moisturizers can be inserted into the vagina to add a protective barrier to coat the lining.

CANCER CAUSING TOXINS



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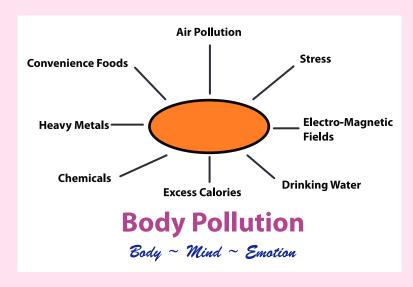




How and Why to Detoxify:

The body is exposed to thousands of toxins every day from a variety of sources. Detoxification is a process aiming to eliminate all the negative effects on our body from the environment, such as industrial chemicals, pesticides, additives in our foods, secondary smoke, pollutants, or heavy metals. Many of these chemicals are estrogen mimics called xenoestrogens. They may come from the air, electronic devices, our food, water we drink or bathe in, the clothes we wear and medications we take. The body processes and detoxifies toxins through the liver, kidneys, bowels and lower intestines, lungs and skin, changing them into safer chemicals and excreting them.

When peoples' bodies start accumulating toxins a variety of health imbalances occur. Waste may begin to re-circulate within the body. Toxins can get into the blood stream and cause inflammation in various parts of the body. The body may seek to purge excess waste through the skin causing acne, rashes, eczema or other unhealthy conditions. Toxins may remain in body fat, preventing people from losing weight and fully detoxifying.



Some of the signs that detoxification is needed: unexplained headaches; back pain; memory problems; brittle nails and hair; frequent allergy attacks. People who lead healthy, active lifestyles have an easier time eliminating toxins from their bodies. Those who eat a high fat, high sugar diet, consume caffeine and alcohol, smoke cigarettes, and get limited exercise accumulate more toxins (especially in fatty tissue) than the body can excrete.

SIMPLE HOME DETOX METHODS

Epsom Bath Salts: Hot water draws toxins out of the body to the skin's surface, while the water cools it pulls toxins from the skin. Epsom salts augment this detoxification by causing you to sweat. Also, when added to water, these natural salts can help to cleanse your colon.

Lemon Water: Add lemon to your water throughout the day. The acid in the lemons assists the cleansing process. Citrus fruits, such as lemons, contain a pure concentrated form of citric acid. Citric acid works like bleach on fat. Due to its acidity and high ph, citric acid penetrates and breaks down fat molecules.

Detoxification is a powerful tool and should be done under knowledgeable and professional supervision.

HOW TO SUPPORT THE BODY AND HELP IT TO ELIMINATE TOXINS

Identify and reduce toxins in your environment.

Crack the windows and let fresh air in. Indoor air can be five times as polluted as outdoor air, so open the windows weather permitting.

Exercise: It helps your blood and lymphatic system remove impurities and assists the passage of waste through the colon. Deeper breathing during exercise, boosts the oxygen supply to our cells, increases circulation and helps remove acid wastes via our lungs. Sweating during exercise opens and cleans pores.

Diet: Eat a diet rich in organic fresh fruits and vegetables; get plenty of fiber.

Drink plenty of pure water. It helps the kidneys flush excess acids.

Get 8 hours of sleep per night; sleep at least 3-5 feet away from electrical outlets

and unplug devices to avoid exposure to Electro Magnetic Radiation.

Get a massage. This is a great way to stimulate toxin removal from various parts of the body.

Detox your mind, heart and spirit.

845-339-HOPE www.BreastCancerOptions.org hope@BreastCancerOptions.org



Melissa Harris, MFA, is an internationally known artist, author, and psychic.

Her images grace the covers of books, CDs, magazines, and calendars worldwide.

Melissa also teaches "Painting Outside the Lines" TM art-making workshops in Hurley, NY. She is known for her Spirit Essence Portraits.

www.melissaharris.com

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Screening and Detection

When should I start having mammograms?

