

BREAST CANCER AWARENESS

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A pink ribbon, a symbol for breast cancer awareness, is shown on the left side of the page, partially overlapping a large white circular area.

BREAST CANCER AWARENESS

HOW TO SELL: REVENUE-DRIVING CURATED CONTENT

All stories are flexible and can be used **however** and **wherever** you want to place it in your publication.

RELEVANCY

Breast cancer is the **second most common cancer in women** and is most likely to effect those aged 60 or older. October remains **Breast Cancer Awareness Month**, when many organizations and companies stand together in support of the millions effected by the disease.

TOPICS WORTH READING

Topics covered in this section include: Best ways to reduce your risks, why increased awareness is vital, best ways to support your friends and family with breast cancer, and three others.

KEY AD MARKETS

This section is desirable content for sponsorship from your local **health care professionals, grocery store chains, women-owned businesses** and many more who want to be associated with breast cancer support, especially in the month of October.

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Breast Cancer Awareness

Publisher name here

**The best ways
to support a
friend or
loved one
with breast
cancer**

**Understanding
the BRCA gene
mutation**

And options you can pursue

**Why
increased
awareness
is vital**

**The best ways
to reduce
your risks**



- Advice for the caregivers of patients
- Finding the right oncologist for your journey

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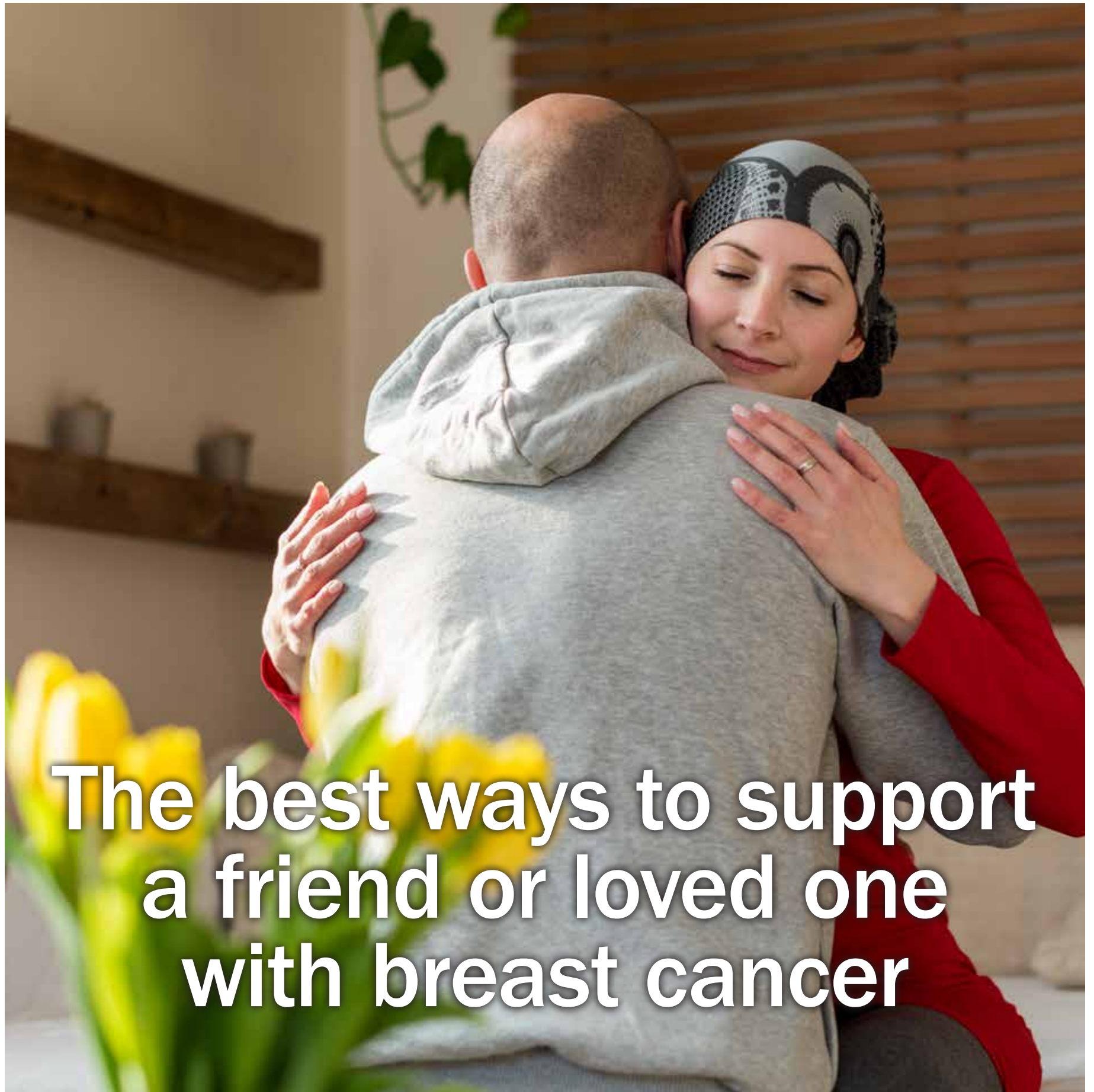
Understanding the BRCA gene mutation

