

ADVOCACY SLIDE DECK SERIES 3

Challenges in Metastatic Breast Cancer: Big Issues That Could Change Lives





How many people in the US live with MBC?

Currently, there are only estimates of how many women and men are living with MBC in the US

- Why is there no accurate total count?
 - Only people who receive an MBC diagnosis as their first or De Novo diagnosis are counted
 - People who receive an MBC diagnosis after being treated for early-stage breast cancer are not counted



Counting every MBC patient is important because...



What we do not count can be easily overlooked, and MBC research needs to receive a fair portion of the breast cancer research funding.

The improvement in breast cancer survival rates has slowed

- ASCO's website, <u>cancer.net</u>, estimated that 42,250 women would die from breast cancer in 2024.
- Breast cancer is the second leading cause of cancer death in women. (Only lung cancer kills more women each year.)
- Black women have the highest death rate from breast cancer. This is thought to be partially because Black women have a higher risk of triple-negative breast cancer, more than any other racial or ethnic group.
- The chance that any woman will die from breast cancer is about 1 in 40 (about 2.5%).
- Women of all ages receive MBC diagnoses.
- Younger women and males are more likely to receive an MBC diagnosis as their first diagnosis.



Deaths of so many women from MBC impact the socioeconomic well-being of the US

Women are paid and unpaid workers in society

- Mothers are often responsible for the well-being, care, and education of their children. Children are left behind without the love and guidance of women in their families. Single parent families are hit particularly hard.
- Younger women may lose the opportunity to become mothers and wives.
- Women lose the opportunity to contribute to and advance in the workplace, if/when they become disabled.
- Women of all ages also act as caregivers for others in and outside the home.
- Women comprise the majority of teachers and nurses in US society.

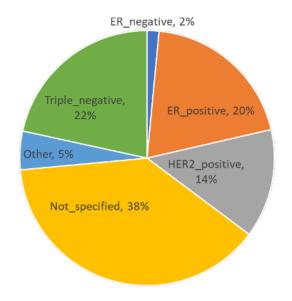




MBC still does not receive enough research funding

- Despite efforts to quantify the percentage of breast cancer research dollars going to MBC research, the most complete analysis to date comes from the 2020 MBC Alliance Landscape Analysis Update.
- In 2014-2020, 13% of all breast cancer research dollars was devoted to MBC. Therefore, investment in MBC as a percentage of breast cancer research nearly doubled for grants funded in 2014-2020 compared to 7% in 2000-2013.
- The percentage of National Institutes of Health and Department of Defense/Breast Cancer Research Program MBC research in fiscal year 2016 was estimated by the National Breast Cancer Coalition to be approximately 20%.
- > By 2020 People living with MBC identified treatment resistance as the area of primary importance for MBC research. The percent of MBC research dedicated to resistance increased from 15% (\$36.6 million) in 2014 to 26% (\$89.1 million) in 2020.

Percent of grants investigating MBC treatment resistance by subtype





Proposed Solutions

- Patient advocacy is key to changing research focus and outcomes
- Lobby for research that is focused on what matters to patients
- Consider becoming active in research advocacy by participating in scientific projects and attending conferences
- Consider lobbying your congressional representatives to support funding for cancer research through the DoD Breast Cancer Research Program



challenge MBC needs focused research

With an estimated 43,780 people dying of MBC in the US each year, research to improve outcomes of those living with metastatic disease is crucial

There are areas of great need...

- Including patient advocates and nonprofit partners in research when asking what's needed to prevent death and improve quality of life
- Turning MBC into a chronic illness that can be lived with for a full lifetime, with a good quality of life, even if a cure is not attainable for all
- Preventing brain metastasis and central nervous system involvement
- Identifying better treatments for each subtype
- Overcoming treatment resistance
- Resolving care disparities, including those of race, age, gender, wealth, and location
- Establishing and improving supportive and palliative care access
- Supporting basic and translational science that may lead to new clinical trials
- Improving clinical trial design and making plain language summaries available to participants
- Including more representative patient participation in clinical trials



challenge Addressing disparities in MBC

Across the country, disparities prevent many MBC patients from accessing high quality health care and affordable treatments