Women at increased risk are advised to consult with their doctors to develop individualized plans for surveillance and appropriate risk/reduction strategies. It is important to understand that there are three basic purposes for the use of mammograms:

Screening – Screenings help to detect breast cancer in earlier stages offering more treatment options and improving survival rates.

Surveillance – to closely watch women at high risk of developing breast cancer

Diagnosis – mammograms used to analyze abnormalities that have already been detected.

About 85% of breast cancers occur in women who have no family history of breast cancer. Most breast cancer is due to genetic mutations that happen as a result of aging and life in general, rather than inherited mutations. The most significant risk factors for breast cancer are being a woman and growing older. A woman's risk of breast cancer doubles if she has a first-degree relative (mother, sister, daughter) who has been diagnosed with breast cancer, but less than 15% of women who get breast cancer have a family member diagnosed with it. Only 5-10% of breast cancers are linked to known gene mutations inherited from one's mother or father.

Mammograms - Why 3D Mammography is considered better.

Cancer detection: 3D mammograms can detect up to 40% more cancers than 2D mammograms.

Earlier detection: 3D mammograms can detect cancers at an earlier stage, which can lead to better treatment options and outcomes.

Fewer false positives: 3D mammograms have fewer false positives especially for women with dense breasts.

Lower recall rate: Fewer women need to return for additional images.

Improved accuracy: Provides increased detail and accuracy, which helps detect cancer at earlier stages.

Better for dense breasts: Allows doctors to see beyond areas of dense breast tissue.

When to Get a Mammogram if you are pre-menopausal:

Mammography is most accurate during the 1st week of the menstrual cycle than if the test is done the 2nd, 3rd or 4th week of the cycle. This is a low-estrogen, low-progesterone phase. Breast tissue is less dense so mammograms can more easily see small, hard-to-see tumors.

Dense Breasts: About half of women undergoing mammograms have dense breasts. Dense breast tissue looks solid white on the mammogram image. It's hard to see through. Breast cancer, which also looks solid white on a mammogram, could be missed. Fat appears as a dark area. Depending on the density and breast cancer risk factors, additional screening, ie. Ultrasound or MRI may be ordered. Breast tissue density is more common in younger premenopausal women. It also occurs in women with less body fat compared with women who are obese.

Magnetic Resonance Imaging: MRI is used if a breast problem is detected using mammography, other imaging or physical exam. It offers better sensitivity than mammography for breast cancer detection in women with BRCA genes and women with dense breasts.

Clinical Breast Exam: Women in their 20s & 30s should have a clinical breast exam every 3 years as part of a regular health exam especially if they are from high risk families. After age 40, women should have a breast exam from a health professional annually. If there is a strong family or personal breast cancer history a clinical breast exam may be recommended more frequently.

Breast Self-Exams: 40% of breast cancers are discovered by women or their partners. Regular self-exams help them learn what is normal in their bodies so they notice slight changes that may send women to the doctor. Self-exams can help detect breast cancers that mammograms miss.

Ultrasound: About 40% of women, usually younger, have dense breast tissue and ultrasound can determine if a suspicious area is a non-cancerous cyst or solid tissue (dense mass).

Thermography: A non-invasive non-radiation imaging test that uses an infrared camera to read heat from increased blood vessel flow and metabolic changes which may indicate abnormality before a tumor is formed. It is FDA approved as an adjunct to mammography only when used in conjunction with standard of care screening.

Young Women with the BRCA Gene – Young women age 20-30 who inherit BRCA genetic mutations have a high risk for developing breast cancer. They need to see a BRCA expert before they start mammograms at a young age. Research suggests that exposing them to even small doses of radiation via screening mammograms may do more harm than good as they have an impaired ability to repair the damage to their DNA. They are more vulnerable to the harmful effects of radiation in comparison with non BRCA positive women. Even a small amount of radiation exposure from a mammogram can damage DNA.