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**The best ways to support
a friend or loved one
with breast cancer**

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BY ERIK J. MARTIN

CTW FEATURES

When someone first learns they have breast cancer, it can feel like a gut punch to the soul. Fears, doubts, uncertainties, and apprehensions can surface, making it difficult to stay focused. And during and following treatment, it may be more challenging to summon the strength and determination to accomplish routine tasks.

It's times like these where friends and loved ones are crucially important, say experts and cancer survivors alike.

"Receiving a breast cancer diagnosis can make you feel alone, isolated, and afraid. Treatment is equally alienating and scary. When we feel alone, we often feel hopeless. But support from friends and family is extremely helpful and can provide much-needed comfort and hope," says Sarah Kouten, a therapist and breast cancer survivor in Saint Augustine, Florida. "When patients experience a positive outlook and feel like loved ones have their back, they tend to follow through on treatment and other beneficial activities."

Ellen Albertson, a North Hero, Vermont-based psychologist, author, and a board-certified health and wellness coach who was recently diagnosed with breast cancer, echoes those thoughts.

"Friends can help you stay happy, laugh, and forget your troubles. They can also make sure you practice self-care by encouraging you to exercise, rest, and eat right," notes Albertson.

Christina Moreno, a Vancouver, British Columbia, Canada-based certified personal development coach and breast cancer survivor, appreciates how her close circle went the extra mile to elevate her spirits as she navigated her breast cancer experience years back.

"Seeing others genuinely hopeful for me, especially during times when fear would take over, was very comforting. It's sort of like being on a turbulent flight and looking at the flight attendants' reactions to gauge whether or not you should panic," she says.

Know someone you care about who is dealing with breast cancer? Even small gestures can make a big difference in her life.

"Ask the person what she needs and get specifics. Does she need a ride to the doctor's office? Does she need you to cut the grass? Are there any favorite meals you can make for her? Don't assume you know what she needs – inquire," suggests Albertson.

Remember that support can come in many forms.

"You can offer to clean, care for the kids, and provide transportation to appointments," Kouten advises. "For

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those who are more empathetic and tuned into emotions, you can sit with the patient and lend an ear, providing validation and listening without trying to solve every problem. Or you can provide distractions by taking them to a movie, watching TV together, and spending time being ‘normal’ and not preoccupied with breast cancer.”

Cinde Dolphin, a three-time breast cancer survivor from San Luis Obispo, California, recommends practicing patience with and continually demonstrating kindness to your friend or relative with breast cancer.

“Avoid the tendency to ask them about activities, family health history, or earlier signs that may have triggered the disease. Help them stay in the present and avoid falling down the rabbit hole of over-researching breast cancer,” says Dolphin.

Additionally, remind your loved one that you still see her as the same precious human being she has always been.

“Continue to ask about and value her thoughts and opinions on things other than cancer. For example, if your friend is a bookworm, ask what they’ve read lately,” recommends Moreno. “Breast cancer can come with hair loss, pale skin, scars, and weight gain. Point out to your loved one all the dif-

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ferent ways her beauty continues to shine through. Also, be aware of the language you use. Not everyone likes or wants to use fighting language when it comes to cancer. For some patients who are sensitive to words and like to use language to support themselves in healing, it's helpful to listen and adapt to how they are choosing to experience it."

Others agree that words matter, so choose them carefully.

"Personally, it bothers me when everyone's response to your cancer diagnosis is 'I'm sorry.' That can feel so disempowering," Albertson adds. "I'd much rather people say to me, 'I love you. How can I support you, and what do you need?'"

Also, encourage your loved one to seek extra support and resources from breast cancer organizations like the Susan G. Komen Foundation, Living Beyond Breast Cancer, CancerCare.org, Young Survivor Coalition, Breast360.org, and others.

Lastly, when offering support, avoid being pushy or critical and try not to micromanage or "fix" your friend.

"By telling them all the things they should be doing – like thinking positive, exercising, eating healthier, etcetera – this can be interpreted as blame," Kouten cautions. "There's a fine line between encouragement and shaming."

