FALL 2018 INSIGNATION OF THE PALL 2018



With you, for you.

NUTRITION AND BREAST CANCER Eating Well After Diagnosis

BY SUSAN FITZGERALD, FOR LBBC



hen Brenda Levin of Philadelphia was diagnosed with metastatic (stage IV) breast cancer in 2017 at age 40, she read every article she could find about the effect of diet on cancer.

She wanted to make sense of how she, someone who followed a healthy diet and lifestyle, could end up with breast cancer. More important, she wanted to know what diet she should follow to keep the breast cancer from growing more.

As a trained practitioner of acupuncture, Chinese herbal medicine, integrative nutrition, and shiatsu massage, Brenda thought she was prepared for whatever life threw at her. But her diagnosis made her rethink what she learned, particularly about food. Should she swear off sugar? Avoid alcohol and caffeine? Never eat her favorite treats again?

"I was at a healthy weight with a healthy diet," says Brenda. "I have always exercised. ... Plus, I have always focused on getting ample amounts of vegetables, protein, a good balance of carbohydrates, some fruits and healthy fats into my daily food regimen."

Brenda's research showed her two important things. First, she had done nothing wrong to get cancer. Second, there were no magical foods that make cancer disappear. Since then, she has focused on eating a variety of fresh foods, cooking with healthy oils and allowing herself an occasional glass of wine or ice cream.

"I tell myself not to overthink or stress about anything," she says. "If I am going to eat a chocolate croissant, I am going to enjoy every morsel of it, stress-free."

The Truth About Food

Some people might find it reassuring to be handed a special cancer diet, a firm list of what foods to eat and not eat after a cancer diagnosis. But nutritionists say there is no such thing as a foolproof, cancer-busting diet, despite many popular claims that people with cancer should absolutely avoid refined sugar and alcohol and other "forbidden foods" that frequently pop up in a Google search.

Instead, nutritionists advocate for a well-balanced diet rich in vegetables and fruits that satisfy the senses and serve up healthy nutrients. That approach can also help avoid excessive weight gain, which research has linked to certain kinds of cancer.

"While there are absolutely so many things you can do with your everyday diet to ... help support your immune system and help support your body ... we want to get away from the mindset that there is one prescriptive diet that everyone should follow," says **Stacy Kennedy, MPH, RD, CSO, LDN**, a senior nutritionist at Dana-Farber Cancer Institute in Boston.

For example, Ms. Kennedy likes the dietary recommendations for cancer prevention and survivorship outlined in a new report by the American Institute for Cancer Research, which call for "a diet rich in whole grains, vegetables, fruits and beans." She generally advises people to follow a Mediterranean-style diet, which features a lot of plant-based foods (fruits and vegetables), whole grains (such as whole wheat, quinoa and oatmeal), legumes (like peas, beans, lentils and chickpeas) and nuts.

Continued on page 8

INSIGHT STAFF

Eric Fitzsimmons, *Editor* Nicole Baxter, MA, *Staff Writer, Programs* Jessica Betts, *Staff Writer, Advancement* Kristine Conner, *Contributing Writer* Susan FitzGerald, *Contributing Writer* Sandra E. Martin, *Staff Writer, Advancement* Julia Wilson, *Staff Writer, Marketing*

LBBC STAFF

Jean A. Sachs, MSS, MLSP Chief Executive Officer

Jessica Albano Kathy Arocho Lynn Folkman Auspitz **Emily Bamforth** Joanne Bursich Catherine Cutuli Margaret Epler Bernadette Foy Amy B. Grillo Janine E. Guglielmino, MA Melissa Hamilton Arin Ahlum Hanson, MPH, CHES Madison Hughes Vicki Klopp Kendra Lawton-Ajuba Kristen Leinheiser Ingrid Mapanao **Becky Mastin** Mary Beth Mills, MS Catherine Ormerod, MSS, MLSP Madison Pfeiffer Sharon Sood Celeste C. Terrinoni, CPA Christine Ware, MEd

Laura Kowal, MPT, JD Chair, Board of Directors

Living Beyond Breast Cancer's *Insight* newsletter is designed for education and information purposes only. The information provided is general in nature. For answers to specific healthcare questions, consult your healthcare provider, as treatment for different people varies with individual circumstances. The content is not intended in any way to substitute for professional counseling or medical advice.

LIVING BEYOND BREAST CANCER®

40 Monument Road, Suite 104 Bala Cynwyd, PA 19004 Breast Cancer Helpline (888) 753-5222 Tel: (855) 807-6386 Fax: (610) 645-4573 Email: mail@lbbc.org Website: LBBC.ORG Blog: lbbc.org/blog

f facebook.com/ livingbeyondbreastcancer

@LivingBeyondBC

Instagram.com/livingbeyondbc

- youtube.com/LBBC1991
- pinterest.com/livingbeyondbc

Design: Masters Group Design

Dear Friends,

As we transition away from the long days of summer I hope you take a few deep breaths before the busy fall season begins.

This issue of *Insight* provides some clear examples of how the world of cancer treatments and side effect management is always changing.