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How to Stay Healthy in a Toxic World

The average household and workplace contain at least 62 toxic chemicals that are used on a daily basis. Chemicals, including organophosphates, flame retardants and phthalates, can be found in food, plastics, furniture, food wrap, cookware, cans, carpets, shower curtains, electronics and even shampoo. They are everywhere around us. We are exposed to phthalates in synthetic fragrances, noxious fumes in oven cleaners, BPA in plastics and register receipts and a host of chemicals in cleaning and personal care products. The ingredients in common household products have been linked to cancer, asthma, reproductive disorders, hormone disruption and neurotoxicity. They get into our bodies through inhalation, ingestion and absorption

BPA: It has been linked to breast cancer, obesity, early puberty, and heart disease. It's a hormone disruptor. About 93% of Americans have BPA in their bodies. Studies show that the amount leached is enough to cause breast cancer cells to proliferate in the lab, Found in plastics, canned goods, heatsensitive paper (used in gas station, grocery stores, and restaurant receipts), used in polycarbonate plastic reusable water bottles, in rigid plastics, the lining of food cans, and other products.

Solutions: Avoid all canned foods. Choose fresh and frozen over canned foods; Avoid clear, shatterproof plastic that contains BPA (usually code 7). Safer plastics are coded 1, 2, 4 & 5; Choose stainless steel, glass and ceramic. Buy PVC free shower curtains; Don't microwave in plastic. Choose glass or ceramic containers. Cover your food with a ceramic plate or an unbleached paper towel instead of plastic wrap; Use non-toxic, reusable stainless steel bottles or BPA free plastics.

DRY CLEANING: Conventional dry cleaning uses perchloroethylene (PERC), formaldehyde, napthaline, benzene. In addition to long-term effects on health, including cancer, short term exposures to air-borne PERC can cause skin irritation, dizziness and headaches.

Solution: Use dry cleaners that clean with the ecofriendly CO2 process. Hand wash with unscented fabric detergent.

CLEANING PRODUCTS: Many cleaning products contain harmful chemicals. They contain the sudsing agents diethanolamine (DEA) and triethanolamine (TEA). They form nitrosamines – which are carcinogens and penetrate the skin.

Solution: Make your own. Use baking soda for scouring; vinegar to clean glass

PERSONAL CARE PRODUCTS: *Parabens* (propyl-, isopropyl-, butyl-, and isobutyl-) Widely used in cosmetic products. Mimics estrogen and has been connected with increased risk of breast cancer and reproductive problems in women

Solution: Read the label! Use brands without these chemicals such as Aubrey Organics, Dr. Hauschka, Suki's Naturals, Weleda.

CHLORINATED PRODUCTS: Women with breast cancer have 50-60% higher levels of organochlorines in their breast tissue than women without breast cancer. Chlorine is found in many city water supplies, paper products, coffee filters, tampons and swimming pools. Harmful effects are intensified when the fumes are heated, as in the shower or dishwasher. **Solutions:** Use non-chlorine alternatives to bleach for household cleaning, laundry; Use unbleached toilet paper and tampons; Use natural coffee filters; Use a household water filter; Swimin salt water pools.

PHTHALATES: Estrogen-mimicking chemicals used as plastic softeners and solvents. Used in cleaning, laundry, and personal-care products, fabric softeners, perfumes, scented detergents, scentedcandles, etc. The chemicals go directly into the bloodstream when applied to our skin and are absorbed into the skin from our clothing. Known endocrine disruptors and linked to increased risk of breast cancer, early breast development in girls. **Solutions:** Avoid items that say fragrance or perfume on the label; look for "phthalate-free" or "no synthetic fragrance". Reduce your exposure by using unscented lotions, laundry detergents, microwaving food in glass containers, use cleaning supplies without scents, avoid air fresheners and plastics labeled No. 3, No. 6 and No 7: Use beeswax candles scented with essential oils.

NON-TOXIC CLEANING RECIPES

Window Cleaner: Mix together: 2 tsp. vinegar, 1 qt. warm water OR 2 tbsp. borax, 3 cups water. Rub dry with newspaper to avoid streaking.

