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BREAST CANCER AWARENESS, PREVENTION & TREATMENT



T IS MORE IMPORTANT THAN EVER TO RISE TO THE CHALLENGE OF PREVENTING BREAST CANCER TOGETHER AND encourage screenings of our friends, family and colleagues. All women need to be informed by their health care provider about the best screening options for them. When you are told about the benefits and risks of screening and decide with your health care providers whether screening is right for you — and if so, when to have it —informed and shared decision-making can take place, which is the most powerful weapon against the onset of breast cancer.

Although screening cannot prevent breast cancer, it can help find breast cancer early, when it is easier to treat. The CDC asks all women to talk to their doctors about which breast cancer screening tests are right for them, and when they should have them.

In honor of October being Breast Cancer Awareness Month, we have gathered a collection of articles and information to help keep our readers apprised of the latest movements in the fight against breast cancer.

BREAST CANCER AWARENESS, PREVENTION & TREATMEN

Innovative 3D Imaging Comes to Beverly Hills

os Angeles now has the first clinic in Southern California where anyone can benefit from QT imaging breast scan technology. This breakthrough innovation offers no radiation, non-compression 3D images of the breast to complement traditional mammography and provide added crucial visualization and data — including ductal networks. The first in class imaging center, a collaboration between the Dr. Susan Love Foundation for Breast Cancer Research and QTimaging is now open at 145 Robertson Blvd. in Beverly Hills. Appointments are necessary, and the procedure retails for \$399 and includes an image reading by a qualified healthcare professional.

"The awareness that more than half of women have dense breast tissue prompted us to seek funding for this tool," said Christopher Clinton Conway, CEO of the Dr. Susan Love Foundation. "Susan was an instrumental thought partner with QTimaging founder and CEO Dr. John Klock, and this FDA cleared innovation is their next gen contribution to unlocking breast cancer diagnostics and early detection."

The QTscan option is a true healthcare game changer, offering clinicians never before seen 3D images of patients breasts to better detect and diagnose breast cancer. The clearest picture is the greatest asset for any patient. Emphasis on diagnostics is foundational to breast cancer treatment.

The debut of this first in class breast clinic is the realization of an early partnership between the Dr. Susan Love Foundation, NASA, and QTimaging.

The collaboration and partnership between the Dr. Susan Love Foundation, NASA, and QTimaging has brought forth the reality of a next generation imaging and detection space, proudly housed in Beverly Hills California the QTimaging Breast Center.

"Angelenos will be among the first to benefit from this imaging revolution," said Conway. "But the goal is to include this imaging option as a standard of care globally. We will be collecting data on diagnosis and outcomes to support the efficacy of the QT images so all may benefit."

Now that the imaging center is open to the public, QTimaging continues to push boundaries developing next phase AI-enhanced diagnostic tools. As AI-based algorithms fuel an acceleration of breakthroughs in medicine, QT plans to unveil AI tools with the QTviewer which may enable features analysis with the capability of categorizing findings as either benign or malignant, with the goal of dramatically reduce false positives and unnecessary biopsies. This feature is pending

FDA clearance.

The Dr. Susan Love Foundation is also at the forefront of momentum in demonstrating that low-resource communities and countries can also provide women with state-of-the-art diagnostic imaging. Earlier this year, an NIH funded study launched by Dr. Love concluded with evidence showing how even minimally trained health care workers using handheld devices powered by AI can detect masses. The





groundbreaking results were published in the Journal of Radiology in May.

The Foundation also leads the efforts to map the breast ducts. The thought that a clear and detailed mapping of the breast ducts will allow us to really focus in to eliminate cancer where it starts. The Foundation believes that this mapping is crucial to early detection, and ultimately to treatment.

Later this fall, the 7th edition of The Breast Book by Dr. Susan Love will be published by 'Angelenos will be among the first to benefit from this imaging revolution. But the goal is to include this imaging option as a standard of care globally. We will be collecting data on diagnosis and outcomes to support the efficacy of the QT images so all may benefit.'

> CHRISTOPHER CLINTON CONWAY Dr. Susan Love Foundation

Hachette, updated with the latest information including: new drugs, vaccines and hormonal treatments, the latest in cellular level science and genetics, and alternative approaches and prevention. The New York Times called Dr. Love's book "the bible" for people with breast cancer.

