

## A Program Just for You

Established in 2005, Young and Strong, the Program for Young Adults with Breast Cancer at Dana-Farber's Susan F. Smith Center for Women's Cancers, provides comprehensive care and support to young adults confronting the challenges of living with and beyond breast cancer. Our mission is to enhance care and education for patients and their families, as well as to advance understanding of the biology of breast cancer and the experience of the disease through ongoing research focused on younger people. More than 7,000 young adults have been enrolled to date.

For more information about Young and Strong, please contact the Young and Strong team at [youngandstrong@partners.org](mailto:youngandstrong@partners.org), or visit [www.danafarber.org/YoungAndStrong](http://www.danafarber.org/YoungAndStrong).

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## New Advances in Breast Cancer Care: Here's What to Know

Breast cancer is generally broken down into three main subtypes:

- Estrogen receptor (ER)-positive/HER2-negative
- Triple-negative
- HER2-positive

Over the past year, several exciting advances have been made in breast cancer care. New treatments have recently been approved by the U.S. Food and Drug Administration (FDA) for all three subtypes and for those with inherited *BRCA1* or *BRCA2* mutations. This article reviews some of these new medications and how they are being used for patients.

### ER-positive/HER2-negative breast cancer:

The treatment of ER-positive breast cancer has improved over the past several years with the introduction of drugs called CDK 4/6 inhibitors. These drugs are targeted therapies that work together with antiestrogen medications (hormone therapy). There are three drugs in this class – abemaciclib, palbociclib, and ribociclib – and all were approved by the FDA a few years ago for the treatment of advanced ER-positive/HER2-negative breast cancer.

Since then, there has been great interest in whether these drugs can help prevent the development of advanced breast cancer in patients with early (localized) breast cancer. The MonarchE trial showed that the addition of two years of abemaciclib to hormone therapy reduced the risk of recurrence. Patients in this trial had ER-positive/HER2-negative breast cancer with a high risk of recurrence. All had cancer in at least 1 lymph node, though for many it had spread to four or more lymph nodes. Abemaciclib reduced the risk of recurrence by about 5%. While we are still waiting for future results with longer follow-up, it looks like the reduction in recurrences continues beyond the two-year period when patients received abemaciclib.

Although abemaciclib does cause some important side effects, including low blood counts and diarrhea, most patients were able to manage these symptoms and complete their treatment. The FDA approved abemaciclib for early breast cancer in the Fall of 2021, marking an important advancement in care.

### Triple-negative breast cancer:

Immunotherapies – medications which activate the natural immune system to kill cancer cells – have revolutionized the treatment of many types of cancer. In 2020, pembrolizumab in conjunction with chemotherapy was approved by the FDA for the treatment of patients with metastatic triple-negative breast cancer. Recently, the FDA also approved pembrolizumab for patients with early triple-negative breast cancer, representing a significant change in treatment.

This approval was based on the findings of a large study called KEYNOTE-522. This study included patients with triple-negative breast cancer larger than two cm or that had spread to axillary lymph nodes (lymph nodes in the armpit). Prior to their surgery, patients were treated with either chemotherapy plus placebo or chemotherapy plus pembrolizumab. After their surgery, pembrolizumab (or placebo) was continued for a year. The study showed that patients who received pembrolizumab had about an 8% higher likelihood of having all the cancer cells killed

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when the tumor was removed at surgery (pathologic complete response) and about an 8% lower risk of breast cancer recurrence.

Pembrolizumab can cause important side effects including inflammation of various organs. However, these results were so promising that pembrolizumab has quickly been adopted into the standard care for many patients with early triple-negative breast cancer.

### **HER2-positive breast cancer:**

A number of new treatments have been approved for patients with metastatic HER2-positive breast cancer in recent years. A recent clinical trial called DESTINY-Breast03 compared two drugs: trastuzumab emtansine (T-DM1) and trastuzumab deruxtecan (T-DXd). Both drugs had already been approved by the FDA for HER2-positive metastatic breast cancer, with T-DM1 considered the standard second-line treatment that a patient would receive. This trial showed that patients who received T-DXd had a much lower risk (about 70% lower) of their cancer growing or spreading (progression). Patients who received T-DXd also had a much higher likelihood of having substantial shrinkage (80% vs 34%) compared to the patients who received T-DM1.