It showcases how LBBC translates complicated health information so you can better communicate with your healthcare provider and play an active role in your treatment and care. This edition of the newsletter digs into the introduction of biosimilars in breast cancer treatment. We know it is important you understand how these big-picture decisions may impact you and may apply to your unique situation.

Also in this issue, we share thoughts from women who have been diagnosed with breast cancer about what it is like to experience Breast Cancer Awareness Month. The many promotions and activities around breast cancer during October elicit a range of responses from people; everyone is different. This newsletter shares a diversity of perspectives and we appreciate everyone's candor.

As always, the LBBC program and event calendars are full this fall — from the 2018 Living Beyond Breast Cancer Conference in September to our Butterfly Ball in October to a live webcast Breast Cancer 360 program on breast reconstruction in early November. LBBC is committed to providing you trusted information and a supportive community all year. Please remember our website and blogs are updated regularly, and our Breast Cancer Helpline volunteers are ready to take your calls 5 days a week. Go to lbbc.org/helpline or call (888) 753- 5222; tell us more about the questions you have and we will match you with a trained volunteer.

Wishing you all good things in the coming months and as always if you have suggestions or comments please let us know at mail@lbbc.org.

Jean A. Sachs, MSS, MLSP CEO

In This Issue

- **1** Eating Well After Diagnosis
- **3 News & Education**
- 4 Biosimilars Are Coming
- 6 What Breast Cancer Awareness Month Means to Me
- **10 Our Corporate Partners Make an Impact**

News & Education

BY JULIA WILSON

Breast Cancer 360: Reconstruction

Join us November 12 for our **Breast Cancer 360** program exploring breast reconstruction. Learn about your options and possible side effects to help make the best decision for you.

Hear from our expert as well as first-hand stories from women who have experienced reconstruction. Attend live in Philadelphia or via web stream. Learn more at lbbc.org/reconstruction360.

Parenting With Breast Cancer? Let Us Help

If you're a parent, one of the biggest concerns after being diagnosed with breast cancer may be how to talk to your children about your diagnosis, treatment and the changes that may lie ahead. In addition to communicating with your children, you may face other unexpected parenting challenges. In our thoughtfully curated parenting section you'll find tips and resources to help you and your family. From information on caring for your child's mental health to links for camps and support groups for kids, we have a wide range of resources for your needs. Our **Reading for Reassurance** program offers free books for children and parents to help each better communicate with one another about breast cancer.

To learn more about our parenting resources visit lbbc.org/parenting.



Breast Cancer Helpline

A breast cancer diagnosis can be a trying time in your life. Finding a place of solace and understanding can be difficult. Our **Breast Cancer Helpline** connects you with a trained volunteer who has been diagnosed with breast cancer for emotional support, guidance and hope. Whether you are recently diagnosed, in treatment, years beyond treatment, or a loved one, you are not alone, and we're here to help.

Our volunteers have first-hand experience with breast cancer and understand your struggles and emotions. In addition to listening to you and discussing your feelings and concerns, our volunteers can direct you to resources such as support groups, wig shops and financial help.

You will be matched with a volunteer who has had a similar experience to you and is fully trained in sensitively assisting with your questions and needs.

When you're ready to talk, we're ready to listen. Visit lbbc.org/helpline to connect today. —





A NEW CLASS OF MEDICINES: Biosimilars Are Coming

BY KRISTINE CONNER, FOR LBBC

ou're probably familiar with generic medicines, which are less expensive copies of brand-name medicines. For headache relief, you can buy a brand-name product such as Tylenol or its generic, acetaminophen. There are even generics for some breast cancer medicines: if you have hormone receptor-positive disease, for example, you might take a generic instead of a brandname aromatase inhibitor.

But some medicines can't be copied exactly, so generic versions can't be made. Scientists are working to change that. Biosimilars are copies of biologics, medicines made from living cells rather than chemicals. These cells might come from an animal, plant, bacteria or other microbe. In breast cancer, one of the best-known biologics is trastuzumab (Herceptin), which is an antibody originally produced in mouse cells and used to treat HER2-positive breast cancer. This antibody targets the protein HER2 on the surface of breast cancer cells, stopping it from spurring on cancer growth.

Biosimilars are hard to make: Living cells are more complex than chemicals to recreate, and they can't be copied exactly as chemicals can. It's happening, though — and, like generics, biosimilars are intended to be less expensive than brand-name biologics. New biosimilars for breast cancer treatment should start rolling out in 2019, giving people with certain types of breast cancer more options and helping them save on costs.

What Are Biosimilars?

Think about your favorite brand of bottled drink, such as soda or iced tea. It tastes reliably the same every time since the formula doesn't change. It's different when you're ordering a glass of wine, such as cabernet or chardonnay. You know basically what that type of wine will taste like, but there will be some variation each time. The winery's growing conditions, location, and process can all affect the final result.