Air Cleaner: Houseplants remove toxins from the air (formaldehyde, benzene, etc. The best plants for removing toxins are Spider plants, Philodendrons, Aloe vera, English ivy, Boston fern.

Household Cleaners: Mix together: $\frac{1}{2}$ c. baking soda, $\frac{1}{2}$ c. vinegar, $\frac{1}{2}$ c. borax, 1 gallon water *For surfaces that need scouring, try moist salt or baking soda and a green scouring pad.

Drain Cleaner: Pour together: ½ c. borax in drain followed by 2 cups water.

RESOURCES

Download the Think Dirty App. www.thinkdirtyapp.com. Identify the potential risks associated with the personal care products they use every day. Think Dirty focuses exclusively on the chemical content of the products in question.

Environmental Working Group Skin Deep Cosmetic Database www.ewg.org/skindeep. Provides the consumer databases with easy-to-navigate ratings for a wide range of products and ingredients on the market.

Gives alternatives to use.

PRESCRIPTION DISCOUNT CARDS

Best Overall: GoodRx -

The website and mobile app lets you search by drug name for the lowest prices in your local area.

Best for Local Pharmacy: Optum Perks - Accepted at 64,000 pharmacies both chains and local pharmacies.

Best for Future Savings:

SingleCare - Register for their Bonus Savings program and money towards future prescriptions.

Best On-the-Go: ScriptSave WellRx - Discounts on prescriptions, including some pet medications. Save 60-80%.

Best for Home Delivery: Blink Health - You can pick up your medication from one of the 35,000 pharmacies in their network; offers free home delivery.

Best for Chronic Illness:

RxSaver - Offers the Rx Advocacy Program for a monthly fee of \$50 per month for people who have chronic medical conditions.

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Breast Cancer Advocacy: Addressing Racial Disparities

SELF ADVOCACY: In modern medicine, patients and survivors are empowered to know as much as possible about their disease, its treatments and the potential effects of the disease and/or the treatment on their body. Women are no longer passive patients, but rather they are informed consumers, survivors, advocates and activists who are speaking up for themselves and others and speaking out on issues relevant to their treatment and the prevention of breast cancer.

Self-Advocacy Is Important! Being your own advocate helps to make sure you are receiving the best care possible. Being an informed consumer helps you to work with your health-care providers. Advances in science and technology have increased options for treating breast cancer, but it is advocates that have changed the way people deal with this disease. Survivors, and their supporters need to be effective advocates in the current environment of rising health care costs and restrictive referral policies. Becoming an advocate helps individuals get through their breast cancer experiences, gain a feeling of control over their lives and make an impact for others. By being a pro-active cancer patient/survivor, you can share treatment decision making with your medical team, impact both the health care you receive and the quality of your life.

RACIAL DISPARITIES IN BREAST CANCER: The mortality rate from breast cancer has decreased in the White population in recent years due to the emphasis on early detection and more effective treatments. Although mortality rates have declined in some ethnic populations, the overall cancer incidence among African American and Hispanic populations has continued to grow. Lack of insurance, fear of testing, delay in seeking care, barriers to early detection leading to more advanced stages of disease at diagnosis and unequal access to improvements in breast cancer treatment may explain the differences in survival rates between African American and White women. New strategies and approaches are needed to promote breast cancer prevention, reduce mortality and improve the health outcomes of racial/ethnic minorities.

Breast cancer deaths have declined 42% in the past 30 years, thanks to increased awareness, earlier screening and improved therapies. But all these advancements have not changed the fact that the disease does not affect all racial and ethnic groups equally. Black women continue to have the lowest survival rate of any racial or ethnic group. The 5 year survival rate for a black woman with breast cancer is 81% versus 92% for white women. Black women also are more likely to die from breast cancer at any age—with young black women dying at double the rate of young white women, according to the National Cancer Institute. Black women were likely to have an advanced-stage diagnosis than white women and are at an increased risk to develop triplenegative breast cancer, a subtype linked to some of the worse outcomes. It is vital that medical professionals and leaders from minority population groups be represented in decision-making in research so that racial disparities in breast cancer can be well-studied, fully addressed, and ultimately eliminated.