A prior study of T-DXd had shown a fairly high rate of lung inflammation (pneumonitis). However, in this more recent and larger study, the rate of serious lung inflammation was much lower and therefore was very reassuring. As a result of this trial, T-DXd will likely replace T-DM1 as the standard second-line treatment for patients with metastatic HER2

positive breast cancer.

Several new trials are evaluating the use of T-DXd in different settings, including as the first drug used for patients with metastatic HER2-positive breast cancer, and in patients with early HER2-positive breast cancer to determine if T-DXd can reduce the risk of developing metastatic breast cancer.

### **For patients with inherited *BRCA1* or *BRCA2* mutations:**

A drug called olaparib was recently approved by the FDA for the treatment of patients with early breast cancer who also have an inherited *BRCA1* or *BRCA2* mutation. Only about 5% of patients with breast cancer have *BRCA1* or *BRCA2* mutations and these mutations are more common among patients with triple-negative breast cancer.

A recent study called OlympiA, co-led by [Judy Garber, MD, MPH](#), chief of the Division for Cancer Genetics and Prevention at Dana-Farber, compared olaparib vs placebo given for one year following surgery to patients with inherited *BRCA1* or *BRCA2* mutations. Although most patients had triple-negative breast cancer, a small group had ER-positive/HER2-negative breast cancers. Olaparib reduced the risk of recurrence by about 8% relative to a placebo.

Common side effects with olaparib include fatigue, nausea, and anemia. While olaparib has been used for about five years for patients with inherited *BRCA1* or *BRCA2* mutations and metastatic breast cancer, the use of olaparib for early breast cancer is an exciting advance for these patients.

## **Acupuncture: Tiny Needles, Promising Benefits**

Weidong Lu, PhD, MB, LicAc, a lead oncology acupuncturist at [Dana-Farber's Leonard P. Zakim Center for Integrative Therapies and Healthy Living](#) answers some common questions about how acupuncture can benefit young adults with breast cancer.

### **What is acupuncture and how does it help breast cancer patients throughout their cancer care?**

Acupuncture is a supportive care therapy that uses tiny needles to activate your nervous system. It has historically been used to alleviate many acute or chronic pain conditions, including nerve, muscle, and joint pain. Due to the large representation of breast cancer patients in oncology acupuncture research, there is abundant evidence that acupuncture improves quality of life during and after breast cancer. Although it does not treat the cancer itself, acupuncture eases many symptoms.

Research supports that acupuncture is a full-spectrum therapy, meaning that it is beneficial from the very beginning of one's diagnosis, throughout treatment, and into survivorship (or ongoing treatment for those with metastatic breast cancer).

When a person is newly diagnosed, acupuncture has been shown to reduce sleep disturbances, insomnia, and anxiety. After surgery, acupuncture can alleviate post-operative pain. This therapy can also minimize the nausea, vomiting, fatigue, neuropathy (numbness or tingling in hands or feet), and pain related to chemotherapy. After radiation, it can ease pain and fatigue. For those undergoing hormonal treatment, such as tamoxifen, acupuncture has been shown to improve hot flashes, night sweats, poor sleep, and other menopausal symptoms. Overall, breast cancer patients tend to see beneficial results regarding these symptoms.

### **Is there a difference between oncology acupuncture and "normal acupuncture"?**

Yes. Oncology acupuncture is an emerging specialty in the field. Acupuncturists that practice at health care institutions are more likely to be trained in the skill set required to reduce cancer-related and treatment-related symptoms than a community acupuncturist. When someone has cancer, they go to their oncologist for treatment, not their primary care physician. Similarly, when someone has cancer and would like to have acupuncture, they should go to an oncology



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acupuncturist and not a general acupuncturist. Oncology acupuncturists often have access to their patient's medical record and use that information to the patient's advantage. This is especially important for those with metastatic breast cancer, as areas where metastases are present should be avoided. Oncology acupuncturists will also be mindful of other conditions their patients might have.

## **What types of acupuncture are offered through the Zakim Center?**

### **Full-body acupuncture**

During a private full-body acupuncture appointment, tiny needles are inserted into the skin at several points on the body. This therapy has been offered since 2000, making it one of the oldest programs at the Zakim Center.