Dr. Susan Love Foundation for Breast Cancer Research challenges the status quo to end breast cancer and improve the lives of people impacted by it now through education and advocacy. The Foundation drives collaborative, cutting-edge research with nontraditional partners, brings to light the collateral damage of treatment and seeks ways to diminish it, and interprets science to empower patients. A Los Angeles based organization for over 20 years, the Foundation actively engages the public in scientific research to ensure that it produces accurate and meaningful results.

On July 2, Dr. Susan Love passed away after a recurrence of leukemia. Her global impact was celebrated in stories about her life and work in The New York Times, The Washington Post, The Boston Globe and the Los Angeles Times. She loved her home in Los Angeles and valued the partnerships with scientists and healthcare professionals at the city's great institutions including UCLA and JPL. Her vision will continue to guide the breast cancer research, advocacy, and breakthroughs she pioneered.

Learn more at drsusanloveresearch.org.

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Put Yourself First – Schedule Your Mammogram Today

By PIH HEALTH

A re you overdue for a mammogram, but it hasn't made it to the top of your to-do list yet? With so many different responsibilities to juggle, such as jobs, kids, and caring for other family members, many women may find that scheduling time for a mammogram appointment often gets lost amongst other priorities because they are too busy taking care of everyone else.

Taking care of yourself should be first on your list and not last, because if you are not taking care of your own health, it will be even more challenging to help others.

Did you know that one in eight women will be diagnosed with breast cancer in their lifetime? The American College of Radiology states that mammography screenings have assisted in the reduction of deaths due to breast cancer in the United States by 1/3 since 1990. A mammogram is an important tool in detecting breast cancer early when it's easiest to treat. Regular mammography screenings can help to detect the cancer at an early stage, which can lead to early treatment, a wider range of treatment options, and better chances of cure and survival.

Here are some other reasons to help you prioritize getting a mammogram:

• Mammograms are quick and easy. Getting a mammogram usually takes only 30 minutes or less. Most places that provide screenings offer a choice of appointment times so you can select a time that's most convenient for you so you can quickly get back to tackling your other priorities. You might be able to get a screening during your lunch hour, before or after work, or on the weekend.

• Chances of surviving breast cancer is much better if the cancer is found early. The five-year survival rate is 99% if the cancer is found before it spreads outside the breast, according to the National Breast Cancer Foundation. If found early, your doctor may only need to remove the cancer instead of the entire breast. Follow your doctor's recommendations to help detect breast cancer early—when it is easiest to treat.

• Mammograms can show masses and other changes in the breasts that can be caused by cancer before you even feel a lump. You may not be able to feel a lump if it's small or deep inside your breast. The screenings use low dose X-rays that give doctors a look at the inside of your breasts.

• Family history of breast cancer increases risk of breast cancer. Your chance of getting breast cancer could be higher if someone else in your family had the cancer. If your mother, daughter or sister had breast cancer, your risk could be nearly double. Keep in mind, however, that you can also get breast cancer even if no one in your family has ever had it.

• Risk of breast cancer increases with age. You can get breast cancer at any age, but it's more likely to happen as you get older. The Centers for Disease Control and Prevention (CDC) reports that most breast cancers happen in women over 50. The American College



of Radiology recommends starting yearly breast cancer screenings at age 40. Women at elevated risk for breast cancer may need to start earlier or supplement with breast magnetic resonance imaging (MRI).

• Other things may increase your risk for breast cancer. According to the CDC, factors that may raise your risk of breast cancer are dense breasts, being overweight or having obesity after menopause, having breast cancer in the past, radiation treatment to the chest at a young age, taking certain hormones, starting your period before age 12 or starting menopause after age 55. Talk to your doctor about your risk factors.

Know that it's okay to put yourself first. Take charge of your health and schedule your mammogram today by calling (562) 906-5692 or visiting PIHHealth.org/Mammogram.

If you've not had a wellness check-up in a while, make an appointment. To find a PIH Health physician near you, visit PIHHealth.org/Doctors.

Inflammatory Breast Cancer: Know the Risks and Warning Signs

The American Cancer Society is raising awareness about this aggressive form of breast cancer during Breast Cancer Awareness Month

nflammatory breast cancer (IBC) is a rare type of breast cancer. It only accounts for one to five percent of all breast cancer cases, but it's important to know your risk and the warning signs, as this form of the disease is aggressive, fast-growing, and hard to detect early. For October, during Breast Cancer Awareness Month, the American Cancer Society (ACS) is highlighting IBC to help women be aware of this invasive cancer.