MAKING A DIFFERENCE! Advocacy is a tool for change. Advocacy is a tool for change. Participation in a clinical trial is one way for patients and survivors to be involved in research but only 3-5% of eligible patients and/or survivors participate. Including Black populations in the design of clinical trials is another key element that will add to our understanding of why these disparities exist and how to address them. The involvement of *all* patients is necessary as partners in research...from the development of an idea through study design, implementation, evaluation and dissemination of results. The National Breast Cancer Coalition (NBCC) has had a seat at the table in peer review and grant proposals since the early 90's. Through the establishment of the Department of Defense Breast Cancer Research Program (DoDBCRP), patient advocates have increased their roles as partners in research, making a unique contribution by giving a "face" to the disease and reminding researchers of the human element.

ADVOCACY AS A TOOL FOR POLICY CHANGE: To learn how you can become engaged in research: NBCC Project LEAD, National Cancer Institute Office of Advocacy Relations (NCIOAR). California Breast Cancer Research Program (CBCRP), Research Advocacy Network (RAN), Patient Centered Outcomes Research Institute (PCORRI) Patient Engagement Program, U.S. Food and Drug Administration (FDA).

Advocates have challenged corporations; the pharmaceutical industry; local, state and federal legislators; healthcare institutions; providers; health agencies and the media.

What You Can Do: Tell your state and federal legislators about the gaps you see in patient care – sharing personal stories - because they need to understand the issues patients are facing in order to promote effective legislation.

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Ten Mistaken Beliefs About Breast Cancer

Cancer is caused by many factors. Research based on huge numbers of people have helped get a clearer picture of what increases or decreases our risk. There is a lot of awareness about breast cancer, but there are still many mistaken beliefs that cause women more anxiety than necessary.

- 1. Women have a 1-in-8 chance at any age of getting breast cancer. REALITY: Most people think they have a higher risk of breast cancer than they actually do. Estimates are that a woman age 20 has a 1 in 2,000 risk of developing breast cancer in the next 10 years; at age 40, 1 in 100; age 60, 1 in 28; age 85, 1 in 8. About 50% of breast cancer occurs among women age 62 or older.
- 2. I'm too young to worry about breast cancer. REALITY: You're never too young to get breast cancer. While a breast lump or mass in a younger woman is much less likely to be cancer than a lump in an older woman, it could be cancer and needs to be checked out. 25% of women with breast cancer are younger than 50, with a few as young as late teens.
- 3. Needle biopsies can disturb cancer cells and cause them to spread to other parts of the body. REALITY: There's no conclusive evidence for this claim. Despite some previous concerns, studies have found no increased spread of cancer among patients undergoing needle biopsies compared to those who did not. If the disease spreads, it's not because of the biopsy.
- 4. If I'm diagnosed with breast cancer, I must have surgery immediately. FACT: Although many women would immediately seek treatment, most of the time it's safe to take time to get a second opinion and make sure you have the right information about the best treatment for you.
- 5. Having a mastectomy to treat breast cancer is more likely to increase a woman's life expectancy than having a lumpectomy.

