



Your support. HER strength.

*A guide to caring for your loved one
with HER2+ breast cancer*

Who is Herceptin for?

Herceptin is approved for the adjuvant treatment of HER2-overexpressing, node-positive or node-negative (ER/PR-negative or with one high-risk feature) breast cancer. Herceptin can be used several different ways:

- As part of a treatment regimen including doxorubicin, cyclophosphamide, and either paclitaxel or docetaxel
- With docetaxel and carboplatin
- As a single agent following multi-modality anthracycline-based therapy

Herceptin in combination with paclitaxel is approved for the first-line treatment of HER2-overexpressing metastatic breast cancer. Herceptin as a single agent is approved for treatment of HER2-overexpressing breast cancer in patients who have received one or more chemotherapy regimens for metastatic disease.

**Niek's wife received
Herceptin therapy**



Herceptin[®]
t r a s t u z u m a b

Please see page 15 for important safety information you should know about Herceptin.

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Introduction

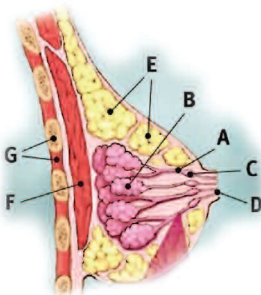
Fighting breast cancer is one of the most physically and emotionally challenging experiences that a woman can face. As the friend, family member, or partner of a woman with HER2+ breast cancer, you play an important part in helping her get through this difficult time. This brochure can help you understand breast cancer and what your loved one is feeling.

What is breast cancer?

Cancer is a general term that refers to cells that grow and multiply out of control and possibly spread to other parts of the body. Cancer can cause harm in different ways. Cancer cells take nutrition and space away from normal cells. A lump of cancer cells, called a tumor, can invade or destroy normal tissue. Cancer cells can also spread to other parts of the body. This is called metastasis.¹

Breast cancer is a common cancer among women in the United States and second only to skin cancer, affecting about 178,480 women in the United States in 2007.² There are many different types of breast cancer. Each may have different characteristics, and each one may require a different treatment.¹

Most breast cancer begins in the milk ducts. These ducts connect the milk-producing glands (called **lobules**) to the nipple. Some breast cancer begins in the lobules themselves, and the rest begins in other tissues. The diagram shows where these parts are within the breast.³

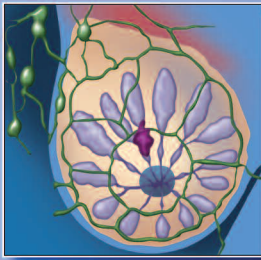


- A. Ducts**
- B. Lobules**
- C. Dilated section of duct to hold milk**
- D. Nipple**
- E. Fat**
- F. Muscle**
- G. Chest wall/rib cage**

Stages of breast cancer

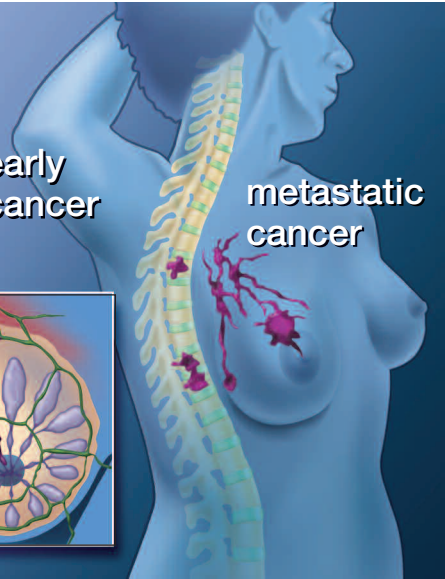
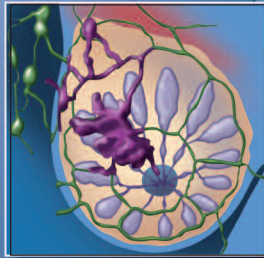
You may hear different terms used to describe how much the cancer has grown and where it has spread. Tumors may be described as **noninvasive** or **invasive**, and may be classified by their **stages**.⁴

