

PBCC Conference Makes History, *Again* 3D Mammograms Covered in PA



First Lady Frances Wolf announces 3D mammogram coverage at PBCC Conference luncheon

The 2015 PA Breast Cancer Coalition Conference was one for the history books. Not only did we have a day focused on education, empowerment and action, we welcomed major news from **PA First Lady and PBCC Honorary Chair Frances Wolf**. Mrs. Wolf made the historic announcement that, starting immediately, 3D mammograms are free for women insured under Pennsylvania law. This cutting-edge 3D technology was costing some insured women anywhere from \$60 to \$600. Women will now be able to get a mammogram using the latest technology at no cost. Pennsylvania is the first state in the nation to require insurance coverage for 3D mammograms. The PA Breast Cancer Coalition would like to thank **Governor Tom Wolf, First Lady Frances Wolf** and

Insurance Commissioner Teresa Miller for making this life-changing milestone possible for women in Pennsylvania!

The conference festivities kicked off Sunday, October 4 with the PBCC's Pink Party where we honored grassroots partners and volunteers, and celebrated survivors by unveiling our new traveling photo exhibit, **67 Women, 67 Counties: Facing Breast Cancer in PA**. Outstanding grassroots partner, **Julie Rockey**, founder of the **Ta-Ta Trot**, received our Shining Light Award for her passion and dedication to helping others affected by breast cancer in her community and across the state. Since 2011, the Ta-Ta Trot has donated \$109, 472 to the PA Breast Cancer Coalition to help find a cure for breast cancer now... so our daughters won't have to.

Conference day, October 5, was filled with educational workshops, inspirational speakers and awardees. **Dr. Edith Mitchell**, Sidney Kimmel Cancer Center at Jefferson University Hospitals, was awarded the Potamkin Prize for her research on triple-negative breast cancer. **Pennsylvania Representative Matt Baker** won a Pink Ribbon Award for his commitment to women's health and the Breast Density Notification Act. He dedicated his award to his sister-in-law, who is currently battling breast cancer. Our second Pink Ribbon Award went to **Dr. Wendie Berg**, Magee-Womens Hospital of UPMC, for her tremendous work on the issue of breast density. For more information on Dr. Berg's research, turn to page 8.



Dr. Mitchell presents the Plenary Session at the PBCC Conference



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President's Corner

First in the Nation: 3D Mammogram Coverage for Insured PA Women



Pat Halpin-Murphy

Breaking News – Medicaid to Cover 3D Mammograms Starting December 1

I have said it hundreds of times, maybe even thousands: early detection saves lives... because it does. The only way to detect breast cancer at its earliest stages is to use the best, most effective type of screening for each woman. Unfortunately, the latest and greatest screenings are not always available and/or affordable. That's why the PA Breast Cancer Coalition fought to ensure that cutting-edge options like 3D mammograms (digital tomosynthesis) are free for women who are insured under Pennsylvania law, beginning at age 40. I am so proud to say our state was the first in the nation to declare this victory.

The historic step taken by **Governor Tom Wolf** and announced by **First Lady Frances Wolf** at the PA Breast Cancer Coalition Conference, took effect October 5. Since that date, coverage for women insured under Pennsylvania law will "include all costs associated with mammograms, including 3D mammograms, every year for women 40 years of age or older."

Now, beginning December 1, 3D mammograms will *also* be covered for Pennsylvania women insured through Medicaid. The PBCC worked with the Pennsylvania Department of Human Services to guarantee the 3D screening coverage for women with Medicaid.

It is because of your personal stories that we are able to celebrate these life-saving milestones. Thank you for turning advocacy into action with the PBCC.

To learn more about this fall's 3D mammogram announcement, visit YouTube.com/PABreastCancer.

Effective NOW:

- 3D mammograms are free for women insured under PA law
- 3D mammograms covered for women insured through Medicare

Effective Dec. 1:

- 3D mammograms are covered for women insured through PA Medicaid

FREE WEBINAR - JANUARY 19



Dr. Linda T. Miller

Understanding and Treating Lymphedema after Breast Cancer

Linda T. Miller, PT, DPT, CLT

Breast Cancer Rehabilitation & Lymphedema Center
Dresher Physical Therapy

Register at pbcc.me/janwebinar

This issue of Frontline underwritten by: **AstraZeneca**

CAREGIVER Spotlight

Richard Towey

Richard shares his emotional journey as a full-time caregiver to his best friend, Radka, as she battled stage 4 metastatic breast cancer.