### **Electric acupuncture**

Electric acupuncture involves the combined use of needles and electric stimulation to relieve symptoms. Depending on a patient's needs, this type of therapy may result in a better outcome than just needles alone. Electrodes placed on the needles provide more continuous stimulation of the nervous system, which can translate to better, quicker, and longer-lasting results. Information regarding the cost and scheduling for full-body and electric acupuncture therapy is provided at the end of this article.

### **Ear acupuncture**

Ear acupuncture simply utilizes tiny needles on the outside parts of the ear. Since 2016, the Zakim Center has been offering complementary ear acupuncture during infusion appointments. Funding for this therapy program is supported by the institution. Although the program is currently only available at Dana-Farber's Chestnut Hill location, the team is hoping to expand their services in the future through donor contributions.

## **What are the benefits of ear acupuncture?**

Research has shown that ear acupuncture helps alleviate five key physical and psychological symptoms experienced during infusion: fatigue, pain, nausea, anxiety, and depression.

By incorporating ear acupuncture into infusion appointments, patients also benefit by saving both time and travel. As this therapy only utilizes small needles in the ear, the patient is not restricted in any way and can still walk around clinic or participate in their usual activities, such as reading. This simplified procedure adds great value to patients with a busy schedule or who travel to Dana-Farber from a distance.

## **How many sessions of full-body acupuncture are recommended to receive benefit?**

Generally, six acupuncture sessions are initially recommended in order for patients to observe some benefit. By physically stimulating the nervous system once a week for six weeks, patients begin to see that their symptoms noticeably improve. The positive effects of acupuncture become more apparent with each visit. For example, during the first session when the nervous system is initially activated, patients tend to mostly feel a sense of relaxation, but the effects of acupuncture are not long-lasting. However, in later sessions a variety of symptoms may be alleviated for a longer period of time. It is important to note that individual management plans are created for each person, depending on their unique needs. Some chronic or severe pain conditions may take more than six sessions, or more than once a week, for acupuncture to have an effect.

## **What are typical reservations or misconceptions that people have about undergoing acupuncture?**

Fear of needles is the biggest reservation that people have about receiving

acupuncture, but many individuals find that the benefits they experience outweigh the discomfort. In early sessions, acupuncturists will use very small, hair-like needles. Patients have reported that they typically don't feel the needles at all during their first visit, and that it is much less sensation than a blood draw. Over time and with the patient's permission, acupuncturists may gradually increase needle size and number of locations on the body to promote maximum benefit.

One common misconception is that good acupuncture is equivalent to "never feeling anything" during the session. However, it is important to remember that acupuncture is a therapy of sensation – it is not a luxury spa treatment. Lack of feeling may be a sign of diminished effectiveness. It is important that you feel something, but not pain, during the therapy. The acupuncturist's most important goal is for you to feel comfortable.

Some people believe that acupuncture has no risks at all while others believe that it is a very high-risk therapy. Neither is completely accurate. Acupuncture is best described as a minimal-risk therapy with a very high safety profile. For many patients it is an appropriate therapy, but others may have contraindications that may make acupuncture unsuitable. For example, individuals with an extremely low white blood cell count should postpone acupuncture sessions as they are at a higher risk of infection. Oncology acupuncturists will be aware of this knowledge if they have access to their patient's medical record and will communicate this to the patient.

## **What is the cost of acupuncture treatments at Dana-Farber and how can I make an appointment?**

### **Full-body or electric acupuncture**

Full-body or electric acupuncture sessions are offered at a discounted rate of \$65-\$85 for patients, depending on the type and length of appointment. Limited financial assistance is available for patients with special situations. It is important to note that some Massachusetts insurance companies are beginning to cover the cost of acupuncture for pain-related symptoms. We recommend that you check with your insurance provider about whether you can be reimbursed for the cost of this service. This service is offered Monday through Friday on the Longwood campus. To schedule an appointment, please contact the Zakim Center directly by phone (**617-632-3322**) or email ([Zakim\\_Center@dfci.harvard.edu](mailto:Zakim_Center@dfci.harvard.edu)).

### **Ear acupuncture**

Ear acupuncture is offered at no cost to patients. Currently, this service is only offered at Dana-Farber's Chestnut Hill location on Tuesdays, Wednesdays, and Thursdays. As acupuncturists walk throughout clinic, there is no need to schedule an appointment.

