Early Onset Breast Cancer

Learning How to Advocate for Yourself

Three months after getting married, Jennifer Feldman was diagnosed with breast cancer. Prior to treatment, her oncologist advised her against fertility preservation because she was a young, healthy 27-year-old and did not think her treatment would have an adverse effect on her fertility. Five years after her diagnosis, Jennifer found another small lump on her collarbone. Her doctor thought it was something they could keep an eye on, but Jennifer insisted that she get scans to understand the problem immediately. The results showed three new tumors. Jennifer decided to find a new doctor to get the care she knew she needed. After completing a new treatment plan, she is now a two-time breast cancer survivor.

After her second diagnosis Jennifer and her husband Jay faced obstacles to their plans to build a family from her cancer diagnosis and treatment. They chose surrogacy as a pathway to parenthood. Throughout Jennifer’s cancer journey, she learned how to recognize changes within her body and advocate for herself.

“At that time, fertility treatment was not on anybody’s to-do list of what we should talk about,” she said. “I was so young and newly married. When it did work its way into the initial conversation, my first oncologist was adamant that I should not do anything, not even preserve eggs. It was really not something that people advocated for us and unfortunately at the time, we didn't know we needed to advocate harder for ourselves on that issue. I think even to this day that’s a regret that we hold onto and something that we second guess for sure.”

Women like Jennifer who are diagnosed with breast cancer at a young age may not always be aware of the effects some cancer treatments can have on their fertility, nor given the resources they need to make informed decisions about family planning and cancer treatment with that in mind. Providing women with all the facts they need to make health decisions and to advocate for themselves is important.
Who’s at Risk?

While all women are at risk for getting breast cancer, Ashkenazi Jewish women, Black women, and those with a family history of breast or ovarian are most at risk for a breast cancer diagnosis at a young age. According to the CDC, nearly 1 in 10 women diagnosed with breast cancer are under the age of 45.

Breast cancer in young women is more likely to be found at a later stage, and is often more aggressive and difficult to treat. Time is of the essence for young women at risk for early onset breast cancer. All young women need to know their family health history and understand their risk for breast cancer at a young age.

Barriers to Care

Before, during and even after diagnosis, young women face unique barriers to care.

- **Racism and Barriers for Young Black Women:** CDC has declared racism a serious threat to the public’s health. Racism – both interpersonal and structural – is a barrier to care for Black women and other women of color. Black women under the age of 35 have breast cancer rates that are two times higher than their white counterparts, but they may have difficulty finding health care providers that they can speak up to and trust. They often face bias and the effects of racism in their care.
- **Long Wait Times for Appointments:** Some women may experience longer wait times for appointments making it more difficult to schedule screenings and other appointments to help reduce breast cancer risk or catch breast cancer in its early stages. This may be compounded by appointment backlogs that have occurred in some places during the COVID-19 pandemic.
- **Geographical Barriers:** Some women, especially those in rural areas, do not live in close proximity to care.
- **No or Under Insured:** Some young women have no health insurance or are under insured, making it financially difficult to receive diagnostic care or treatment.
- **Financial Burden:** Breast cancer can come with unique financial burdens including transportation, costs of treatments and medications, and potential disruptions to employment.
- **Fertility Preservation:** Some breast cancer treatments can affect a patient’s fertility. While there are many pathways to parenthood, this can be challenging for those who want the option to have biological children. Health care providers treating the cancer are often focused on life-saving care for their patients. Proactive discussions about the potential effects of treatment on a patient’s fertility may not be priority. Understanding these effects before the start of treatment can give patients the opportunity to make decisions while understanding the different implications.
Managing Your Risk

How Can Breast Cancer Risk Be Reduced?

The most important steps young women can take toward lowering their risk for breast cancer is learning about their family history and sharing what they learn with a doctor. If young women have a family history, they should ask their doctor if genetic counseling and testing is right for them. If they are found to have a risk of hereditary breast and ovarian cancer, they can be in the driver’s seat of their own health. There are steps they can take to lower their risk including surgery, medication, and increased screenings.

All women can be proactive about lowering their risk by:

- Knowing family history and seeking genetic counseling
- Maintaining a healthy weight
- Drinking less alcohol
- Getting regular physical activity
- Breastfeeding their children, if possible

The COVID-19 pandemic has made prevention even more urgent as routine health appointments and screenings have been interrupted.

In addition to understanding risk and learning how to lower their risk for breast cancer, young women should also be aware of signs and symptoms of breast cancer. Not all young women diagnosed with breast cancer have a known family history. Women of all ages should know how their breasts normally look and feel and talk to a healthcare provider immediately if they notice anything unusual that concerns them.

Life Before, During & After Diagnosis

Young women face unique challenges when facing a breast cancer diagnosis.

- Feelings of isolation and loneliness associated with having cancer at a young age.
- Effects that some breast cancer treatments may have on fertility and how this can influence plans to build their families in the future.
- Body image and sexual health concerns, including concerns about sexual intimacy and dating.
- Financial burdens of cancer treatment and the potential disruption of employment; the impacts of a breast cancer diagnosis on their career.
- For some, an added burden of caring for young children during treatment and managing the emotional toll that their diagnosis may have on their young children and families.

Treatment for breast cancer can have a disproportionate impact on the lives of a young women with a diagnosis. Young women diagnosed with breast cancer should work closely with their health care team to understand the impacts of their breast cancer treatments.
Resources

Information on breast cancer risk, how to reduce risk, screening, genetic testing and more information on early onset breast cancer can be found below:

- [https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/hereditary_breast_cancer/talking-family-history.htm](https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/hereditary_breast_cancer/talking-family-history.htm)
- [https://www.cdc.gov/cancer/breast/basic_info/screening.htm](https://www.cdc.gov/cancer/breast/basic_info/screening.htm)
- [https://www.cdc.gov/cancer/breast/basic_info/prevention.htm](https://www.cdc.gov/cancer/breast/basic_info/prevention.htm)
- [https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/index.htm](https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/index.htm)
- [https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/resources/infographics/takeaction_infographic_aa.htm](https://www.cdc.gov/cancer/breast/young_women/bringyourbrave/resources/infographics/takeaction_infographic_aa.htm)