

Breast cancer is the second leading cause of cancer death for women in the United States. Every three minutes a woman in the U.S. is diagnosed with breast cancer; one person dies of the disease every 14 minutes. Breast cancer accounts for one of three cancer diagnoses (excluding skin cancer) for women in the U.S.

New treatments and improved early-detection methods have led to an increase in the number of women who consider themselves a breast cancer survivor. There are more than two million survivors of breast cancer in the U.S.

While advances in breast cancer treatment have increased the likelihood of survival, many breast cancer patients still may experience a recurrence of their disease. Options exist to reduce recurrence, but communication between patients and health care professionals about treatment choices is crucial.

### **The Risk of Recurrence:**

- ◆ Approximately one-third of women with estrogen receptor-positive early breast cancer experience a recurrence and over half of those recurrences occur more than five years after surgery.
- ◆ Through at least 12 years of follow-up, the risk of breast cancer recurrence remains appreciable; even some patients who are considered low risk have some risk of the cancer coming back.
- ◆ Even for small tumors in the lowest risk category, the 10-year risk of breast cancer recurrence was 12% in the absence of adjuvant therapy.
- ◆ Studies show that more than half of all breast cancer recurrences and two-thirds of all breast cancer deaths occur after completion of five years of standard tamoxifen therapy.

### **Predicting Risk**

Common factors that have been identified for predicting risk of recurrence in patients with breast cancer, include but are not limited to:

- **Lymph Node Involvement**
- **Tumor Size**
- **Histologic Grade**
- **Hormone Receptor Status**
- **HER2/neu (a growth-promoting protein) Status**

### **Risk Communication:**

- ◆ Recent research suggests that there are significant gaps between the intended message about recurrence risk and the message received by patients in the health care professional-patient communication process.
- ◆ Patients generally have considerable difficulty understanding and working with risk calculations and probabilities, an important element for understanding risk.
- ◆ Even when patients discuss risk, many studies have shown that they tend to have inaccurate perceptions of their risk.
  - Many people overestimate their cancer risk, and have a “pessimistic” bias, meaning they believe they have a greater absolute risk of recurrence than they actually do.
  - Other people underestimate their risk, and have an “optimistic” bias meaning they believe they are at lower risk of recurrence.
- ◆ The way in which health care professionals present cancer risk information is critical to patient understanding and acceptance of the information.