From the moment I met Radka, there was an incredible connection between us. Milena Moravec, a vice president of my company, mentioned to me that she hoped her business would carry on if anything happened to her and asked if I would advise her daughter, Radka, so in November 2002, Radka and I met for dinner. We became involved for the next several years but over time we separated and lost touch.

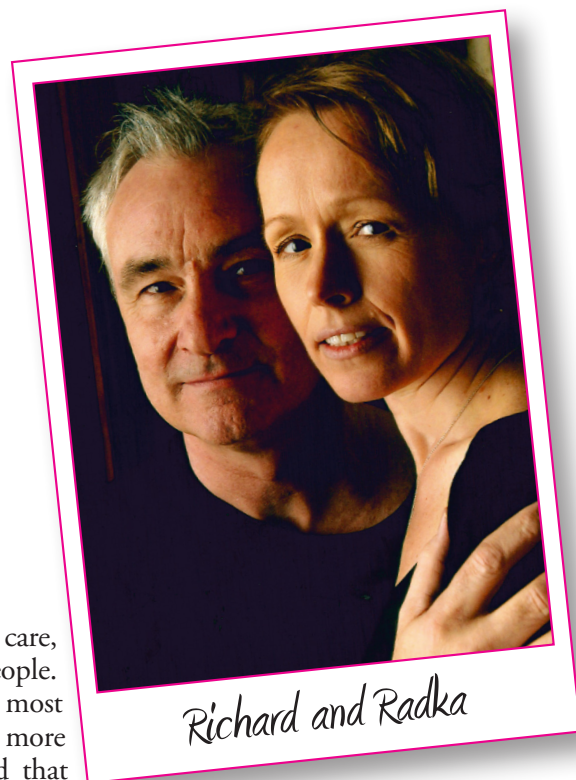
She got married and had two daughters, Isabella and Sofia. In May 2011, Radka was diagnosed with stage 4 breast cancer with metastasis to her liver and sternum. She was 38 years old. When financial issues became overwhelming for her family, Radka's sister Alena Adamski, who also worked for me, asked if I could help find a way to raise money for her care. Radka had a life insurance policy with a terminal illness benefit rider, but the insurer had declined a request for the benefit. The insurance company was an affiliate of my business and I wrote a letter on her behalf. I received word that my appeal was approved, and that she would receive a check for \$280,000. That news brought mixed emotions. I was relieved, but it also meant that several doctors confirmed that her life expectancy was less than a year.

In July 2012, Radka and I reconnected over coffee and she asked if I would help her. She was an amazing person but couldn't advocate for herself. From that day forward it became my full-time job to be her caregiver. I built a business plan of six categories to address... mental, physical, spiritual, emotional, financial, and relational. Every day I worked

through those categories for her care, and I built a bench of support people. The question I asked her doctors most frequently was, "If there was one more thing you could do, what would that be?"

While she was hospitalized we watched comedies, read books together, and I read poetry to her. I met a number of burned out caregivers at Cancer Treatment Centers of America and decided that I needed to take care of myself. I stayed connected with a pastor, a nutritionist, and a therapist. When it got to the point of Radka being in the hospital all the time, I would stay for four days and then take 24 hours away. Then I would reach out to that support bench ... her mother, her sister, her girlfriends, who took over in eight-hour shifts.

For caregivers, it's important to ask yourself, "What is my capacity?" If you're not confident that you can enter into the active service necessary to be successful, you must involve other people. You must also be a coordinator of resources and accept that you can't expect anything back. Every request from the patient should be met with a cheerful YES. I lost my best friend and the love of my life on October 22, 2014 when Radka passed away at her parents' home. Caregivers who lose someone in this battle need a game plan for afterwards. You must tell yourself I've lost something but what have I learned and how can I encourage others who haven't walked this path yet, and how can I encourage people to live their lives without regrets?



Richard and Radka

"From that day forward it became my full-time job to be her caregiver. I built a plan of six categories to address... mental, physical, spiritual, emotional, financial, and relational. Every day I worked through those categories for her care and I built a bench of support people."
- Richard Towey



Sponsors

Without the support of the sponsors listed below, the PBCC would not be able to have such a successful Conference. Thank you for your generous support and for making a difference in the lives of women and families across PA!