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Why increased breast cancer awareness is vital



BY ERIK J. MARTIN

CTW FEATURES

Breast cancer remains the most common type of cancer globally and the second leading cause of death in women. Each year in the United States, around 255,000 cases of breast cancer in women are diagnosed versus 2,300 cases in men, and it is estimated that breast cancer takes the lives of 42,000 females and 500 males in America every year, per data from the Centers for Disease Control and

Prevention. About one in eight women will develop breast cancer in their lifetimes.

Sobering statistics like these remind us of how crucial it is to be cognizant of the risks as well as proactive in our approaches toward breast cancer prevention and testing.

"Breast cancer awareness is extremely important among the public. For so long, the word 'cancer' itself was taboo. A family member would be diagnosed, and it would be kept a secret. The patient would feel

ashamed, and those around them feared it could be contagious," says Zoraida Mendez, MD, clinical lead and oncology consultant for Cleveland-based Care Oncology. "Thankfully, the medical community has made a big effort in breaking these myths, and breast cancer educational programs have grown tremendously throughout the country over the years."

One major factor that has enhanced recognition and understanding of this disease has been Breast Cancer Awareness Month

(every October), first established in 1985.

"I was at first greatly annoyed by all the attention to breast cancer in October, when everything I saw was pink – football player cleats, cans of soup, kitchen strainers, even our newspaper," says Meg Stafford, a licensed clinical social worker in Littleton, Massachusetts, who was diagnosed with breast cancer in 2007. "At that time, I did not want reminders of all the treatments and chemicals I received. But I came to appreciate this raised awareness in

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the following years, even as my gratitude was profound, as these treatments have saved my life.”
Jill Binkley, founder of the nonprofit TurningPoint Breast Cancer Rehabilitation, and a two-time breast cancer survivor, says greater public consciousness about breast cancer

has significantly contributed to higher screening rates for breast cancer. “That’s important, as proper screening can catch the disease early enough when it is most treatable,” says Binkley, who particularly credits the Susan G. Komen Foundation with helping to spread

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the word about breast cancer prevention and treatment and driving down mortality rates.

Janice Johnston, MD, chief medical officer and co-founder of Redirect Health in Glendale, Arizona, appreciates that several significant efforts have been made to grow breast cancer awareness further.

“These include social media campaigns, commercials, and the global focus on educating and encouraging females to conduct at-home self-exams,” says Johnston. “There have also been many scientific advancements in recent years that have made early detection of breast cancer easier for providers, including improved imaging technology and nanotechnology. Increased awareness has also pushed for improvements to certain standards for routine checking of breast cancer, such as new recommendations for women at a certain age – usually 40 to 50 years old, to begin routine mammograms and for high-risk patients to receive more routine screenings earlier.”

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One of the most common fears Johnston hears from her patients is that they are afraid to get a mammogram because they believe it may be uncomfortable.

“While it’s true that some women may feel slight discomfort, the majority do not. As organizations worldwide continue to educate individuals about preventive measures, like mammograms, these misconceptions and fears should decrease,” she adds.

Mendez notes that she’s been proud to participate in several programs designed to educate people about breast cancer better.

“The first thing I start telling the public is that it is okay to talk about breast cancer. I explain the importance of doing self-breast exams once a month and not ignoring any changes in your breasts. I also stress having a yearly exam done by your regular physician,” says Mendez.

“Another subject I educate them on is knowing the risks, including hereditary risks and lifestyle risks like obesity or heavy alcohol intake. And explaining the different treatment options helps relieve their fear of seeking medical attention.”

To learn more about breast cancer facts, risks, preventive measures, and treatment options, visit NCCN.org, Cancer.org, and Komen.org.

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Understanding the BRCA gene mutation and options you can pursue

BY ERIK J. MARTIN

CTW FEATURES

We get a lot of things passed down from our parents through genetics. Among them are tumor suppressor genes called BRCA genes (with the “BRCA” standing for “breast cancer”). Two essential subtypes are BRCA1 and BRCA2.

But while these genes are actually protective against cancer, mutations can occur that cause BRCA1 and BRCA2 not to work effectively, result-

ing in an increased risk of breast cancer.

“A BRCA gene mutation means that your BRCA1 or BRCA2 gene no longer acts normally. The mutation can cause a greater likelihood of cells dividing in an uncontrolled fashion, which increases the risk for breast and ovarian cancer,” explains Shelly Beckley, an oncology nurse practitioner and clinical support lead for Outcomes4Me, a patient empowerment platform that helps cancer patients navigate their care and gain access to personalized treatment options.