This is one way to understand the difference between generics and biosimilars. A generic medicine uses the same active ingredients and chemical structure as the brand-name version. But manufacturers cannot copy a biologic medicine exactly because the living cells they use constantly change. That's why the copies are called biosimilars: They're similar enough to the original medicine to work equally well.

"Copying a biologic is more difficult because of the way they are made, using living material," says **Alison Stopeck, MD**, a medical oncologist and breast cancer specialist at Stony Brook Medicine in New York. "Even with an original brand-name biologic, like Herceptin, there can be very small differences from batch to batch. I don't think people always realize that."

The U.S. Food and Drug Administration requires a biosimilar to go through a rigorous testing process before it can be researched

in humans. Then it has to be compared to the original biologic in people. The studies must show that the biosimilar gives a similar result in treating the condition, with similar safety and side effects.

Biosimilars in Breast Cancer

Some biosimilars are already FDA-approved for breast cancer care. You might even have had one, either in a clinical trial or for side effects. These are:

- Trastuzumab-dkst (Ogivri), biosimilar of trastuzumab (Herceptin), approved in December 2017 to treat HER2positive breast cancer but not yet available to the public
- Filgrastim-sndz (Zarxio), biosimilar of filgrastim (Neupogen)
- Pegfilgrastim-jmdb (Fulphila), biosimilar of pegfilgrastim (Neulasta)

Both filgrastim-sndz and pegfilgrastim-jmdb are used to boost white blood cell counts during chemotherapy.

Each biosimilar's trade name includes the name of the original medicine (such as "filgrastim"), along with a fourletter code unique to each manufacturer ("sndz" in "filgrastim-sndz," above). This way, as more versions of the same medicine come into use, it will be easier to identify which version of the medicine is being used.

How Do I Get A Biosimilar?

Despite FDA approval for some biosimilars, their use in breast cancer care has been slow-growing.

How quickly trastuzumab-dkst will come into use remains to be seen. Genentech, maker of Herceptin, holds a patent that doesn't expire in the U.S. until 2019. Patents allow companies to be the sole maker of a product for a set amount of time. Researchers are testing other biosimilars of trastuzumab in the meantime, such as CT-P6 and SB3.

Whether you'll be treated with a biosimilar will probably depend on what health insurance companies decide, says **Douglas Yee, MD**, breast cancer specialist and director of the Masonic Cancer Center, University of Minnesota. Like generics, biosimilars will likely cost less than the brand-name medications, which should make them appealing to insurers.

"In clinical practice we typically use what insurance companies will cover," Dr. Yee says. But he doesn't see that as a bad thing, and he wouldn't hesitate to recommend a biosimilar. "As far as I can tell, [the FDA has] done a good job of making sure the composition is similar enough that it does not have any impact on outcomes."

The approval of trastuzumab-dkst was based on 2017 results from the HERITAGE clinical trial. Researchers randomly assigned nearly 460 people with HER2-positive breast cancer to receive either trastuzumab or trastuzumab-dkst along with taxane-based chemotherapy for 24 weeks. The findings showed that the original medicine and the biosimilar had similar effectiveness against the cancer and similar rates of common side effects. In June 2018, the researchers shared 24 more weeks of encouraging results.

If you are already receiving trastuzumab for HER2-positive breast cancer, it's unlikely your doctor will switch you to trastuzumab-dkst or other Herceptin biosimilars when they become available. This is because the FDA has not said these medicines are "interchangeable" with trastuzumab, a rating it typically gives to generics, according to Jenna Carmichael, PharmD, a clinical pharmacist at Geisinger Cancer Institute in Wilkes-Barre, Pennsylvania.

"Our thinking is that if someone is [already] on treatment with a brand-name biologic such as Herceptin and they're responding, we'd keep them on it. But with new patients, there might be a discussion about whether they take the original medicine or the biosimilar," says Dr. Carmichael.

A generic medicine uses the same active ingredients and chemical structure as the brand-name version. But manufacturers cannot copy a biologic medicine exactly because the living cells they use constantly change. That's why the copies are called biosimilars: They're similar enough to the original medicine to work equally well.

How Biosimilars Could Change Treatment

Unlike most new medicines, biosimilars aren't likely to change outcomes. But that's OK: their goal isn't to make treatment better, but to drive down the high cost of biologics. One year of Herceptin has a price tag of about \$75,000. The cost is a huge burden for people who either don't have insurance or have a plan that doesn't cover the entire cost.

"Biosimilar manufacturers benefit from the work that another company has already done. That is how you get cost savings to the patient. But biosimilars are still pretty expensive to make, so we'll see what the savings actually are," says Dr. Carmichael.

"What biosimilars do have working in their favor is that a lot of them are already being used in Europe, safely and with good success," she adds.

In Europe, where healthcare costs are mostly paid through governments, efforts to develop biosimilars started in 2006. Prices are running about 25 to 50 percent lower than the original biologics. In the U.S., biosimilar development didn't get a push until 2009, after the Biologics Price Competition and Innovation Act passed as part of the Affordable Care Act. It created an approval pathway process for biosimilars. Eleven biosimilars have been approved in the U.S. for conditions such as cancer, arthritis and gastrointestinal diseases — with more expected as patents on biologics expire.

