

How is primary breast cancer treated?



This booklet is for anyone who has primary breast cancer and wants to know more about how it is treated.



How is primary breast cancer treated?



Part 1 – the treatment team and what will happen

Part 1 explains who is in your treatment team and why they suggest different treatments for different people. Part 1 starts on page 3.

Part 2 explains a lot more about the different treatments and their possible side effects. Part 2 starts on page 23.

Both parts are written by Breast Cancer Care, a charity that helps people who have breast cancer and other breast conditions.

You can also get Breast Cancer Care's longer free booklet

Treating primary breast cancer

Call our Helpline on **0808 800 6000**.

What is in Part 1 of this booklet?

In Part 1 of this booklet you can find out about how primary breast cancer is treated, who is in your treatment team and how choices are made about which treatments will be best for you.

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Treatments and the team

How is primary breast cancer treated?

There are lots of ways breast cancer can be treated.

There is more than one sort of breast cancer.

Primary breast cancer is breast cancer that has not spread outside the breast or the glands under your arm. The glands under your arm are called lymph nodes.

Breast cancer can grow at different speeds. Some breast cancers grow quite quickly, others more slowly.

Breast cancer can be found at different stages of growing. For example, when it is only inside the breast. Or when it has spread from your breast to the lymph nodes under your arm.



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Visit [breastcancercare.org.uk](https://www.breastcancercare.org.uk)

Treatments and the team

More about how breast cancer is treated

The different treatments that can be used will depend on your case.

You might be offered more than one of the treatments in the list below.

The treatments are not always given in the order shown here.

Surgery

An operation or more than one operation.

Chemotherapy

Drugs to kill breast cancer cells.

Radiotherapy

X-rays to kill breast cancer cells.

Hormone therapy

Drugs to stop your hormones from helping the cancer to grow.

Targeted therapy

Drugs to try to stop cancer cells growing.

Bisphosphonates

Drugs to try to stop cancer cells from spreading.

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Treatments and the team

Who will treat my breast cancer?



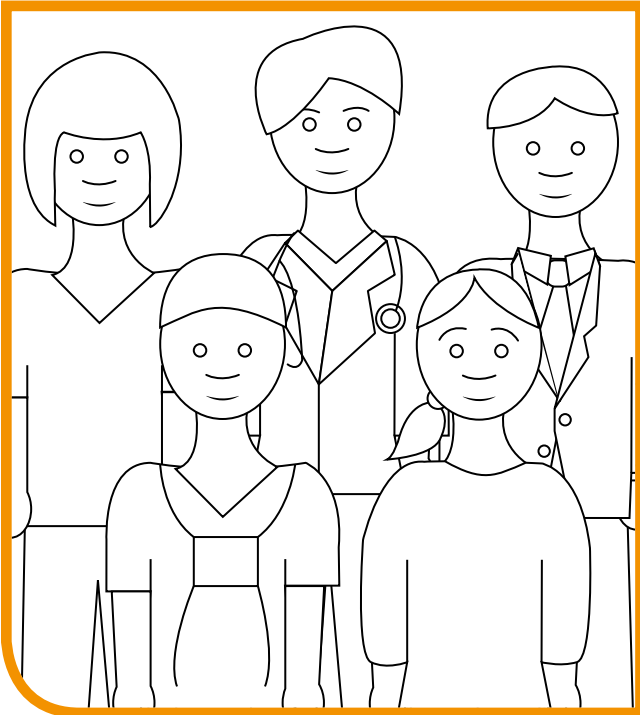
You will be treated by different breast cancer experts at different times during your treatment.

These experts will work together as a team to decide which treatments will be best for you. This team is your treatment team.

In hospital, you might hear your treatment team called a multidisciplinary team or MDT.

Your main contact is your breast care nurse. She is there to give you support and information.

Treatments and the team



Who is in a treatment team?

Breast care nurses

Nurses who give support and information about breast cancer.