 FACT: The life expectancy and survival rates are the same for most breast cancers whether a woman is treated with a lumpectomy or a mastectomy. It's true that there is a small risk that breast cancer may return after a lumpectomy with radiation. However, in those cases, a woman who goes on to have a mastectomy has the same survival rate and life expectancy as a woman who had a mastectomy after initial diagnosis.
- 6. Most women with breast cancer have a family history of the disease. FACT: About 80% of women with the disease don't have a family history and most women with a family history of breast cancer will never get it. Only women who have close blood relatives with breast cancer have a higher risk of the disease than the general population. Having a first-degree relative (mother, sister or daughter) with breast cancer almost doubles a woman's risk. Having two first-degree relatives increases her risk about threefold. Women with a father or brother who have had breast cancer also have a higher risk of breast cancer.
- 7. A diagnosis of breast cancer means I'm going to die. REALITY: The number of women surviving at least 10 years after proper treatment is 85-90%. Breast cancer that has metastasized, or spread to other parts of the body, poses the greatest challenge, although women with metastatic breast cancer often live for years with their disease.
- 8. If your mammogram is negative, there is nothing to worry about. REALITY: Mammograms fail to detect as much as 20% of breast cancer in women over 50, and as much as 40% in younger women. Younger women at high risk should talk with their doctor about the benefits and limitations of starting mammograms when they are younger and learn about other technologies. Clinical breast exams and knowing what is normal for your breast are also crucial pieces of the screening process.
- 9. After I've survived 5 years, my breast cancer won't return. REALITY: Breast cancer can recur at any time, although 75% of recurrences occur within five years. 25% can recur any time after five years.
- 10. Small-breasted women are less likely to get breast cancer. REALITY: There's no connection between the size of your breasts and your risk of getting breast cancer. Recommendations for routine screenings and checkups are the same regardless of breast size.



If you have breasts or know someone who does... Please show your support

Breast Cancer Options is a grassroots, 501C3 nonprofit organization and the largest provider of peer support, advocacy and education services in the Hudson Valley.

MAKE A DONATION!

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Make a credit card donation on our web site. www.breastcanceroptions.org

...or call us at 845-339-HOPE (4673)

Thank you!

All donations are tax-deductible and truly appreciated!

About Breast Cancer Options www.BreastCancerOptions.org 845/339-HOPE (4673)

Breast Cancer Options (BCO) is an organization of breast cancer survivors, advocates and healthcare professionals who understand that when you are diagnosed with breast cancer, you are suddenly faced with some of the most important decisions you will ever make about your own healthcare.

All of our services are free.

SUPPORT SERVICES

- Camp Lightheart A free sleepover camp for children who have a parent with breast cancer or have lost their parent to the disease. One of the only services for children in this situation.
- **Retreat for Women with Metastatic Breast Cancer** This retreat is free for women with stage 4 breast cancer. *One of the few services for stage 4 women in NYS*.
- Massage & Acupuncture Program: Free services for women with breast cancer in our catchment area
- Peer-led Support Groups On Zoom. See our web site. Includes young survivor, mixed s & metastatic groups.
- Peer-to-Peer Mentoring Talk to someone who has gone through the same experience.
- BCO News E-updates: Information on all aspects of breast cancer including chemical exposures, nutrition, the impact of light at night and much more www.breastcanceroptions.org

PEER-LED MONTHLY SUPPORT GROUPS

Join a Zoom meeting. Click on the links below:

- 1. Enter the meeting ID number and your display name.
- 2. Select to connect audio and/or video and tap Join Meeting
- 3. The Password to join any group is: BCO101.

-BCO Support Group - 1st Thursday, 6pm.

https://us02web.zoom.us/meeting/register/uZMsd-ihpz0uSNg6Nvk0BsCGoFNR7ehfGw

-BCO Metastatic Support Group- 2nd Monday, 6:30pm.

 $https://us02web.zoom.us/meeting/register/tZclcumqqTMoGtU6EJ8XX4_murVrjlH_xGhl$

-BCO Support Group- 2nd Wednesday, 10am.

https://us02web.zoom.us/meeting/register/upEpdumqrj4pAwaR5BPfzTVcc_qTOTBseQ

-BCO Young Survivor Support Group- 3rd Monday, 6:30pm.

https://us02web.zoom.us/meeting/register/upMpdqprz8iJOhiRvt18wjX9ux4bybtvg

- BCO Metastatic Support Group- 4th Monday, 4:30pm.

https://us02web.zoom.us/meeting/register/tZQqc-uhpjwuAYdvO6TGRWfUwVQ7hMAeEQ

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