



**You've Just Had To
Tell A Young Woman
She Has Breast Cancer.**

Now Tell Her About Us.

**GULF STATES YOUNG BREAST
CANCER SURVIVOR NETWORK**



What Young Breast Cancer Patients Face

When a young woman receives a breast cancer diagnosis, she is faced with unique issues that older women with the disease don't necessarily have to confront, such as:

- Fertility and premature menopause
- Genetic testing and implications for other family members
- Body image, sexual intimacy, dating
- Dealing with children
- Economic and career implications
- More serious strains of the disease

The earlier a young woman is provided the information regarding these topics, the better she is able to make a decision. However, there's a lack of places to which a young woman can turn. Support groups for older breast cancer patients don't deal with the issues specific to young breast cancer patients and down in the South, many young women facing breast cancer are of low-income and/or live in rural areas that lack easy access to the necessary resources, people, and facilities that can help.

What We Do

What young women do have are cell phones and the internet. That's where we come in. We're the Gulf States Young Breast Cancer Survivor Network, an online resource and partnership of programs in three states: SurviveDAT in Louisiana, SurviveAL in Alabama and SurviveMISS in Mississippi. We have a lot of the answers these young women are looking for, ranging from the big questions of

what to do if they want to have children one day, down to who near them can draw back eyebrows lost to chemotherapy. Our websites are continually updated with new resources and information on a national, regional, state and local scale, while our social media platforms provide day-to-day news and interaction.

So please explore our websites, like us on Facebook, follow us on Twitter and tell your young breast cancer patients about us. You are the first person to whom she is turning – we'd like to be the next.



FREQUENTLY ASKED QUESTIONS

Q - How can I use this to help my patients?

Familiarize yourself with your state website content. Hand the patient a card or flyer with the website information so they can look at it later, when they have processed what you have said. You could also insert a flyer in a packet they receive from your office at time of diagnosis. Please let us know if you need more cards or flyers and we will have them delivered to your office.

Q - At what point should my patients be given this information?

She should be given the website information as soon after her diagnosis as possible. She should have the information before she begins treatment, especially for fertility preservation. Because our website is an online resource list, she can begin using it immediately.

Q - How often is the website updated?

Whenever we receive new and relevant resources or information, it is added to the website, Facebook page, and/or Twitter if deemed appropriate.

Q - I usually refer my patients to a certain agency for help, but I do not see them listed. Why?

Could be several reasons – most likely, we do not know about it yet. Our website has a “Contact” tab which allows visitors to notify us of resources we may not have listed on our website. Every resource listed is personally screened by someone in our office, so we research the suggested resource and add it to our list if deemed appropriate.

Q - I have some ideas regarding the needs of YBCS. Can you help?

Contact us via the “Contact ” tab on the website and let us know what you think. We’ll do what we can do to address any issues.

GULF STATES YOUNG BREAST CANCER SURVIVOR NETWORK



Breast Cancer Incidence, Tumor Markers & Mortality

Alabama, Louisiana, and Mississippi share several traits relating to breast cancer among women less than 45 years old.

From 2011-2015, **young white women** in each state experienced lower breast cancer incidence than their counterparts in the overall United States; however **young black women** were more likely to be diagnosed with breast cancer, with this difference being statistically significantly higher in Louisiana. (All U.S. incidence rates are based on data compiled by the NCI Surveillance, Epidemiology, and End Results (SEER) Program.

Table 1 shows the average annual incidence rates and number of new cases for each state.

Table 1. Average annual incidence rates per 100,000 (case counts), breast cancer among women aged <45, 2011-2015		
	White Women	Black women
Alabama	25.1 ↓(221)	31.3 (119)
Louisiana	25.5 ↓(193)	31.7 ↑ (129)
Mississippi	25.0 ↓(113)	30.9 (99)
U.S. (SEER)	27.3	29.0

↓↑: State rate is significantly different than the U.S. rate (p < 0.05)

Counts are not provided for the U.S., as the SEER sample covers only about one fourth of the population.

One factor that indicates worse prognosis for breast cancer patients is the combination of negative estrogen receptors, negative progesterone receptors and negative HER-2 receptors. For these women, the common chemotherapies now available will not halt their disease. Throughout the country, black women are more likely to be **“triple negative”** than are white women. In the 0-44 age group, approximately 23% of black women with breast cancer are triple negative, versus about 15% of white women. This pattern is true in each of the three states.

Table 2 summarizes the counts and percentages of women diagnosed with this characteristic each year.

Table 2. Average annual incidence counts (percentages) for triple-negative breast cancer among women aged <45, 2011-2015		
	White Women	Black women
Alabama	32 (14.5%)	24 (19.9%)
Louisiana	32 (16.6%)	37 (28.7%)
Mississippi	20 (17.6%)	30 (30.3%)
U.S. (SEER)	(15.0%)	(23.1%)

Mortality rates for black women are higher in Alabama and Louisiana than in the United States as a whole, although these differences do not reach statistical significance. Mortality among white women is lower in Louisiana, but slightly higher in Alabama and Mississippi when compared to the U.S. rate, though the differences are not statistically significant. (See Table 3 for the average annual mortality rates and counts.)

Table 3. Average annual mortality rates* per 100,000 (death counts), breast cancer among women aged <45, 2011-2015		
	White Women	Black women
Alabama	2.6 (23)	5.0 (19)
Louisiana	2.2 (17)	5.8 (23)
Mississippi	2.7 (12)	4.6 (15)
U.S. (SEER)	2.5 (1,596)	4.8 (594)

*Underlying mortality data provided by NCHS (www.cdc.gov/nchs).

Please be aware of the risks young women, especially black women, face when it comes to breast cancer.