"I am a big believer in biosimilars," says Dr. Stopeck. "Hopefully they will help decrease the cost of these enormously expensive medications. And worldwide, this should allow more people in other countries the opportunity to receive these lifesaving therapies." She suspects that some patients with the resources to do so might insist on paying extra to receive the original medicine, but "I'd go with the more cost-effective drug if it has the same result."

Genentech holds patents on two other HER2-targeting therapies that work with trastuzumab: ado-trastuzumab emtansine (Kadcyla), a combination medicine of Herceptin chemically linked to chemotherapy, and pertuzumab (Perjeta), a medicine used in combination with Herceptin and chemotherapy. These patents will keep biosimilars from being used in adotrastuzumab emtansine and with pertuzumab for the time being. Also, there isn't enough research yet to know whether a biosimilar could be substituted for trastuzumab in these therapies.

"These aren't medications you walk into a drugstore and purchase. You would get them in a hospital or treatment center," Dr. Yee adds — which makes it easier to ask what exactly you're getting and why. If it's a biosimilar, you can talk with your treatment team about what that means for you.



What Breast Cancer Awareness Month Means to Me

BY: ERIC FITZSIMMONS

Every year, people, companies and organizations around the country recognize October as Breast Cancer Awareness Month. The occasion brings a wave of attention to breast cancer, but many of those affected have mixed feelings about it.

Here, four women share their impressions of Breast Cancer Awareness Month: what is good about it, what they hope for it and what frustrates them.

Dara Insley, 48 Joint Base Pearl Harbor-Hickam, Hawaii

Diagnosed with stage IIIc hormone receptor-positive breast cancer

I am equally divided between loving and hating Breast Cancer Awareness Month.

What I hate the month for:

I hate that the whole month is sexualized with memes and ads that make breast cancer out to be sexy. I have many friends living with metastatic breast cancer, so it's potentially a whole body disease. It's not just about breasts.

I also hate that wherever I go there is another pink ribbon on another product that may or may not actually support any kind of cancer help. I'm already aware and dislike the visual reminders of my own disease!

On the other hand, I am frustrated with everyone hating Breast Cancer Awareness Month because their X, Y or Z cancer/ disease/cause doesn't get the same attention. Just because I got breast cancer and it's popular for a month every year doesn't mean I don't care about other causes.

What I love the month for:

It has caused many a woman to remember her self-exams, to get a mammogram, or to see her doctor about "this lump," which is exactly what good comes directly out of the month: awareness that it can be happening in your own body, not that it happens only to other people!

And, that some of the products do support various good and worthy breast cancer causes like Living Beyond Breast Cancer.

Wanda Johnson, 62 Houston, Texas

Diagnosed with stage IIa, hormone receptor-positive, HER2-positive breast cancer

Breast Cancer Awareness Month is nationally designated for breast cancer survivors, advocates, caregivers, family, friends and healthcare professionals to recognize the triumphs, treatment successes, hope and quality of life of those impacted by the disease. I continually hope Breast Cancer Awareness Month activities will shift to focus on education and spreading hope, two messages I try to highlight as a breast cancer survivor and advocate.

Historical events have played an important role bringing breast cancer to the limelight, sharing the message that it is no longer a taboo subject, highlighting the importance of research and need for funding, and let's not forget fundraising for the cause.

It has been extremely important to focus on the role of early detection for the prevention and successful treatment of breast cancer. However, so much more needs to be done to educate and encourage those impacted so they can take their journeys from a perspective of hope rather than despair.





Ilene Fogelman

There needs to be more messages about access to care and the types of resources available in the clinic and beyond to assist survivors' progress through their journeys with the hope of a better quality of life. Add to this list education about the availability and importance of participating in clinical trials and research studies while in treatment and beyond, because every person who receives a diagnosis of breast cancer is a beneficiary of previous successes and should participate at some level as a contribution to those who will be diagnosed after them.

Ilene Fogelman, 51 Weston, Florida

Diagnosed with stage IV, hormone receptor-positive breast cancer.

When I was diagnosed early-stage in April 2013, I loved October. I loved the Pink. I supported it blindly. I also did not know anything about stage IV and how it could occur any time after early-stage. I shared the hearts. I had the T-shirt. I organized the pinkification at work. September 2016 pushed me into reality. I was confirmed stage IV with metastasis to the lining of my lung and scapula. I started research and while there was information out there, it wasn't coming from the same organizations pushing awareness. The money trail wasn't going to research to cure stage IV, the only stage where women die. People around me, even others who had early-stage breast cancer, wore pink and talked about saving the tatas. There is nothing cute or sexy about cancer. If I could just be on a deserted island September through October, I would be happy. I am tired of people calling me a warrior or a survivor. It's exhausting having to constantly explain I am terminal. The color pink has become a color I hate. I am tired of being made aware of something that 113 people die of daily. I know. I live it, and it doesn't have a color.