- **Noninvasive** breast cancer, or carcinoma in situ, is a tumor that has not spread beyond the ducts or the lobules, depending on where it started⁴
 - **Ductal carcinoma in situ (DCIS)**: Cancer that is confined to the ducts
 - **Lobular carcinoma in situ (LCIS)**: A condition that is confined to the lobules, or milk-making glands. Although not considered a true cancer, having LCIS increases the risk of getting cancer later
- An **invasive** tumor has spread beyond where it began. How far it has spread determines its **stage**⁴:
 - **Localized stage**: The tumor is still only within the breast
 - **Regional stage**: The tumor has spread to the tissue surrounding the breast, or there are cancer cells within nearby lymph nodes. Lymph nodes are small masses of tissues found throughout the body that are involved in fighting infection. The more lymph nodes with cancer, the more serious the cancer may be^{1,4}
 - **Distant (advanced/metastatic) stage**: The tumor has spread away from the breast to other tissues in the body (eg, lung, liver, bone, or brain)



early
cancer

cancer
spread
to lymph
nodes



metastatic
cancer

Understanding her pathology report^{5,6}

To classify exactly what kind of breast cancer your loved one has, her doctor may take a **biopsy**, which is a sample taken from the tumor either during surgery or by using a needle. That sample tissue is then studied in a lab for different substances in the tumor, and each test result is assigned a status, such as positive or negative. The results are called the **pathology report**.

Knowing the details about the tumor helps the doctor to understand how quickly the cancer might grow and what treatments may be best.

For breast cancer, a doctor wants to know a cancer's **hormone-receptor status** and **HER2 status**. Hormones such as estrogen and progesterone play a role in the growth of many breast cancers, and it is important to know whether a tumor is positive or negative for either of these hormone receptors. An estrogen-receptor–positive tumor is called “ER+”, and a progesterone-receptor–positive tumor is called “PR+”. Tumors that are positive for either of these hormone receptors may benefit from **hormonal therapy**.

HER2 is another type of receptor that can affect the aggressiveness of the breast cancer. Some, but not all, tumors have too much of the HER2 receptor. This type of breast cancer is called “HER2-positive (or HER2+) breast cancer.” HER2 status and hormone-receptor status are not the same thing, and being positive for one does not mean the cancer is positive for the other. Knowing what kind of cancer your loved one has is critical to deciding what the best course of treatment may be.

Potential treatment options for breast cancer⁵

Depending on your loved one's risk factors (things that may increase the chances of developing a disease) and the stage of the tumor, her doctor will select an appropriate treatment plan for her. Most women will have surgery to get rid of as much of the cancer as possible. The surgery will be 1 of 2 types:

Mastectomy: Surgery to remove the entire breast.

Lumpectomy or breast-conserving surgery: Surgery to remove only the tumor plus some normal tissue around it.

Treatment may include the following:

Radiation therapy: Treatment with high-energy rays aimed at the area around the tumor.

Chemotherapy: A drug that kills cancer cells.

Hormonal therapy: Hormonal therapy is a drug that reduces the amount of estrogen in the body or blocks the effect of estrogen. Estrogen is a hormone that causes some tumors to grow.

Therapy with **monoclonal antibodies** (sometimes called **targeted biologic therapy**): Antibodies are part of the body's normal defense against bacteria, viruses, and abnormal cells, such as cancer cells. Monoclonal antibodies are produced in a laboratory by making multiple copies of a single cell. Monoclonal antibodies are designed to recognize a specific protein on certain cells and signal the body's immune system to destroy the cell. Monoclonal antibodies are generally a more targeted therapy than chemotherapy.^{7,8}

Understanding how she feels

This is an extremely emotional time for your loved one. After her diagnosis, she may be shocked, angry, or scared. She may start to feel depressed and isolated, believing that others don't understand what she's going through. She may even feel guilty for being a "burden" on her loved ones. All these emotions are completely normal.

To cope with their feelings, some women may ask for the help of loved ones, talk about what's on their mind, or just vent. Other women prefer to avoid talking about breast cancer altogether. Every woman responds to a breast cancer diagnosis differently. Remember, there is no "right" or "wrong" way for your loved one to react, but the following signs may suggest that she is adapting to her diagnosis:

- She accepts that she has breast cancer
- She is gathering information about her disease and asking questions
- She has a positive, yet realistic, outlook about her condition
- She feels that her actions can make a difference to her health

If, however, you sense that your loved one is not coping well, express your concern and encourage her to talk to someone. It's important that she not keep her emotions bottled up. Even if she chooses to talk to another member of her support system, she will appreciate knowing that you are there for her.

Providing support

During this time, your loved one needs the help of the people around her. Each member of your loved one's support system has a unique role in her fight against breast cancer, which is shaped by that person's relationship with her. She will want and need different things from her best friend than from her brother or her partner, for example. But every member of her support system, including you, should:

- 1. Allow her to share her feelings openly and honestly.** Let her know that she can talk to you about what she's going through, no matter what. Be positive, but don't try to force her to cheer up or discourage her from having "negative" feelings, like sadness or fear. It's important that you let her feel what she wants and needs to feel. And don't take it personally if she gets angry or cries. Remember, she is venting—these emotions are directed at the situation, not you.
- 2. Empathize with her.** You may not be able to understand exactly what she's going through, but try to consider how you would feel if you found out that you had a serious illness. By trying to put yourself in her shoes, you let her know that you're trying to understand how she feels.
- 3. Give her assurance.** Breast cancer can change how a woman sees herself. Let her know that you love her for who she is on the inside and that she isn't just a "breast cancer patient." She's a woman, a cherished friend, a family member, and a partner. By doing so, you help to confirm her identity and remind her that she's not alone. It may also help her feel comfortable sharing her feelings with you.