## **For those not pursuing acupuncture at Dana-Farber, what are qualifications that patients should look for in their community acupuncturists?**

Patients should look for community acupuncturists with the following preferred characteristics:

- State licensed/Nationally Board Certified
- Experience caring for a large number of cancer patients
- Prior working history in a medical setting, such as a hospital or multidisciplinary clinic
- Obtained additional training or education specifically in oncology related field
- Associated with an integrative oncology professional organization such as Society of Integrative Oncology (SIO)

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If you would like to learn more about Dr. Lu's research in the acupuncture field, check out the below publications:

- [Acupuncture for Chemotherapy-Induced Peripheral Neuropathy in Breast Cancer Survivors: A Randomized Controlled Pilot Trial](#)
- [The Value of Acupuncture in Cancer Care](#)
- [Acupuncture as Palliative Therapy for Physical Symptoms and Quality of Life for Advanced Cancer Patients](#)
- [The National Cancer Institute's Conference on Acupuncture for Symptom Management in Oncology: State of the Science, Evidence, and Research Gaps](#)

## Spotlight: Young and Strong's New Look

We are thrilled to announce that Young and Strong has launched a new and improved, redesigned website. This initiative began in 2020 after receiving thoughtful feedback from patients about our previous site. Highly motivated to better meet the needs of our patients, we embarked on a mission to reorganize our tools in a way that was more easily navigable and user friendly, as well as more engaging for young adults with breast cancer.

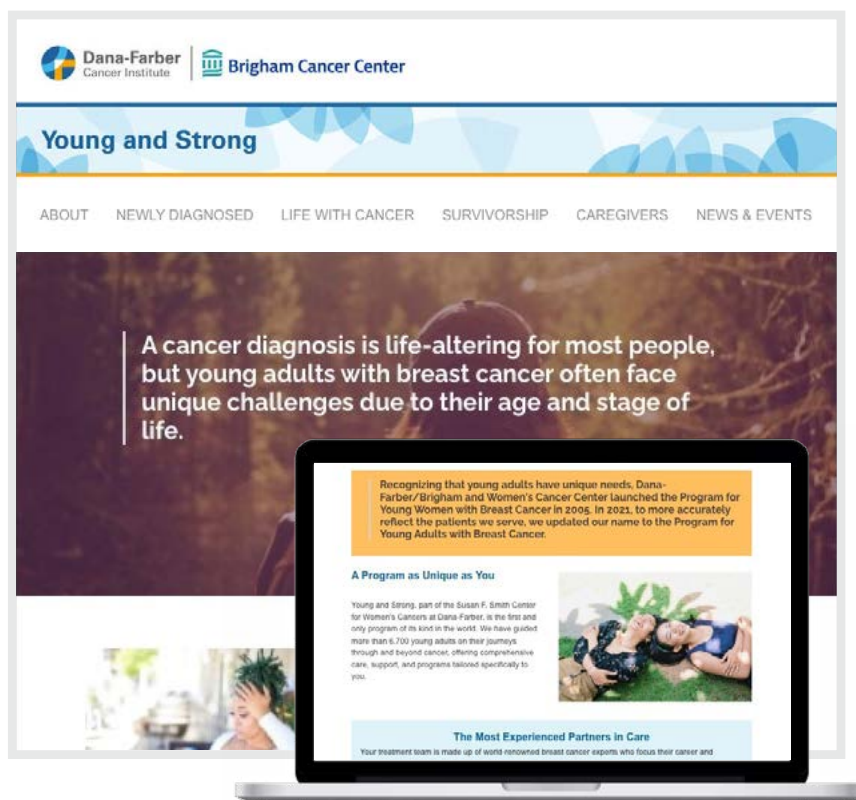
### The Process:

We recognize that young adults who are newly diagnosed, in treatment, living with metastatic disease, or in survivorship have different experiences and needs, and our website should reflect that diversity. To create an interactive resource that best serves our unique population, we looked to the experts: our Young and Strong community. Through numerous interviews with patients representing different stages of life and breast cancer diagnoses, our team determined the types of resources and information that individuals in all stages would like access to. We also interviewed caregivers (parents, partners, etc.) of young adults with breast cancer to evaluate what types of support they would like. Using the input from our community members, the new website was designed.