Jessica Shephard, 36 Tampa, Florida

Diagnosed with stage IIb, triple-negative breast cancer

To be honest, my first reaction to Breast Cancer Awareness Month was ... nothing. The messaging on most campaigns I've seen is still about getting checked early, or it's a billboard with a silhouette of hands and one pair is a lovely pink. What is that really saying? I got checked but I still got breast cancer and I still went through treatment.

Since my own diagnosis of cancer, I have started to think there is nothing wrong with Breast Cancer Awareness Month, but the "awareness" piece has gotten washed out and it doesn't go deep enough into the disease. It barely skims the surface. I know other survivors who share the same sentiment.

I share the names of those organizations that directly helped me during my diagnosis, treatment and even post-cancer on my blog and on my social media pages. I feel it is especially important to share these during a time when many are adding pink ribbons to their profile picture and while our pizza is delivered in cute pink boxes.

Before handing over money to an organization that says it's for "breast cancer," I ask that my friends and followers take an extra 5 minutes to use sites such as Charity Navigator [charitynavigator.org] to see how that organization distributes its donations.

Since my own diagnosis of cancer, I have started to think there is nothing wrong with Breast Cancer Awareness Month, but the "awareness" piece has gotten washed out and it doesn't go deep enough into the disease.

AMERICAN INSTITUTE ON CANCER RESEARCH CANCER PREVENTION RECOMMENDATIONS

- 1 Be as lean as possible without becoming underweight.
- 2 Be physically active for at least 30 minutes every day.
- **3** Avoid sugary drinks and high-calorie foods.
- 4 Eat more of a variety of vegetables, fruits, whole grains and legumes such as beans.
- 5 Limit how much red meat you eat (such as beef, pork and lamb) and avoid processed meats.
- 6 If consumed at all, limit alcoholic drinks to one per day for women, or two per day for men.
- 7 Avoid salty foods and foods processed with sodium.
- 8 Don't rely on supplements to protect against cancer.
- 9 NEW MOTHERS: Breastfeed babies exclusively for up to 6 months and then add other liquids and foods.
- **10** CANCER SURVIVORS: After treatment, follow the recommendations for cancer prevention.

What About Soy?

The question of soy often comes up in relation to breast cancer. Some people worry because soy contains substances that make it similar to the hormone estrogen, and estrogen encourages some breast cancers to grow. But there are research findings that suggest soy may be protective for the body.

"According to research, eating natural foods that have soy is perfectly healthy and does not carry a risk," Ms. Kennedy says. Tofu is one example. Others are soybeans or soy nuts, soy milk, and edamame (immature soybeans). Until more research is conducted, she advises against eating or drinking products with concentrated soy or soy protein isolates (heavily processed soy) which can be found in protein powders and some protein bars or meat-free products like meatless burgers, vegetarian chicken or "meat alternative." Read ingredient lists carefully on products to see if they contain soy protein isolate, Ms. Kennedy says.

Learning to Balance Your Plate

People with cancer are often motivated to make dietary changes, but Ms. Kennedy says it's important to stay balanced.

"You don't always have to eat salads and grilled fish," she says. "In real life, you are going to a barbecue or a graduation party or the beach and at times you're going to eat foods that appear to be 'off plan.' In reality, that's what healthy eating and balance is all about, trying to keep nutrition in the big picture of your overall wellness."



Gwen Ryan, 58, of Gloucester, Massachusetts, was first diagnosed with early-stage breast cancer in 2014 and now has metastatic breast cancer.

"Like most people, I was bombarded with information from well-meaning friends and I also surfed the internet on what to eat and what not to eat," Gwen says. "I remember one day thinking, 'I can't eat anything."

She was grateful when a social worker at Dana-Farber, where she gets her medical care, told her about a new program designed to promote weight loss and healthier eating. At the first session, the instructor made it clear that "there is no 'No List."

"I learned what a healthy plate should look like. One half should be colorful vegetables; the other half was split between a deck of cards worth of protein, healthy grains and carbs and a little fat," she says.

She said the program, which included using a Fitbit activity tracker and a food tracking app, dispelled the myth that sugar equals cancer. It instead urged moderation and mindfulness in choosing and eating food. She learned to stop eating when she felt full.

"I learned that if you are going to have the ice cream, make sure you really enjoy it. Check in with yourself after a few bites to be sure you still enjoy it. If not, put it down or share," Gwen says. Since starting the program she has lost 40 pounds. She's not sure that losing weight and improving her diet will change the course of her breast cancer, but she feels more upbeat and has energy to go to the gym.

"Now I'm not living scan to scan, but I'm living between scans," she says.

Research on diet and cancer can be hard to interpret because of the way studies are designed. Often they are observational, which means they look at health outcomes in large populations as they take place. This is different than studies of new medicines, which are carefully controlled and compare one treatment to another. The end result is that researchers can't establish a direct cause and effect with cancer and diet, but they can see patterns, called associations. Associations that emerge from research can make a convincing case for following some key principles.