4. Encourage open, honest communication. You can create this kind of dialogue with your loved one by:

- **Telling her how you feel.** Your sincere communication may inspire her to do the same
- **Asking questions.** No matter how close you are, you can't read her mind. Asking questions can start conversations and help you avoid making assumptions about what she feels physically or emotionally
- **Not interrupting.** Show respect for your loved one and her feelings by letting her finish her thoughts
- **Asking for clarification.** If her statements are unclear to you, try repeating them in your own words and asking her if you understood her correctly
- **Not being afraid to say "cancer."** Tiptoeing around your loved one's disease can make her feel like it's a taboo subject. Help create an environment in which she's comfortable sharing her emotions

5. Tell her you're there for her, without saying anything at all. You can use nonverbal communication to let your loved one know that she can lean on you during these difficult times. Giving her a hug or a kiss, or just holding her hand, can boost her strength for the fight against breast cancer.

You can also support your loved one by helping out when her disease and treatment prevent her from going about her normal routine. The next page gives you a few ways that you can provide practical assistance from any distance.

How to “be there” from anywhere

<i>If you live nearby, you can:</i>	<i>Or if you live far away, you can:</i>
Ease the burden of household chores by going grocery shopping, doing the laundry, or cleaning her house.	Order groceries and have them delivered, or hire a professional housekeeping service to clean her house.
Make dinner for her a few nights a week, or invite her to dinner at your house.	Have dinner delivered to her house, or send her a gift certificate to her favorite restaurant.
Gather information for her about breast cancer, her treatments, or support groups. You can use the resources on page 14 as a starting point.	Email or mail her information about breast cancer, her treatments, and support groups.
Drive her to her doctor’s appointments, and take notes.	Offer to type questions she may have for her doctor, and email them to her so she has a list ready for her appointments.
Look after her children after school a few nights a week, or take them on weekend outings to the park or the zoo.	Invite her children to visit you for a weekend.

Caring for your partner

The support of friends and family is important to your loved one, but as her partner, you are the most important person in her support system. You can provide practical support similar to other caregivers—like cooking, helping with household chores, and driving her to her doctors appointments—but on a daily basis. In addition, your partner has needs that only you can meet. The following pages provide some ways you can help your partner through this difficult time:

- 1. Be her mouthpiece.** At times, the physical and mental effects of your loved one's disease and therapy will make it difficult for her to deal with the attention she receives from immediate family members and acquaintances. Offer to screen your partner's calls and visitors during these times. Ask her what she wants to share about how she's doing, and with whom, and act as her intermediary.
- 2. Take care of her and your relationship.** The physical and emotional effects of breast cancer and treatment can create a strain on your relationship. Strengthen your relationship through open, honest communication and by spending alone time together away from distractions like TV, the phone, newspapers, and even your children. Share a candlelit dinner, go for a leisurely walk, or just sit and talk.
- 3. Help her tell your children that she has breast cancer.** If you and your partner are parents, you may have a parental instinct to protect your children, and so may be hesitant to tell them about your partner's disease. It's important that you tell your children, even if it's an extremely difficult thing to do. Talking to them as a team may make it easier for you both.

When you talk to your children:

- Tailor the conversation based on your children's ages and maturity levels. Generally, the older the child, the more details you can give them about her disease. But with younger children, keep it simple, and use a doll or children's books to explain your partner's cancer
- Explain to them that they didn't cause Mom to get cancer and that they can't catch it

- Make sure they know what to expect after your partner's treatments. Unexpected physical or behavioral changes could alarm them
- Don't make promises that you can't keep. Be positive, but realistic. Let your children know that Mom is working with her doctors and doing everything she can to fight breast cancer
- Let them know that your loved one has a plan for how she's going to fight her disease. This can be very reassuring for children
- Let them know that you, your partner, or another trusted adult will always be there to take care of them. This addresses their fear of not being cared for, which is common among children of women with breast cancer. Try to stick to a normal routine and let your children know when someone other than you or your partner will be looking after them