Breast cancer surgeons

Doctors who are experts in breast cancer operations.

Chemotherapy nurses

Nurses trained to give cancer drugs.

Clinical oncologists

Doctors who are experts in radiotherapy and/or cancer drugs.

Medical oncologists

Doctors who are experts in cancer drugs.

Oncoplastic surgeons

Breast cancer surgeons with training in plastic surgery.

Pathologists

Doctors who are experts in finding out more about breast cancer using a microscope.

Radiologists

Doctors who are experts in different ways of looking for breast cancer, such as using x-rays or sound waves.

Treatments and the team

How does the team decide which treatments will be best for me?

To decide which treatment will be best for you, your treatment team will do some tests and checks on the cancer. These will find out:

- what sort of breast cancer you have
- how fast it is growing
- what size it is
- what might be helping it to grow.

Treatments and the team

More about deciding which treatments will be best for me

Some of the tests and checks your treatment team will use to find out more about you and your breast cancer are listed below.

- Blood tests.
- Chest x-ray.
- Liver scan.
- Bone scan.
- CT scan.
- MRI scan.
- PET scan.

Not everybody will need all these tests. Someone from the treatment team will explain which tests they would like you to have and why.

Treatments and the team

How will I find out what treatments I need?

When the tests have been done, your treatment team will look at what the tests show.

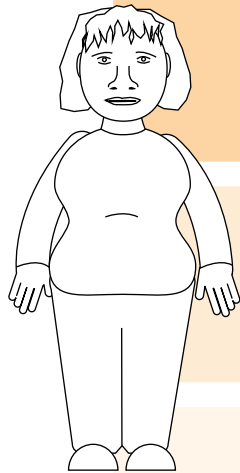
Together they will decide which treatments they believe will be best for you.

They will tell you what these treatments are.

Treatments and the team

How do I make choices about my treatment?

You can decide how much you want to be involved in making choices about your treatment. Talk to your treatment team about this when they tell you which treatments they are suggesting for you.



Some people want to be very involved in making choices about their treatment and want to know everything about their breast cancer.

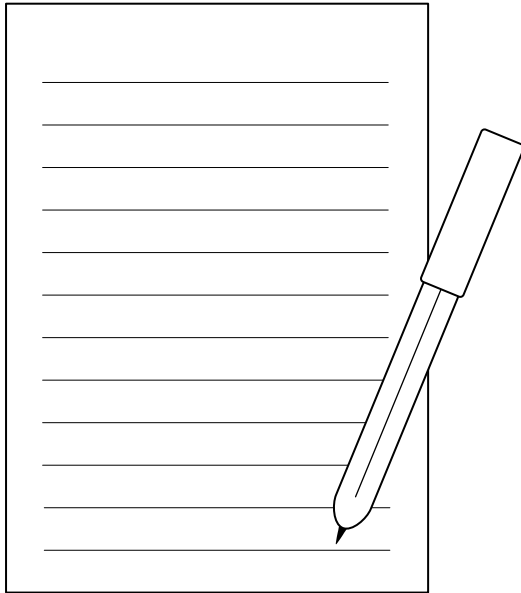
Some people want to leave the choices about treatment to the treatment team and want to know everything about their breast cancer.

Some people want to leave the choices to the treatment team and to know very little about their breast cancer.

You can change your mind about this at any time while you are being treated.

Treatments and the team

What questions can I ask about my treatment?