Abby Wetzel, MS, RD, LDN, a dietitian at Abramson Cancer Center in Philadelphia, says she urges people with breast cancer to make food choices that mirror the Mediterranean diet because research suggests it can help "reduce your risk of cancer occurrence or recurrence." Ms. Wetzel counsels people to include protein with every meal, whether fish, chicken, nut butters, beans or legumes. She steers them away from white starches, including sugary box cakes, cookies, white pasta and white bread. Cutting back on processed sugar can help prevent insulin swings and may limit inflammation in the body, which research has linked to cancer.

"A lot of research shows that it is sugar's relationship to higher insulin levels and related growth factors that may influence cancer cell growth the most," Ms. Wetzel says. "Many types of cancer cells have plenty of insulin receptors, making them respond more than normal cells to insulin's ability to promote growth."

A rule of thumb is to make your plate as colorful as possible. The more color and less white foods, the less sugar you're likely to eat.

"It is important to choose the correct carbohydrate foods, such as vegetables and fruit, to add more nutritional value to your overall diet," Ms. Wetzel says. "The more color you add to your meals, the better you are going to feel."

Eat Better to Feel Better

Lynne Richmond, 55, a public relations professional in Washington, D.C., met with a nutritional counselor after she was diagnosed with stage III breast cancer 2 years ago. At first they focused on strategies to help with chemotherapy side effects, but now that she is in what she calls "survivor mode," her focus is on eating healthy for life.

"I didn't think there was a magic fix. But I thought eating better could give me a better chance of survival than if I didn't do anything," Lynne says. The plan includes staying away from packaged foods, carbs and sugary desserts as much as possible, and she tries to skip the alcohol, too. She likes leafy greens such as spinach and kale, and blueberries and other fruits that are high in antioxidants.

For **Sheryl Greene**, 51, of Roanoke, Virginia, a cancer diagnosis led to a change in shopping habits. After being diagnosed with stage II breast cancer in 2012, she reflected on what she ate, helped by nutritional counseling she received as part of her cancer care. She came to realize that she ate a lot of canned foods and not enough foods she prepared herself. High-fructose corn syrup, a refined sugar, was in many of her packaged food choices.

Now Sheryl shops almost entirely on the perimeter of the grocery store, where fresh foods are, and avoids the middle aisles. She also likes farmers markets and looks for food marked organic.

"There is always some study that will contradict the previous study," says Sheryl, who works in sales. "At some point you have to just decide, 'What is it that I am going to stick with?"

Sheryl hasn't gotten used to the unwanted food advice from people who know her history. They'll order, and then make a comment like "Oh, you can't have that."

She prefers to view her food choices in a positive light. "I can have it, but I choose not to," she says. \sim



Ask Your Peers



Nermine Prusecki, 45

Manchester, New Jersey

"I usually schedule something fun on the day of the appointment; this way there is something to look forward to that same day."



Teri Bode, 52 Phoenix, Arizona

"Work out! For real! Hike, walk, pump iron, dance, swim ... anything active!!! My saving grace."

How do you deal with anxiety caused by medical appointments?



Julia Reeb, 47 Albany, New York

"I find notebooking a great way to help me stay focused and calm for appointments. A large-format, blank journal is an easy place to keep my calendar with plenty of space for journaling, notes, questions, thoughts, insights and doodles!"

What foods help settle an upset stomach caused by treatment? Let us know at editor@lbbc.org.

Our Corporate Partners Make an Impact

BY SANDRA E. MARTIN



Chico's limited-edition items

very October, companies around the country join Living Beyond Breast Cancer to raise awareness and fundraise for our national programming. Their support is vital, and we love hearing from people who found us through one of our corporate partners. As we move into Breast Cancer Awareness Month 2018, we want to thank some of our supporters for their contribu-

tions to LBBC and the people we serve.

Chico's FAS

Chico's FAS, Inc. has been a strong supporter of LBBC for over 10 years. As Chico's FAS focused its charitable giving to organizations committed to women's empowerment, health and well-being in 2017, it has continued to support LBBC and help our mission to ensure no one has to face a breast cancer diagnosis uninformed or alone.

White House Black Market Butterfly T-shirt

Tara at Home

Cute Couple All

a Flutter mugs

"Chico's FAS and our brands — Chico's, White House Black Market and Soma, have a vision of empowering women at every stage of life's journey. For everyone affected by breast cancer, Living Beyond

Breast Cancer is the best resource we know, providing people with trusted information and a community of support," says **Julie Lorigan**, vice president of investor relations, public relations and corporate communications for Chico's FAS, Inc.

"We are proud to be LBBC's largest corporate partner, helping to raise nearly \$8 million since 2004. We look forward to continuing to build awareness and help raise the critical funds needed so that no one feels alone or without resources."

This October, Chico's will offer four products benefiting LBBC an umbrella, a T-shirt, a pajama set, and a scarf — up to \$250,000. White House Black Market will be selling their limited-edition Butterfly tee to benefit LBBC, up to \$212,000, and Soma will

donate \$5 for every certified bra fit, up to \$112,000, und some with donate \$5 for every certified bra fit, up to \$125,000. We encourage you to stop into any of their stores during October to shop these products, get a bra fitting, and thank them for their support of Living Beyond Breast Cancer. You can also find all the products at chicosfas-cares.com or their brand websites: chicos.com, whbm.com or soma.com.