4. Work as a team to take care of your children. Your partner needs you to help out more with childcare while she is battling breast cancer. Spend more time with them, schedule play dates for them, drive them to and from school or arrange for their transportation. While she is receiving treatment, your partner may not pay attention to your children's behavior as closely. So it is also important that you watch for signs that your children are not coping well with your partner's diagnosis. The children of women with breast cancer often try to mask their feelings to prevent their parents from additional worrying. But their behavior may tell you how they feel. The following unusual behaviors may indicate that your child is struggling with your partner's disease:

- Thumb-sucking
- Bed-wetting
- Changed eating or sleeping habits
- Poor performance in school
- Disruptive behavior
- Dramatic mood swings
- Spending less time at home

Talk to your children if you think they are having difficulty adjusting. If the problem persists, consider taking them to see a social worker or therapist.

Where to go to be in the know

Information plays an important part in the coping process: helping your loved one understand her diagnosis, make informed decisions about her treatment, and feel more in control of the situation. The amount of information about breast cancer that is available can be overwhelming, and it can be difficult to know what is reliable, especially on the Internet.

Help your loved one gather information by checking books out from your local library, picking up pamphlets from cancer information centers, and searching the websites listed below. But remember, you don't want to overwhelm her with too much information. So, let her know that you did some research for her, and allow her to decide what, when, and how much she wants to read.

General resources

- **The American Cancer Society:** www.cancer.org
- **National Cancer Institute:** www.cancer.gov
- **Breast Cancer Network of Strength:** www.networkofstrength.org
- **National Breast Cancer Coalition:** www.natlbcc.org
- **The Wellness Community:** www.thewellnesscommunity.org
- **The Mautner Project for Lesbians:** www.mautnerproject.org

Resources about HER2+ breast cancer

- **Herceptin:** www.herceptin.com
- **HER2 Support Group:** www.her2support.com
- **HER connection:** www.herconnection.com

Resources for children

- **Gilda's Club Worldwide:** www.gildasclub.org
- **Kids Konnected:** www.kidskonnected.org
- **KidsCope:** www.kidscope.org
- **Kid Support:** www.kidsupport.org

What important safety information should I know about Herceptin?

Herceptin treatment can result in heart problems, including those without symptoms (reduced heart function) and those with symptoms (congestive heart failure). Some patients have had serious infusion reactions and lung problems; fatal infusion reactions have been reported.

Worsening of low white blood cell counts associated with chemotherapy has also occurred. The most common side effects associated with Herceptin were fever, nausea, vomiting, infusion reactions, diarrhea, infections, increased cough, headache, fatigue, shortness of breath, rash, low white and red blood cells, and muscle pain.

Herceptin can cause low amniotic fluid levels and harm to the fetus when taken by a pregnant woman.

Because everyone is different, it is not possible to predict what side effects any one person will have. If you have questions or concerns about side effects, talk to your doctor.

Please see the Herceptin full Prescribing Information for **Boxed WARNINGS** and additional important safety information.

- References:** **1.** Altman R, Sarg MJ. *The Cancer Dictionary* (rev). New York, NY: Checkmark Books; 2000. **2.** American Cancer Society. Overview: breast cancer—how many women get breast cancer? Available at: http://www.cancer.org/docroot/CRI/content/CRI_2_2_1X_How_many_people_get_breast_cancer_5.asp?sitearea=. Accessed June 2, 2008. **3.** American Cancer Society. Overview: breast cancer—what is breast cancer? Available at: http://www.cancer.org/docroot/CRI/content/CRI_2_2_1X_What_is_breast_cancer_5.asp?sitearea=. Accessed June 2, 2008. **4.** American Cancer Society. *Breast Cancer Facts & Figures 2005-2006*. Atlanta, GA: American Cancer Society, Inc; 2005. **5.** American Cancer Society (ACS)/National Comprehensive Cancer Network (NCCN). *Breast Cancer: Treatment Guidelines for Patients*. Version VIII/September 2006. ACS/NCCN; 2006. **6.** American Cancer Society. How is breast cancer diagnosed? Available at: http://www.cancer.org/docroot/CRI/content/CRI_2_4_3X_How_is_breast_cancer_diagnosed_5.asp?sitearea=. Accessed June 2, 2008. **7.** American Cancer Society. Monoclonal antibody therapy. Available at: http://www.cancer.org/docroot/ETO/content/ETO_1_4X_Monoclonal_Antibody_Therapy_Passive_Immunotherapy.asp?sitearea=ETO. Accessed June 2, 2008. **8.** American Cancer Society. How does chemotherapy work? Available at: http://www.cancer.org/docroot/ETO/content/ETO_1_4X_How_Does_Chemotherapy_Work.asp?sitearea=ETO. Accessed June 2, 2008.

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