Registration



Awards Luncheon



Print & Pink Party



Opening Session



Diamond



Workshops



First Lady's Reception

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Continental Breakfast



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Medical Article

Research Shows Oncotype DX Test May Spare Some Women From Chemotherapy

Professor of Medicine & Women's Health at Albert Einstein College of Medicine; Associate Director for Clinical Research at Albert Einstein Cancer Center; Breast Cancer Program Director at the Montefiore-Einstein Center for Cancer Care



Joseph A. Sparano, MD

Breast cancer is the most common cancer in women worldwide and the second leading cause of cancer death. Surgical removal of a tumor is often curative, but the disease can spread to other organs, often within 5 years of diagnosis. Recurrence in distant organs is treatable; chemotherapy given after surgery (adjuvant therapy) can significantly reduce the risk of recurrence and is commonly recommended. Other adjuvant treatments also reduce recurrence risk, including hormonal therapy (eg, tamoxifen, anastrozole) and therapies targeting HER2 (eg, trastuzumab [Herceptin®]).

Until recently, there were no specific factors that predicted benefit from adjuvant chemotherapy. About half of all women diagnosed with breast cancer in the U.S. have ER-positive, axillary lymph-node-negative, low-risk disease, and therefore the lowest chance of benefiting from adjuvant chemotherapy. The great majority of such patients are over-treated with chemotherapy because about 85% would have been recurrence free with hormonal therapy alone, and adding chemotherapy reduces the recurrence rate by only 3-5%. Studies performed by the NSABP have shown that a 21-gene expression assay, the Oncotype DX test (Genomic Health, Inc.), provides additional information that predicts benefit from adjuvant chemotherapy in ER-positive disease. The Oncotype DX test results assign a Recurrence Score, a number between 0 and 100, to early-stage breast cancer that groups women into three ranges of risk based on the genetic characteristics of their tumor. Theoretically, the results could be used in the treatment plan for these women, helping spare those with low risk (low score) from the side effects of toxic chemotherapies, and treating those with high risk (high score) with the appropriate agents, providing more certainty that they are receiving the most effective therapy available. However, there has been uncertainty about the applicability

of these scores, regarding what to do when a woman scores in the mid-range area and whether chemotherapy should be routinely spared if the Recurrence Score is low or very low.

The TAILORx trial was designed to address these remaining questions. The study included more than 10,000 women, 15.9% of whose tumors scored in the low range (0-10), 67.3% of whom had scores in the mid-range (11-25), and 16.9% of whom had scores in the high range (26 and up). Patients with a score of 0 to 10 were assigned to receive endocrine therapy alone, and those with a score of 26 or higher were assigned to receive chemotherapy plus endocrine therapy. Previous studies showed that patients with a score lower than 11 had a favorable prognosis with endocrine therapy alone and that patients with a score of 26 or higher received substantially greater benefit from chemotherapy. Women with scores of 11-25 (mid-range) were randomly assigned to receive either chemotherapy + endocrine therapy or endocrine therapy alone because the benefits of chemotherapy were uncertain in this group, but the risk of recurrence was high enough to suggest that chemotherapy might be beneficial.

At 5 years, the recurrence rates in the women with a very low recurrence score of < 11 were remarkably low, 99.3% were free from distant relapse and 98.7% were free from any relapse at 5 years. Recurrence rates were low regardless of age, tumor size, or tumor grade. This prospectively conducted trial provides the highest level of evidence establishing the clinical validity and utility of the Recurrence Score in identifying patients who may be effectively spared adjuvant chemotherapy. Ongoing followup will be required to determine whether a larger fraction of patients with node-negative breast cancer and a recurrence score in the midrange group can also be spared chemotherapy.

"This... trial provides the highest level of evidence establishing the clinical validity and utility of the Recurrence Score in identifying patients who may be effectively spared adjuvant chemotherapy."
- Dr. Joseph Sparano

**TAILORx Clinical Trial
Oncotype DX Test
Genomic Health, Inc.**

Grassroots Partners

Every year, hundreds of people have fun while raising awareness about breast cancer and supporting the PBCC! We are able to continue to serve women and their families battling breast cancer across the state because of fundraisers like these! Thank you Grassroots Partners!



Ta-Ta Trot

Julie Rockey \$26,566

Save the TaTas Trail Ride

JoAnn Gilkey \$8,768



Ride to Help

Garden Spot Motorcycle Club

Bruce Cochran

\$8,000



Play for P.I.N.K.