Tara at Home

This Breast Cancer Awareness Month, **Tara at Home**, an in-home direct sales company that sells stoneware

products, will donate 5 percent of their net proceeds on product sales, with a minimum donation of \$5,000. In addition, the company will donate \$5 for each **Cute Couple All a Flutter Pink Mug** bundle sold.

Joy Gathers, director of marketing for Tara at Home, says, "It just makes sense for Tara at Home to continue their support. All of us in some way have been touched by breast cancer, whether it is a sister, a mother, [a] grandmother or a friend who has been diagnosed. As a company we are always thinking about how we can give back, so we at Tara at Home are honored to announce our partnership with LBBC."

Tara at Home has sales associates around the country letting their customers know about LBBC's programs and services to help make sure women know where to turn after a breast cancer diagnosis. Find the mug set and other products at taraathome.com.

Dr.'s Remedy Enriched Nail Care

Dr.'s Remedy, a nail care and nail polish company, will continue their support of LBBC this fall for the eighth year. They have selected three pink shades of their enriched nail polish — Poised Pink Champagne, Hopeful Hot Pink and Playful Pink — along with their new Caress Anti-Fungal Cuticle Oil as the products for this fall's campaign. They will donate 15 percent of retail sales of these products during the month of October.

"Breast cancer affects so many people in the world, including many Dr.'s Remedy customers. It is for this reason we have aimed to be supportive of the work that LBBC is doing to help those living with the challenges associated with breast cancer, says **Rachel Bacheler**, managing director at Dr.'s Remedy. "Their strong efforts to create a compassionate community and beyond is an inspiration. We are proud to [have] associated our enriched nail-care brand with this important organization for the past 8 years."



LympheDIVAs

In 2005 two women diagnosed with breast cancer, **Rachel** Levin Troxell and **Robin Miller**, founded LympheDIVAs, a compression garment company. Both women were living with lymphedema, swelling caused by a build-up of lymph fluid that can be managed with a compression sleeve. Both women were frustrated by the lack of sleeve options. Together they designed a more elegant and comfortable compression sleeve.

Rachel passed away from metastatic breast cancer in 2008 but her mission continued. Her parents and her brother **Josh** stepped in "to continue LympheDIVAs to provide products for the benefit of breast cancer survivors with lymphedema everywhere."

Over the last 10 years, LympheDIVAs has created many custom designs to benefit LBBC. LympheDIVAs' Yogi design is especially unique because of Rachel's passion for practicing yoga and the relief it brought her from lymphedema. With each **Yogi Sleeve** or **Glove** sold LympheDIVAs will donate \$10 to LBBC. With each **Yogi Gauntlet** sold LympheDIVAs will donate \$5 to LBBC.

Thanks to these partners and our many other retail supporters who provide critical funding for LBBC's programs and services. See all the products benefitting LBBC at lbbc.org/shoptosupport.

LBBC's Reach & Raise in Denver... and Beyond

BY JESSICA BETTS

his May, Living Beyond Breast Cancer held its 17th annual Reach & Raise: Philadelphia, bringing together more than 1,700 people for the all-ages yoga class. But many people don't realize that other Reach & Raise events are held around the country to raise money for LBBC's programs and services.

One such location is Denver, which hosted on Sunday, September 16 for the seventh year. A morning of yoga, support and connection, Reach & Raise: Denver was held again at Cheesman Park Pavilion. This year's practice was be led by Denver local **Brianna Obert, MSPT, CLT, RYT**, with accompaniment from **Damon Grossman**, the Zen Drummer. The event featured gift bags, snacks and an expo with local vendors. For the first time, the Denver event included the option of chair yoga to increase accessibility for everyone wishing to participate.

Chico's FAS — with its brands Chico's, White House Black Market, and Soma — was the lead sponsor for Reach & Raise: Denver and joined local health system **University of Colorado – Denver** in welcoming participants as they supported LBBC's programs and services for those affected by breast cancer. We are pleased that a portion of the proceeds from this event will directly assist women in Colorado through the **Living Beyond Breast Cancer Fund**, which provides small quality-of-life grants to those facing financial hardship due to a breast cancer diagnosis.

Jes Lucero, team captain of the Breast of Friends, has participated in Denver for 7 years and encourages everyone to try a Reach & Raise event: "Just do it! It's an integrative yoga experience that is accessible to all levels, with absolutely zero judgement. I promise you won't regret attending! You will feel the love and your life will never be the same!"

Memphis, Tennessee also hosted a Reach & Raise in May 2018 and upcoming events are planned for Tulane University in Louisiana and at the Living Beyond Breast Cancer Conference in Philadelphia, with more on the way. And, since developing Reach & Raise on the Road in 2016, more than 35 LBBC supporters around the world have held their own Reach & Raise yoga events in their communities, helping to spread the word about LBBC's programs and services while raising funds to support them.