Inheriting a mutated BRCA gene doesn’t auto-

matically mean you will develop cancer, but it does mean you have a higher risk.

“Knowing that you have a BRCA mutation allows you to undergo closer surveillance. This is important, since approximately 50% to 70% of women with BRCA mutation will get breast cancer by age 70,” notes Jonathan Stegall, MD, an integrative oncologist in Atlanta. He adds that it is estimated that approximately 3% of breast cancers are due to a BRCA mutation.

Fortunately, BRCA gene mutations can be identified via a simple blood test, with results usually

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available within two to three weeks. Stegall says this test is quite reliable, although there are rare instances of false positives and false negatives.

Many women are good candidates for BRCA testing, including those with a strong family history of breast or ovarian cancer.

"In addition, women who have a personal history of breast or ovarian cancer and are now cancer-free are advised to be tested. Also, women of Ashkenazi Jewish ancestry should also be tested since they are at higher risk for having a BRCA mutation," Stegall continues.

Anita Johnson, MD, FACS, chief of surgery and leader of the Women's Cancer Center at Cancer Treatment Centers of America Atlanta, also recommends that BRCA gene mutation testing should be repeated if you

have a history of recurrence or have had testing performed more than seven to 10 years ago.

"Thankfully, only about one in 400, or 0.25% of the population, has the BRCA gene mutation," says Johnson.

Liz Hunter Brack, RN, a 27-year-old in Newnan, Georgia, says she and her sister had a 50-50 chance of being carriers of the BRCA mutation, as their mother and grandmother both tested positive for it back in 2007 after they both battled breast cancer at a younger age.

"My sister and I received the same testing around 20 years old and were both positive for the mutation," she says. "It is a blessing and a curse, this mutation, because now that we are educated and aware we can stay ahead of the risks. We look at it in a positive light and are very thankful

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we have been able to take better control of the situation.”

If you test positive for a BRCA gene mutation, Johnson advises finding a physician who specializes in high-risk assessments.

“After a positive test finding, most providers will recommend more frequent screening and clinical breast exams, including mammography and breast MRI. Another option for patients is a medical strategy in which medication is taken daily to lower the risk of getting breast cancer,” she says. “The most invasive approach involves risk-reducing mastectomies. In some cases, all the skin, including the nipple-areolar complex, can be saved with immediate reconstruction surgery performed on the same day.”

The degree to which you want to pursue any of these proactive options is up to you.

“The decision will largely be based on your individual preference and your comfort level with each option,” says Stegall.

Keep in mind that just because you

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may have inherited a bad gene does not mean you have no say in whether or not that gene is active. “I always tell my patients that their DNA is not their destiny,” Stegall adds. “We know that good habits, such as high-quality nutrition, suffi-

cient sleep, regular exercise, and routine stress reduction practices, play a key role in making sure our bad genes are turned off and are good genes are turned on.”

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The best ways to reduce your risks of breast cancer

BY ERIK J. MARTIN

CTW FEATURES

If you're a woman in the United States, there's a 13% chance you'll be diagnosed with breast cancer in your lifetime. Fortunately, the five-year survival rate is 90%. But it remains the fifth leading cause of death worldwide.

While you can't change your genetic predisposition to or a family history of the disease, learning the facts, taking precautionary measures consistently and early on, and making recommended lifestyle changes can alter the odds in your favor and help decrease the likelihood that you'll

ever be diagnosed with or succumb to breast cancer.

"It is essential to know the facts and be aware of the risks of developing breast cancer because you and your physicians can take steps that can impact your survival," says Christopher McGreevy, MD, FACS, a breast surgical oncologist at Cooperman Barnabas Medical Center in New Jersey. "For example, early detection is key to surviving breast cancer. We now have screening protocols for women as young as 25 if we know they have a family history of the disease. And some doctors today will prescribe MRIs of the breast as part of the yearly exam for

higher-risk women of any age."

Mona Jhaveri, PhD, a cancer researcher and founder of the organization Music Beats Cancer, concurs.

"Too many women around the globe fail to get screened. Some believe they are too young or the disease doesn't run in their family, while others reject the use of mammograms or find screening too expensive, inaccessible, or uncomfortable. Unfortunately, when detected at late stages, breast cancer is more deadly. That's why raising your awareness about breast cancer, acknowledging the importance of early detection, and taking preventive steps to lower

your risks is paramount," says Jhaveri.

A proper balance of hormones like estrogen and progesterone is a huge factor in safeguarding against breast cancer. A primary breast cancer risk is increased and prolonged exposure to estrogen.