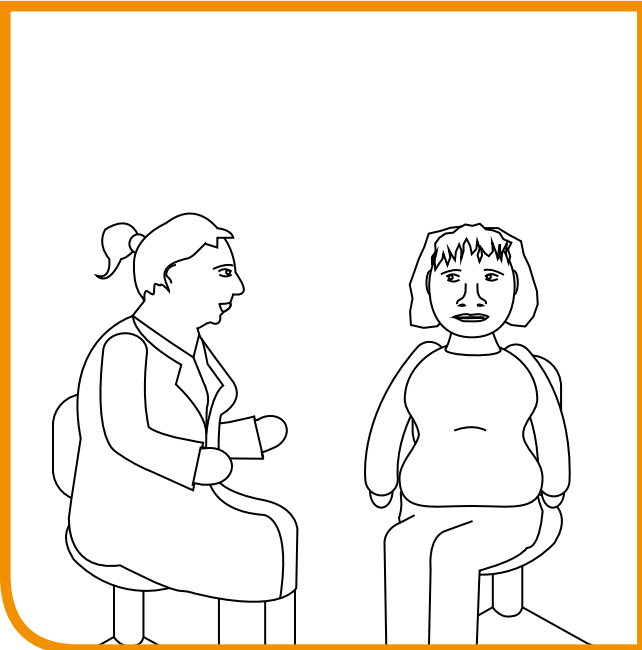


You can ask your treatment team as many questions as you like. Here are some suggestions.

- Why is this the best treatment for me?
- Are there any other treatments I could have instead?
- How long will my treatment take?
- Will there be side effects?
- How will treatment affect my everyday life?
- Will there be effects that last a long time once my treatment has finished?
- Will the treatment affect my chance of having a baby?
- Where do I have to go for treatment?

Treatments and the team

What if I don't understand the answers to my questions?



If there is anything you don't understand, ask your breast care nurse to explain it to you.

You can also call Breast Cancer Care free on **0808 800 6000**.

The person who answers your call to Breast Cancer Care will be someone who knows a lot about breast cancer.

They won't tell anyone else what you talked about.

Treatments and the team

How much time can I have to decide about my treatment?

If you need to take a few days to make up your mind about the treatments you are being offered, that is OK.

A short delay will not make your breast cancer more difficult to treat.

Some people like to take the time to talk it through with their breast care nurse, family, friends or GP (local doctor).

Treatments and the team

Can I ask to see someone else for a second opinion about the best treatment for me?

You can ask to see a different cancer expert to check if they agree about the best treatments for you.

If you want to do this, talk to your GP or hospital doctor.

It can take a few weeks to get a second opinion, but this short delay will not affect how well your treatment works.

Treatments and the team

Do I have to have treatment?

Sometimes people choose not to have a treatment that has been suggested for them because of what they believe in.

Sometimes people are afraid that the treatments won't work or will be too difficult to cope with.

If you feel like this, you can talk about it with your breast care nurse, treatment team or your GP. They will be able to tell you what is likely to happen with your breast cancer if you do not have treatment.

You can also call Breast Cancer Care to talk it through. We will give you as much information and support as you need to make your decision.

If you decide not to have the treatment suggested, your treatment team can still support you.

After your treatment

What happens when my hospital treatment is finished?

After your hospital treatment is finished, the hospital will have a system to check how you are getting on.

This checking system is called follow up.

Different hospitals have different follow up. It might include:

- hospital appointments
- seeing your GP
- phone calls with your treatment team
- getting a clinic appointment if something is worrying you.

After your treatment

How will I feel when my hospital treatment is finished?

When you have finished your hospital treatment, all sorts of feelings can come up. Not everyone is the same but many people find this is a difficult time. Some common feelings are listed below.

- Shock about what has happened.
- Worries about the cancer coming back.
- Worries about how to get back to a normal life.
- Worries about how to cope with permanent changes to your body.
- Worries about how to cope with changes to your relationships.

These feelings, changes and concerns can take a long time to settle.

If you would like to talk about your breast cancer and how you are feeling, you can talk to your breast care nurse.

Breast Cancer Care is also here to give you support and information.

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Information and support

Who can I talk to about my breast cancer?



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Information and support

Where can I find out more about my treatments?

There is more information in Part 2 of this booklet, which starts on page 23. You can also get Breast Cancer Care's longer free booklet **Treating primary breast cancer**

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How is primary breast cancer treated?