"IBC is tricky as it doesn't usually present with a breast lump like many women expect when they think of a breast cancer. Instead, the disease causes inflammatory symptoms, like swelling and redness as cancer cells block lymph vessels in the skin," said Dr. William Dahut, chief scientific officer at the American Cancer Society. "These symptoms may show up quickly – over just three to six months, so if you experience them, it is important to investigate with your healthcare team right away."

Also concerning, IBC may not show up on a mammogram, and it can grow and spread more quickly than other forms of breast cancer. Because of this and because it involves the skin, all cases of IBC are considered advanced to at least Stage 3 when first diagnosed, and in about one-third of cases, the cancer has spread to distant parts of the body when it is diagnosed.

- Women at risk for IBC include:
- Women under 40 years oldBlack women
- Women who are overweight or obese

U

Warning signs for IBC include:Swelling (edema) of the skin of the breast

• Redness involving more than one-third of the breast

• Pitting or thickening of the skin of the breast so that it may look and feel like an orange peel

• A retracted or inverted nipple

One breast looks larger than the otherOne breast feels warmer and heavier than

the other breastA breast that may be tender, painful, or itchy

• Swelling of the lymph nodes under the arms or near the collarbone

Some of those symptoms can also be signs of an infection, so a doctor may at first treat a patient with antibiotics. If symptoms don't clear within seven to ten days of antibiotic treatment, more tests must be done to check for cancer or other problems. IBC should be considered as a stronger possibility if a woman with symptoms is not pregnant or breastfeeding

or has already gone through menopause. Diagnosis of IBC typically involves imaging tests, like a mammogram, breast ultrasound,



or breast MRI, and always includes a biopsy, where a small piece of breast tissue is removed and evaluated in a lab.

If IBC has not spread beyond the breast, treatment usually includes chemotherapy first, followed by surgery to remove the cancer. Radiation and other more targeted drug therapies are given after surgery. If IBC has spread to other body parts, it is treated with chemotherapy, hormone therapy, and targeted drug therapy.

"There is encouraging news in the form

of new drugs and treatment combinations for IBC," added Dahut. "Specific drug combinations or combinations of drugs and radiation therapy are being tested to help keep the cancer from returning. For advanced disease, treatments that include new targeted therapies are being studied and certain immunotherapy drugs have already been approved for treatment of IBC that is triple negative."

Learn more about IBC at cancer.org/inflammatorybreastcancer.



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Analysis Shows Many Breast Cancer Patients Struggle to Afford Basic Needs

Grants to patients offset financial burden, help patients make ends meet

ower income breast cancer patients often struggle to afford life's necessities such as housing, transportation and utilities due to direct and incidental costs related to their treatment, according to a new analysis by Susan G. Komen. These top needs were identified by Susan G. Komen's Patient Care Center, which provided nearly \$9.1 million in grants to more than 16,000 breast cancer patients from April 1, 2022 to March 31, 2023, as part of Komen's direct-to-patient Financial Assistance Program.

Up to 73% of adult cancer survivors experience financial toxicity, the damage inflicted on personal finances by medical costs. Additionally, almost half of breast cancer patients report that even mild financial toxicity affects treatment choices, quality of life, medication adherence, bankruptcy rates and even mortality.

Komen's Financial Assistance Program gives qualifying individuals \$500 or \$750, depending on the stage of disease, to pay for everyday expenses that become burdensome due to the cost of their care. Recipients identi'Nearly 300,000 women in the US will be diagnosed with breast cancer this year alone, and this report confirms a significant problem that needs addressing: many patients are struggling to stay financially afloat.'

PAULA SCHNEIDER Susan G. Komen

fied housing (35%), transportation to and from treatment (29%) and utilities (25%) as their top financial stressors.

"Nearly 300,000 women in the US will be diagnosed with breast cancer this year alone, and this report confirms a significant problem that needs addressing: many patients are struggling to stay financially afloat," said Susan G. Komen president and CEO Paula Schneider. "The financial toll of this disease is devastating, and it shouldn't be the reason we're losing precious lives. Susan G. Komen is here to help offset treatment expenses because we know no one plans for breast cancer, much less has money set aside to pay their unbudgeted bills."