Marianne Caplan \$10,000

BOB 94.9 ~ Community Aid

Bob Hauer Glenn Chandler

\$10,000



Penn National Race Course

Cheryl Berndt \$10,000



Shippensburg Middle School

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Breaststroke for Breast Cancer

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Johnny Roberts

Mike Weaver

\$7,069



Support the PBCC in your community. Become a **Grassroots Partner**. To find out how, visit our website pbcc.me/youcanhelp or call Kristen at 717-769-2301. Send photos from your event to Kristen@PABreastCancer.org.

**SEE MORE PHOTOS ON OUR WEBSITE
AND IN THE SPRING 2016 EDITION!**

PBCC Photo Exhibit Visits Dauphin and Allegheny Counties

The PBCC's traveling photo exhibit *67 Women, 67 Counties: Facing Breast Cancer in PA* flew into Harrisburg International Airport, greeting travelers to kick off breast cancer awareness month. On September 24, an opening reception marked the beginning of the exhibit and included speakers **Timothy Edwards**, Executive Director at HIA; **Senator Rob Teplitz**, PA Senate 15th District; **Brynn Wolff, MD, FACS**, Breast Surgeon, PinnacleHealth Breast Center; **Dr. Susann Schetter**, Division Chief of Breast Imaging, Penn State Hershey Breast Center; **Joyce Ashe**, breast cancer survivor; **Karen Deklinski**, breast cancer survivor; and **Elizabeth Yarnell**, breast cancer survivor.



Survivors gather at Harrisburg International Airport

District; **Barry Lembersky, MD**, UPMC Cancer Center; **Laura Schatzkamer**, breast cancer survivor; and **Diane Matthews, PhD**, Director, Master of Science in Fraud & Forensics, Carlow University and breast cancer survivor.

Thank you Dauphin and Allegheny Counties for making these exhibit openings a success. And a special thank you to the PA Department of Health for its continued support.

On October 16, our brand new photo exhibit featuring new survivors sharing their stories, debuted at Carlow University in Pittsburgh. Speakers at the opening reception included **Deanne D'Emilio, JD**, Provost & Vice President for Academic Affairs, Carlow University; **Representative Jake Wheatley**, 19th Legislative



Allegheny County survivors at Carlow University

PBCC CARES: New Educational Program for Students



workshops presented by the leading breast cancer experts in the state.

This fall, the PA Breast Cancer Coalition introduced the PBCC CARES (Community Advocacy and Research Education for Students) program to enrich the lives of students who want to learn more about advocacy and the science of breast cancer. The Harrisburg School District and the PBCC are thrilled to partner for this educational initiative. Students from grades 10-12 attended the Pink Fountain event at the Capitol in Harrisburg to kick off breast cancer awareness month, where they met **First Lady Frances Wolf** and legislators from across the state. The students then attended our annual Conference, meeting researchers, breast cancer survivors and healthcare professionals. They also had the opportunity to attend

In the coming months, these students will have the chance to attend a medical research grant presentation and tour a breast cancer research lab to see the latest in cutting-edge breast cancer research. Additionally, they will attend a Grassroots Partners event to learn about community activism and how individuals make a difference in the lives of breast cancer survivors and their families across the state. At the end of the program, one exceptional student will earn the opportunity to be a summer intern at the PBCC.

ARE YOU READY FOR PINK ZONE?



SUNDAY, JANUARY 17

Survivors attend FREE!

Register today at pbcc.me/pinkzone16



2397 Quentin Road, Suite B,
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Support the PBCC as
a Grassroots Partner.
Host a fundraising
event today!

To learn more visit
pbcc.me/youcanhelp

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Healthcare.gov

Deadline: January 31

Dr. Wendie Berg Presented with Surprise \$50,000 Research Grant at PBCC Conference



The PA Breast Cancer Coalition surprised **Dr. Wendie Berg**, Magee-Womens Hospital of UPMC, with a \$50,000 Extraordinary Opportunity Grant to move forward with her important research. Dr. Berg's research is partially funded by NCI but at a

lower level than necessary for this clinical trial, so the PBCC has provided additional funding for her team to determine the clinical performance of 3D mammography alone vs. whole breast ultrasound alone or a combination of 3D mammography and whole breast ultrasound. Her research study will also consider the potential for ultrasound to serve as the primary screening method for women with dense breasts.

Congratulations, Dr. Berg! Your tireless efforts to improve women's healthcare across the Commonwealth and around the world are truly inspiring. Thank you for being a part of our mission to find a cure for breast cancer now... so our daughters won't have to.

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This tax season **YOU** can help find a
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