### The Result:

We have redesigned our website to better fit your needs. We hope that the Young and Strong website is now a comprehensive resource for our whole community. Whether you are newly diagnosed, in active treatment, post-treatment, or a caregiver, there is information and support tailored specifically to you. Through this website you can learn about breast cancer in young adults, read about patient experiences, view educational videos, find ways to connect with other young adults with breast cancer, learn about managing life with cancer, and more. Young and Strong is a welcoming and inclusive community focused on young adults with breast cancer and we are so thankful for your continued support and engagement!

You can view our website at [youngandstrong.dana-farber.org](https://youngandstrong.dana-farber.org).



## ADDITIONAL RESOURCES AND INFORMATION



**Susan G. Komen**  
[www.komen.org](http://www.komen.org)

Susan G. Komen is the only organization that addresses breast cancer on multiple fronts such as research, community health, global outreach, and public policy initiatives in order to make the biggest impact against this disease.



**Young Survival Coalition**  
[www.youngsurvival.org](http://www.youngsurvival.org)

The Young Survival Coalition (YSC) is an international, nonprofit network of breast cancer survivors and supporters dedicated to the issues unique to young adults with breast cancer.



**Living Beyond Breast Cancer**  
[www.lbbc.org](http://www.lbbc.org)

Living Beyond Breast Cancer (LBBC) is a national organization whose goal is to improve quality of life and help people in their recovery or management of the disease.



**LIVESTRONG Fertility**  
<https://rb.gy/hwawut>

LIVESTRONG Fertility, a program of the LIVESTRONG Foundation, provides information and support to cancer patients and survivors whose medical treatments present the risk of infertility.



**Ellie Fund**  
[www.elliefund.org](http://www.elliefund.org)

The Ellie Fund is a nonprofit organization that provides non-medical services to patients with breast cancer who live or receive treatment in Massachusetts. Support services include transportation to medical appointments, childcare, housekeeping, grocery assistance, and meal delivery.



**FORCE**  
[www.facingourrisk.org](http://www.facingourrisk.org)

Facing Our Risk of Cancer Empowered (FORCE) is the only national nonprofit organization devoted to hereditary breast and ovarian cancer. Programs serve anyone with a *BRCA* mutation or a family history of cancer.

# Support and Education

## Virtual Support Group

Megan Donovan, MSW, LICSW

This six-week group, facilitated by a breast oncology social worker, gives young patients and survivors an opportunity to discuss topics relevant to young adults with breast cancer. This group is best suited to those diagnosed with stage 0-III breast cancer before age 45 and are within 12 months of the diagnosis. If you're interested in registering for the next cohort, please e-mail [youngandstrong@partners.org](mailto:youngandstrong@partners.org) or call 617-632-3916 for more information.

## Facing Forward

Christina Turner, MSW, LICSW

A six-session series held twice yearly for patients who have recently completed early-stage (0-III) breast cancer treatment. For more information, email [youngandstrong@partners.org](mailto:youngandstrong@partners.org).

## EMBRACing Young and Strong

A community for young adults with **metastatic breast cancer**. Virtual social events are held twice monthly for young adults with MBC to connect with each other. For more information, please email [youngandstrong@partners.org](mailto:youngandstrong@partners.org).

## Virtual Forum Series

Each Fall, the Young and Strong team hosts a series of educational and social events for patients and survivors to learn from the experts about various topics and meet others undergoing a similar experience. Forum details will be announced in future Young and Strong monthly email newsletters.

[A playlist of recordings from the 2021 forum series can be found on Dana-Farber's YouTube channel.](#)

# Join Team Young and Strong for The Jimmy Fund Walk October 2



The Jimmy Fund Walk is a great opportunity to engage with the Young and Strong community and raise money to support the Program. We'll be back on the iconic Boston Marathon route, walking to defy cancer at Dana-Farber Cancer Institute and around the world. Join us on the course or walk "your way" virtually. Donations are also greatly appreciated.

Please visit [our team page](#) to sign up.



## 75 Years. One Mission.

When Sidney Farber, MD, founded the Children's Cancer Research Foundation 75 years ago, he gave a newfound sense of hope to young patients with cancer and their loved ones, and set the course for a mission dedicated to the research and care of cancer for all patients. Learn more about Dana-Farber's legacy at [dana-farber.org/75](http://dana-farber.org/75).