If you are interested in bringing Reach & Raise to your community, contact Maddie Pfeiffer at mpfeiffer@lbbc.org.





Happy Birthday, Kim!

BY: LBBC ADVANCEMENT STAFF

WHO: Kim Jennings, 53, Maidens, Virginia
WHAT: Facebook Fundraiser
WHEN: July 2018
WHERE: Online
AMOUNT RAISED FOR LBBC: \$575
TOTAL ATTENDEES: 16 donors, 648 friends

Kim Jennings has been a steadfast supporter of LBBC for many years through DIY fundraising efforts such as letter writing campaigns, paint nights and other creative initiatives. As her birthday approached, she knew she wanted to celebrate by trying something new. She knew several friends who used the social media fundraising tool Facebook Fundraisers and appeared to have success.

"Facebook took care of all the details, even giving me examples of what to write and providing reminder prompts. I chose to set a goal that represented the birthday I was celebrating (53 = \$530)," Kim says about how easy it is to set up a fundraiser through Facebook. She suggests these tips to engaging donors:

- Set a reasonable goal with a short time frame.
- Send thank you notes.
- Highlight the organization on your Facebook page before and after your fundraiser by promoting their programs and events. When it's time for the 'ask' they'll have a sense of how important that organization is to you.

Interested in hosting a Do-It-Yourself event in support of LBBC? To find out more, contact Margaret Epler at mepler@lbbc.org.



With you, for you.

40 Monument Road, Suite 104 Bala Cynwyd, PA 19004



If you received more than one copy of this newsletter or would like to be removed from our mailing list, email information@lbbc.org.

Connecting you to trusted breast cancer information and a community of support

Stay Connected With Living Beyond Breast Cancer



ENGAGE WITH OTHERS in the Living Beyond Breast Cancer community through Facebook, Instagram, Twitter and YouTube.

Iving Beyond Breast Cancer

@LivingBeyondBC

@livingbeyondbc and

the LBBC blog at lbbc.org/blog

FALL 2018 Calendar

Educational Programs

WEBINARS

All webinars are held from noon - 1 p.m. (ET)

OCTOBER Navigating a Breast Cancer Diagnosis

BREAST CANCER 360s Online and in person!

NOVEMBER 12 Breast Cancer 360: Breast Reconstruction Philadelphia, PA

TWITTER CHATS Online from 8 – 9 p.m. (ET)

OCTOBER 17 Metastatic Breast Cancer

Conferences and Special Events

SEPTEMBER 28-30 2018 Living Beyond Breast Cancer Conference Philadelphia, Pennsylvania

OCTOBER 27 Butterfly Ball Philadelphia, Pennsylvania

Check LBBC.ORG for the latest program information

THANK YOU TO Our Donors

\$100,000 and above

Centers for Disease Control and Prevention

U NOVARTIS

\$50,000 to \$99,999

AmerisourceBergen Foundation Amgen AstraZeneca Einstein Healthcare Network Eisai jane iredale - The Skincare Makeup®

\$25,000 to \$49,999

The Allergan Foundation Celgene Lilly Myriad Genetics Nattrelle Pfizer

\$15,000 to \$24,999

Boehringer Ingelheim Chico's FAS Genomic Health Mentor Merck Patient Access Network Foundation SAS Seattle Genetics Univest Bank and Trust Co. Barbara J. Yorke & Paul A. Villa

\$10,000 to \$14,999

Anonymous Ballard Spahr LLP California Exotic Novelties, LLC Donna Noce Colaco & Frank Colaco Marie & Joseph Field Marilyn Frank & David Feldman MacroGenics Loulie Mauran MGF Sourcing Poongin Trading Co. LTD The Traveling Vineyard WebMD

\$5,000 to \$9,999

Accenture Jackie Allen/BJNB Foundation Jenny Burkholder & John Flak Cancer Support Community Customers of Chico's FAS Dechert, LLP Camille Enkeboll Samantha & William Harmelin Immunomedics, Inc. Independence Blue Cross Jade Yoga Karr Barth Associates/ AXA Advisors LLC Teresa Kohl The Lipstein Family M&T Bank M3 Global Research Meyer Capital Group Paula A. Seidman Fund/Alan L. Saltiel Sabitha Pillai-Friedman & Michael Friedman RSM Syndax Pharmaceuticals, Inc. TAL Group

\$2,500 to \$4,999

Christy Adams & George Bochetto Aon Barre 3 Rittenhouse Square Boiron Liane & Philip Browne Cancer Treatment Centers of America Debra & Steven Copit Foundation Medicine Inc. Liz & Henry Harris Holy Redeemer Health System Holly Kortright & Michael Fudge Rebecca & Arthur Krevitz Alexandra & Tim Levin Karen & David Mandelbaum Rhea & Morton Mandel / Samuel P. Mandell Foundation Merrimack Pharmaceuticals, Inc. Nordstrom Michael Reilly William E. Connor & Associates Ltd. Wendy Wolf & Jack Behrle

February 1 – July 31, 2018