"Ways to keep your hormones happy and balanced include making sure you eat a diet designed to keep your blood sugar stable," says Juni Bucher, a Los Angeles-based nutritional therapy practitioner, host of the Tata, Cancer podcast, and a breast cancer survivor. "One of the biggest stressors on the body is heavily fluctuating blood sugars. Try

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to eat a breakfast built around protein instead of donuts or pastries. Also, eat plenty of vegetables – which have anti-cancer properties that support healthy cellular turnover and the body’s natural detoxification mechanisms.”

Proper diet is essential, adds Richard Reitherman, MD, PhD, medical director of breast imaging at MemorialCareBreast Center at Orange Coast Medical Center in Fountain Valley, California.

“Eat as many fresh foods as possible, including fresh fruits and vegetables, and try to keep processed foods to a minimum,” he says.

Maintaining a healthy weight is equally important. Findings of a study published by the National Cancer Institute indicate that women with breast cancer who met minimum physical activity guidelines both before their diagnosis and at the two-year follow-up after treatment had a 55% reduced chance of their cancer returning and a 60% reduced chance of death from any cause versus those who didn’t meet

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the minimal guidelines.

“Proper exercise can decrease your risk because, among other reasons, you burn fat cells that can create more estrogen,” notes McGreevy.

Take steps to manage stress and anxiety better, too.

“Even simple things like taking a walk, biking outdoors, or listening to music can have a positive impact.

Remember that stress can hurt our immune system, making it harder for our bodies to fight against illnesses, including cancer,” Reitherman cautions.

Furthermore, aim to minimize toxins in your environment.

“We are regularly exposed to endocrine-disrupting chemicals, including chemicals in plastics, pesticides,

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cosmetics, and household cleaning products that can mimic hormones in our bodies and throw our hormones out of balance,” says Bucher. “Try to use environmentally friendly cleaning products and drink out of glass containers instead of plastic ones.”

Strive to reduce alcohol consumption and eliminate smoking, too.

“While one drink a day is relatively safe, anything more than that can increase your odds of getting breast cancer,” McGreevy explains.

“Smokers can also be a greater risk for breast and other cancers.”

Getting pregnant and breastfeeding your baby can further decrease the likelihood of developing breast cancer.

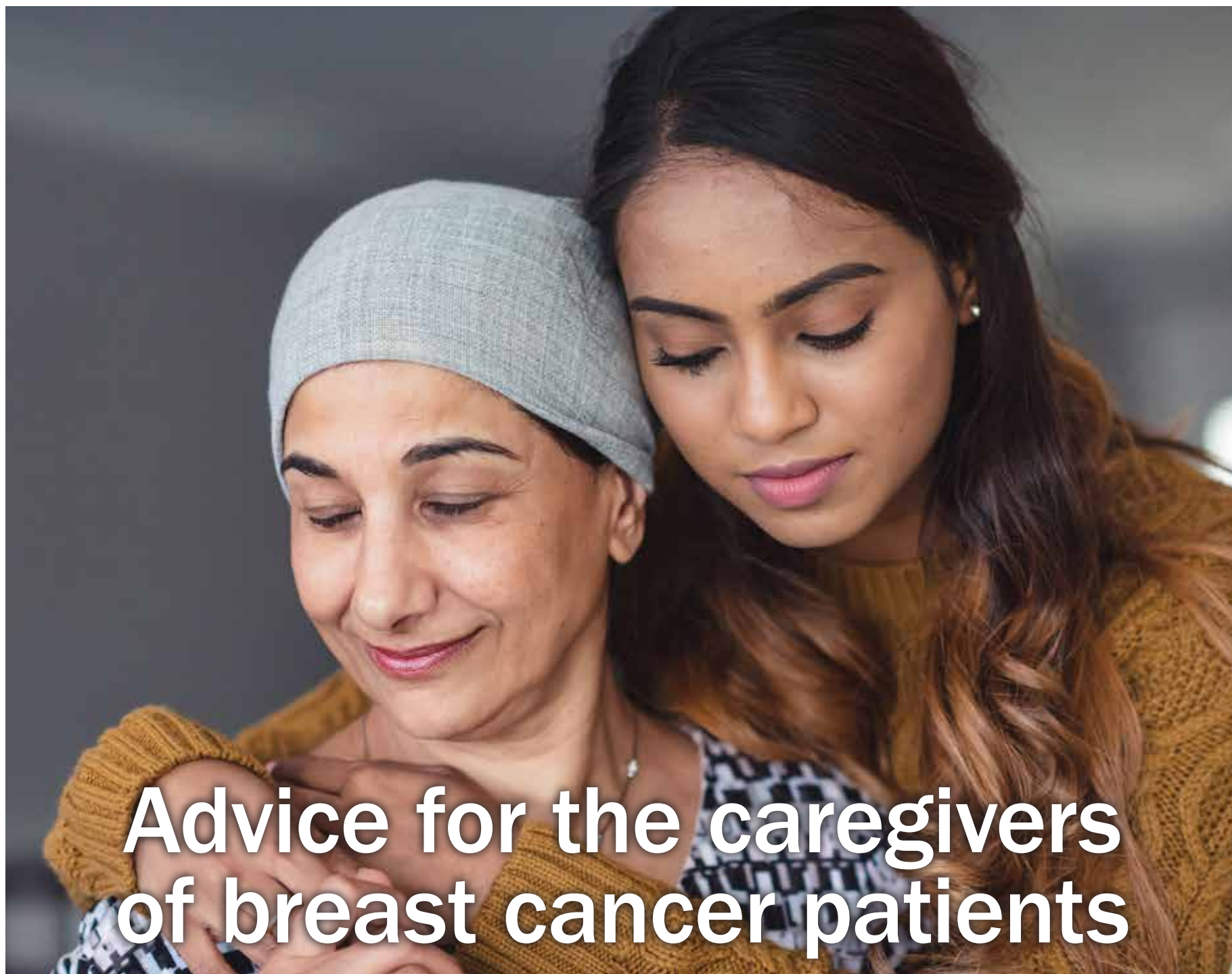
It’s also worthwhile to learn your personal risk factors. That means talking to your physician about your medical history and any family history of cancer.