Part 2 – treatments and side effects



Part 2 of this booklet is for anyone who has primary breast cancer and wants to know more about how it is treated.

Part 2 explains the different treatments and their possible side effects.

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Treating primary breast cancer

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What is in part 2 of this booklet?

In these pages you can find out about how primary breast cancer is treated and the possible side effects.

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How is breast cancer treated?

How is primary breast cancer treated?

There are lots of ways primary breast cancer can be treated.

There is more than one sort of breast cancer.

Primary breast cancer is breast cancer that has not spread outside the breast or the glands under your arm. The glands under your arm are called lymph nodes.

Breast cancer can grow at different speeds. Some breast cancers grow quite quickly, others more slowly.

Breast cancer can be found at different stages of growing. For example, when it is only inside the breast. Or when it has spread from your breast to the lymph nodes under your arm.

How is breast cancer treated?

More about how breast cancer is treated

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Targeted therapy

Drugs to interfere with the way cancer cells grow.

Bisphosphonates

Drugs to try to stop cancer cells from spreading.

Surgery

What are the different types of breast cancer surgery?

There are two main types of breast cancer surgery.

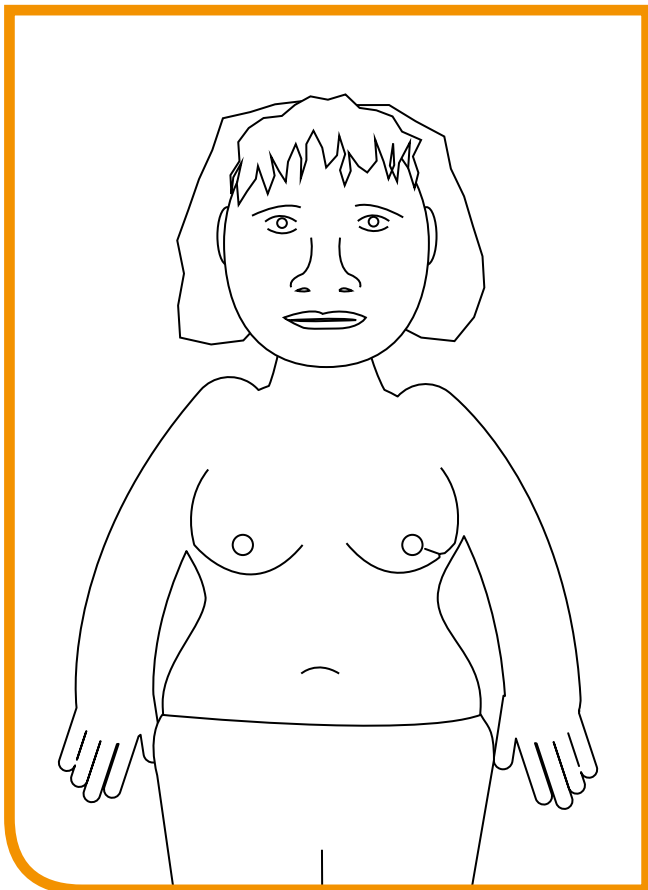
- 1. Breast-conserving surgery**
You might also hear this called a 'lumpectomy' or 'wide local excision'.
- 2. Mastectomy**

Most people also need lymph node surgery to take out and look at glands called lymph nodes. This is because breast cancer cells sometimes spread into the lymph nodes under your arm.

There is more information about surgery on the next few pages.

Surgery

What is breast-conserving surgery?



Breast-conserving surgery is when surgeons take out the cancer and an area of healthy breast from all around it.

The healthy part is called a margin or a border.