From April 2022 to March 2023, 58% of the barriers to care faced by people served by Komen's Patient Care Center were economic.

REAL-LIFE STRUGGLES AND PERSONAL STORIES

Tiffy Creasy was diagnosed with Stage 2 breast cancer in September 2022 and was unable to work at her job while going through chemotherapy and radiation. Creasy had private insurance that paid for her treatment once the deductible was met, but a \$500 grant from Komen paid for the gas to get Creasy to her appointments.

"Komen gave me the ability to breathe for just a moment and not worry about the cloud of finances, but rather my own well-being—mentally, emotionally and physically," Creasy said.

Helen Jean Scott is on Medicaid, and it covered the cost of her breast cancer treatment, which included a lumpectomy, chemotherapy and radiation. But she unexpectedly became a primary caretaker of her three young grandchildren and could not return to work after recovering from her treatment. "I was behind on my electric bill, and it was getting cold outside. I was worried about the electricity being turned off and I needed money to help me because there was nowhere else to turn," Scott said.

A \$500 grant from Komen got Scott caught up on her bills.

Individuals can apply for financial assistance once every 12 months and must live in the United States or a US territory and earn an annual household income at or below 300% of the federal poverty level – \$90,000 for a family of four in 2023.

The payments help alleviate some of the immediate financial pressures patients face but ultimately public and private sector interventions must do more to eliminate out-of-pocket costs for treatment, imaging, medical supplies and other items that help patients heal from their treatment. These expenses can cost patients thousands of unbudgeted dollars.

"Financial toxicity is solvable, but Komen cannot solve it alone," Schneider said. "The support from our donors is more crucial than ever to help patients make ends meet, but we also desperately need new interventions at every level to ease the financial burden of breast cancer treatment and care."

Learn more at komen.org.

With Regular Screening, More Women Survive Breast Cancer

reast cancer is most treatable when caught early. The breast cancer mortality rate has dropped 43% since 1989 because of earlier detection and improved treatments. That's why in October, to mark Breast Cancer Awareness Month, the American Cancer Society (ACS) highlights its guidelines encouraging average-risk women to begin regular screening mammograms at age 45, with the option to begin screening as early as age 40. Although the ACS has been leading the charge to end cancer through advocacy, research, and patient support, the greatest tool a woman has to protect themselves and their loved ones is regular screening. Getting regular mammograms, which are low-dose X-ray images of breasts, is the most reliable way to detect breast cancer early.

"Breast cancer is the most common cancer in women (after skin cancer) and the second most common cause of cancer mortality. Breast cancer screening with mammography is important because early detection saves lives," said Dr. Robert Smith, senior vice president of early cancer detection science for the American Cancer Society. "Research has shown regular mammograms are associated with a substantially reduced risk of dying from breast cancer."

American Cancer Society breast cancer guidelines, which are evidence-based and crafted by a panel of doctors and patient advocates, recommend that women between the ages of 40 and 44 should have the option to begin annual screening if they desire to do so, but by age 45 they should begin and continue annual screening until age 55, when they can



transition to biennial screening, or if they prefer, continue annual screening. All women should speak with their doctor about breast cancer screening, as factors like family history, genetics, and lifestyle choices can influence when and how often someone should get screened. Also, all women should be familiar with how their breasts normally look and feel and should report any changes to a healthcare provider right away. For women with an average breast cancer

risk, the ACS recommends:Women 40 to 44 years old have the

option to start screening with a mammogram

every year.

• Women 45 to 54 years old should get mammograms every year.

• Women 55 years old and older can switch to a mammogram every other year, or they can choose to continue yearly mammograms.

• Women 75 years old or older, screening should continue as long as they are in good health and expected to live at least ten more years.

Women who are at high risk for breast cancer based on certain factors should get a breast 'Breast cancer screening with mammography is important because early detection saves lives. Research has shown regular mammograms are associated with a substantially reduced risk of dying from breast cancer.'

> DR. ROBERT SMITH American Cancer Society

MRI and a mammogram every year.

"Women who receive regular mammograms and are diagnosed with breast cancer are more likely to be diagnosed earlier, less likely to need aggressive treatments, and more likely to be cured," said Smith. "Once a woman begins breast cancer screening, it is important that she commits to regular, on-time, examinations. Regular screening, rather than irregular or occasional screening, offers the greatest benefit."

Learn more about breast cancer at cancer.org/BreastCancer.