“Some people may further benefit from genetic counseling, which may reveal a need for additional tests,” adds Reitherman.

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Advice for the caregivers of breast cancer patients

BY LISA IANNUCCI

CTW FEATURES

Being diagnosed with breast cancer comes with its own challenges that a patient must navigate. One of those challenges is asking for help when they need it during surgeries and chemotherapy and radiation treatments. Being a caregiver for a breast cancer patient – whether a professional, family member or friend – can also have its challenges. Many breast cancer patients hate asking for help and caregivers try to figure

out the best way they can lend a hand and support their loved one.

So, we asked several breast cancer patients to share advice they would give to a caregiver who is stepping into the role for the first time.

● **Ask:** “The biggest thing is sometimes you just want to sleep and not have company, so as a caregiver always ask if the survivor would like for you to sit in the other room while they rest,” advises Stephanie Scalise, a breast cancer survivor and mother of three girls, as well as founder of the event Strides for Survivors that benefits the

Atlanta-based nonprofit TurningPoint Breast Cancer Rehabilitation; myturningpoint.org. “Ask before cleaning up too,” she said. “Please do not take it upon yourself to clean and organize while the survivor is resting. Nothing is worse than trying to find something the caregiver ‘put away’ for you.”

● **Ask the right way:** Jen Coken was diagnosed with breast cancer in August of 2020 and was caretaker for her mother who passed away from ovarian cancer in 2011. Understanding it from both sides, Coken explains that it isn’t always

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easy to say what you need when you are sick.

“Often people would ask: ‘What can I do for you,’ but I didn’t always know,” said Coken, a leadership coach. “But if someone said, ‘what can I do for you right now?’ then I had an answer. A coca-cola to settle my stomach. A hug. Tell me a joke. I just need someone to listen to me right now or cry with me, etc.”

- **Be a designated driver:** Liz

Benditt is a four-time cancer survivor and said that flowers and rotisserie chicken dinners are well meaning, but what she needed was non-prescription items to help her muster through treatments. “When I was going through breast cancer radiation treatment, I was frantic for aluminum-free deodorants that actually prevented sweat stains, lotions that could soothe my burned skin, and sweat-free ice packs that were small



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enough to wear under my clothes,” she said. “Doctors can’t write prescriptions for these items, but they are highly necessary.”

“Cancer patients have tons of medical appointments from post-op checkups to radiation and chemotherapy treatments,” said Benditt. “If you have a flexible schedule, offering to drive them or keep them company at medical appointments is another genuinely helpful way to provide support. Here’s how to make the offer without being obtrusive: ‘I’ve got a flexible schedule on Tuesdays and Thursdays. Let me know if you are too exhausted to drive or if you’d like some company during your appointments — if so, what time should I pick you up?’”

● **Be the point person:** Peggie D. Sherry is a two-time breast cancer survivor and founder and CEO of Faces of Courage (<https://facesofcourage.org/>), a cancer camp for adults and children. “Offer to be a point person where you screen and accept/decline others’ visits and help offers,” she said. “It can get dif-



ficult for the patient to share the details repeatedly. With caringbridge.org, you can directly and accurately communicate without having to repeat the story status every time the phone rings.”

