

A Couple's Journey With Breast Cancer: Tips For Co-Survival

Emotional And Physical Impacts Of Breast Cancer Affect Patients And Caregivers

(NAPSA)—According to the American Cancer Society, three out of four American families have a family member with cancer. Families, including those of breast cancer patients, can experience emotional and physical stress during their loved one's treatment journey. Spouses are especially prone, as they often balance caregiver responsibilities with career and parenting roles.

"After diagnosis, stress can slowly build for a spouse or family member managing the care of their loved one," said Dr. Anne Coscarelli, psychologist and director of the Simms/Mann—UCLA Center for Integrative Oncology at UCLA's Jonsson Cancer Center. "It's important that a caregiver seek out information on what to expect and know that they will play a critical role in how this event impacts their family. Seeking professional assistance can help optimize psychological wellness and allow caregivers to develop effective coping strategies during the process."

Chinayera Black-Hardaman, 34, is thankful every day for the love and support of her husband through her breast cancer experience. "I am so grateful for his listening ear, attendance at my doctor's appointments, and willingness to take on tasks at home," Black-Hardaman said. "Most of all, he is a terrific father and helps manage our son's activities, which is a top priority in our lives."



Chinayera and Andre Hardaman, Breast Cancer Survivor and Caregiver Husband.

Black-Hardaman, who is the executive director of a nonprofit organization that helps improve the lives of children, found a lump while performing a breast self-exam. She saw her doctor and was diagnosed with HER2-positive breast cancer.

HER2-positive breast cancer is an aggressive form of the disease that affects approximately 25 percent of breast cancer patients and is caused by an overexpression of a protein called HER2 in tumor cells. Research shows women with HER2-positive breast cancer have a greater likelihood of recurrence, poorer prognosis and decreased survival compared to women with HER2-negative breast cancer. Special testing is required to identify women who have the disease.

"Experiencing an aggressive breast cancer was scary, so having family by my side was extremely important," Black-Hardaman said.

Through the support of her husband, family, and co-workers,

Black-Hardaman began the treatment regimen her doctor recommended. After a mastectomy, she received a combination of chemotherapy and Herceptin (trastuzumab), a targeted therapy used to treat HER2-positive cancer cells. Her treatment continues today.

"Because each woman is different, it's important to speak with your doctor about the right treatment regimen for you," said Coscarelli.

The Hardamans recommend that caregivers communicate openly, respect the patient's decisions and space, and rely on other friends and family for help. They believe a focus on spending quality time together also made their marriage stronger.

"The most important coping strategy for caregivers is to remember to take care of themselves," said Coscarelli. "Caring for your partner is important, but don't let it consume you. You are a better support system if you take time to care for yourself—physically and mentally. Exercise, meditation and small amounts of time for pleasurable activities can have positive effects on one's well-being."

For additional breast cancer survivor and co-survivor tips and resources call Network of Strength's YourShoes™ 24/7 Breast Cancer Support Center at (800) 221-2141 or visit www.networkofstrength.org. Patients and caregivers also can visit www.herceptin.com for more information.

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Editor's Note:

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.

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.

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.