- > These disparities include socioeconomic status, race, age, where people live, language, gender, sexual identity and orientation, and access to health care
- If these disparities are reduced, more patients might live longer than the current median 3 years
 - The concept of disparities need to expand to include financial disparities and the toxicities of the financial burdens of MBC



Proposed Solutions

- The bipartisan Telehealth Extension and Evaluation Act is proposed legislation to extend current Medicare telehealth reimbursement waivers through May, 2025 and commission a study on evaluating permanent telehealth flexibility. This bill serves to address inequities that result from living in rural or underserved areas.
- The Metastatic Breast Cancer Access to Care Act is again in Congress with two Bills proposed for legislation: <u>House Bill HR3183</u> and <u>Senate Bill S1312</u>. Passing of this Act would remove the wait-time barriers for receiving Social Security Disability Insurance and access to Medicare.
- Urge your representatives to support these legislative efforts. You can find contact information for your Senators and Representatives and by going to https://www.usa.gov/elected-officials.

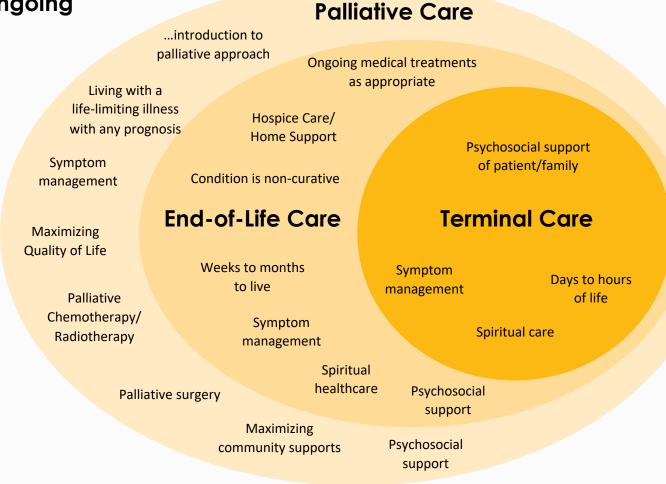


challenge Access to palliative care for MBC

The right time for palliative care is early and ongoing

The American Society of Clinical Oncology recommends early access to palliative care in MBC

- Whether called palliative or supportive care, the goal is to support a patient physically, emotionally, spiritually, and socially through
 - Integrative Oncology: Complementary medicine therapies in conjunction with conventional cancer treatments, such as naturopathy, acupuncture, cancer massage, and Reiki
 - Cancer Pain Management: Medications and interventions to manage cancer pain and minimize side effects
 - Cancer Psychiatry/Psychology: Supporting the mental health of cancer patients
 - Cancer Nutrition: Maintaining and optimizing nutrition in cancer patients
 - Cancer Rehabilitation: Preventing and improving physical limitations and function





For me, being a male with breast cancer I felt a little uncomfortable, being diagnosed with a "woman's disease"... I focus on living. I focus on making plans, for dinner, for vacations, for time spent with family and friends and especially precious time with my wife... [But] be concerned for your children, for your sons & daughters, because breast cancer knows no boundaries and neither do our genes!

Kirby, MBC diagnosis in 2016

I was diagnosed with Stage II Invasive Ductal carcinoma (IDC) in 2011. My wife and I were devastated. We are fortunate to live in an open and affirming community where our sexual orientation has not created barriers for us or our children. In 2019, when we thought we had put cancer behind us, I was diagnosed with Stage IV Metastatic Breast Cancer. As before our community and healthcare providers welcomed my wife as a core part of my team. Not everyone is as fortunate as we are. I have a friend who has the same diagnosis. They consider themselves to be gender neutral and use "they/them" as their preferred pronouns. Because breast cancer is often thought of as a "female" cancer they have found both the healthcare system and the support group network unwelcoming and at times, downright hostile.

Melinda MBC diagnosis in 2019



This is one way stopping fighting cancer empowers: [I choose] lesser opioids more often, extra-strength Tylenol, a steroid for inflammation, cannabis candy in my toolkit. My toolkit to adjust or not.

Dorothy (in memoriam) MBC diagnosis in 2015







THANK YOU! Questions?





For more information and specific sources, visit: https://mbcalliance.org/asd-series3

> MBCAlliance.org