● **Offer to create and manage a**

schedule: Sherry also suggests creating and managing the patient’s schedule for meal deliveries, rides to chemo, visits from friends, etc., and recommends websites such as takehomeameal.com and lotsahelpinghands.com. “Make sure to ask your

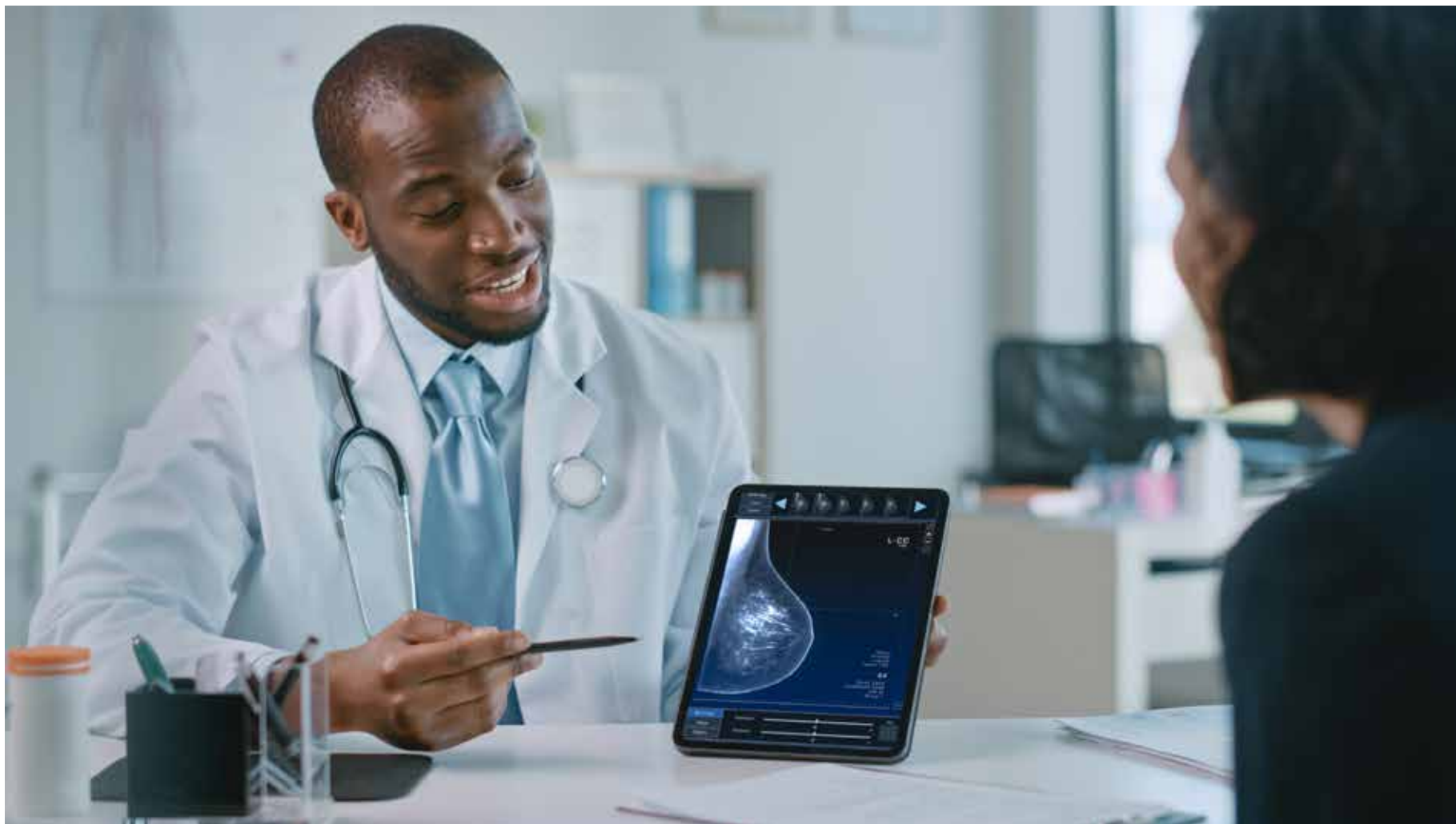
friend in advance if there are any dietary restrictions or they are following any guidelines,” she said. “Then stay for a visit or just drop off the food if they’re not up for it (a cooler left outside the front door is perfect for this).” For more tips in English and Spanish, visit the Faces of Courage website.

● **Wait:** Wait? Yes, wait. I am a two-time cancer survivor, diagnosed with triple negative breast cancer in 2017. My own personal advice to caregivers? Wait. Definitely help out at all times but remember that not many families and friends help later in the journey. That was when the fatigue from radiation and chemo hit me harder than it did in the beginning. The patient might need even more help months into their treatment plan, so don’t burn out too early. Being a caregiver is extremely tiring, but it can often be a lengthy process that might demand more of your attention even later.

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Finding the right oncologist for your breast cancer journey

BY LISA IANNUCCI
CTW FEATURES

When I was diagnosed with stage two triple negative breast cancer in 2017, I was referred to a certain oncologist for my chemotherapy treatment.

I asked around and heard things like, “You must go to her!” and “She’s fantastic.” I trusted their recommendations and they were right. She was attentive and caring and never stopped being a champion in my corner. This oncologist made the hardest parts of my treatment much easier because I knew I could call

“I wanted an oncologist who didn’t forget me and who really wanted to save my life.”

Libby Hansen
Patient

her at any time and question or say anything without judgment. When I was struggling emotionally and wanted to just quit treatment, she spent time with me talking it out and calming me down.

When she left the practice and joined another one an hour away, I tried the doctor who took over for her, but after he and I argued over

an insurance issue, I decided to follow my favorite oncologist to her new location. Now that she’s relocating several states away, it has become time to find another new one. But how do you find the right one or switch if the one you have just isn’t working out?

Libby Hansen experienced a difficult oncologist during her journey.

“He was not a caring physician at all, argued with me and even forgot which breast had the cancer,” said Hansen, who was diagnosed with stage 3 breast cancer in July 2017. She has since had a double mastectomy in 2018 and became stage 3 in May 2018.

“When my breast cancer metastasized to my left femur and numerous other spots, he told me he couldn’t help me and referred me to the Mayo Clinic. I was thankful he did because it saved me from having to tell him I needed someone new,” she said. “I wanted an oncologist who didn’t forget me and who really want-

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ed to save my life.”
It took quite some time to get an appointment at the Mayo Clinic, so Hansen found another oncologist in the meantime. “I can’t tell you how wonderful my current oncologist is, and I thank him every time I see him

for saving my life,” she said. “When he heard that Keytruda along with radiation was having some success for triple negative breast cancer he wasn’t afraid to give it a try. I became NED (no evidence of disease) in January 2021 and am still

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NED today.”

Stephanie Scalise, a breast cancer survivor and founder of Strides for Survivors, said her oncologist had the knowledge, but lacked the bedside manner. “He would answer questions with one word,” she said. “The new oncologist was willing to talk with me, answer my concerns and reassure me that my questions were valid.”

Jen Coken said her oncologist didn’t look her in the eyes when she spoke. “She spoke very clinically and at one point said something like, ‘And what does our Oncotype score tell us?’ as if we were in 1st grade. I grabbed my friend’s hand and said nothing. She also had a nurse with her and instructed her to touch my breasts without my consent. It was just weird. She is highly regarded in her field, but her bedside manner was not so great.”

The friend who went to the appointment with Coken advised her to get a new oncologist because it would be a long-term relationship. “The oncologist I wound up with was personable,

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put me at ease, and really listened, that is what I looked for.”

To find an oncologist you can ask for recommendations from a friend, like Coken did, or you can search online in such free searchable databases as the American Society of Clinical Oncology (ASCO), The American Board of Medical Specialties, The American Medical Association, and the American College of Surgeons.

The American Cancer Society suggests choosing a doctor who has experience treating your type of cancer, who is part of your health insurance plan and/or accepts your health insurance and who has privileges at a cancer center or hospital that you’re willing to use.

Finally, and probably most importantly, choose a doctor you feel comfortable with and leave one if you don’t feel comfortable. You can ask for a telehealth or in-person consultation to get a feel for whether your relationship will be a fit.

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What to ask

- The American Cancer Society says to ask yourself these questions before deciding on an oncologist:
- Did the doctor give you a chance to ask questions?
 - Did you feel the doctor was listening to you?
 - Did the doctor seem comfortable answering your questions?
 - Did the doctor talk to you in a way that you could understand?
 - Did you feel the doctor respected you and what is important to you?
 - Did the doctor mention treatment options and ask your preferences?
 - Did you feel the doctor spent enough time with you?

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On the web

For more information on finding the right oncologist, visit: <https://www.cancer.org/treatment/treatments-and-side-effects/choosing-your-treatment-team/where-to-find-cancer-care/choosing-a-cancer-doctor.html>

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