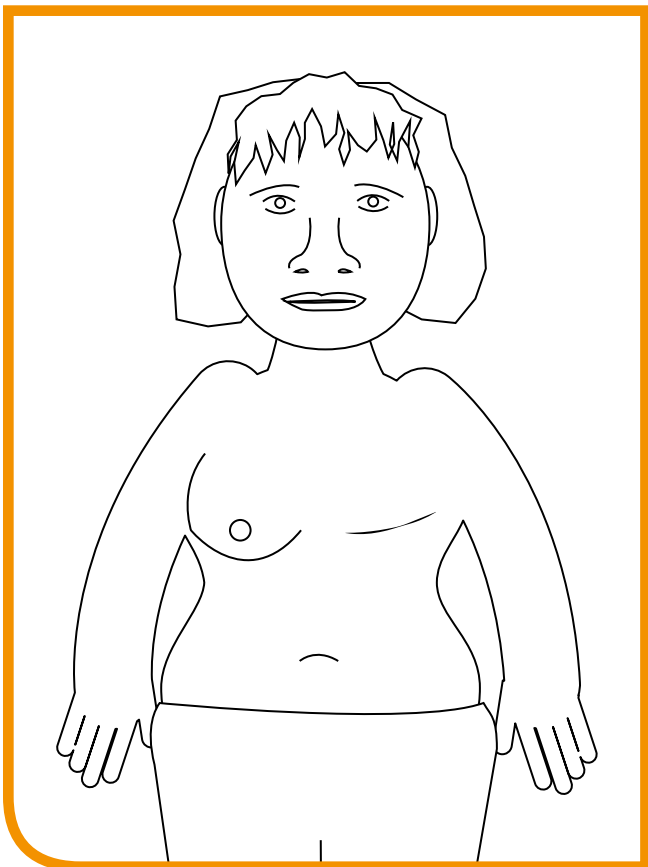
Breast-conserving surgery tries to keep as much of your breast as possible while taking out all the cancer.

Other names for breast-conserving surgery are:

- wide local excision
- lumpectomy.

Surgery

What is a mastectomy?



A mastectomy is when all of your breast is taken away including the nipple area.

The treatment team usually suggests a mastectomy when:

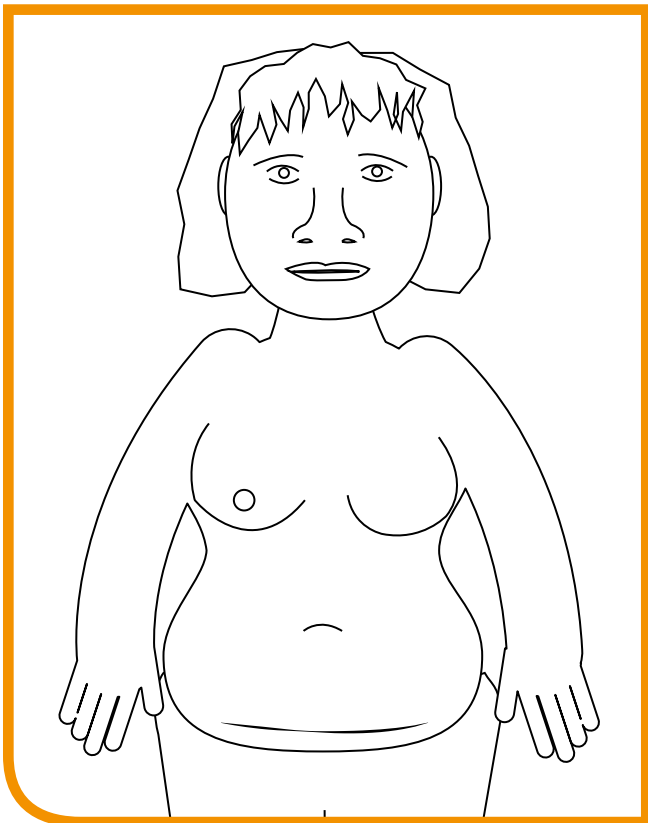
- the cancer takes up a large part of the breast
- there is more than one area of cancer in the breast.

Some people ask for a mastectomy even when it has not been suggested by the treatment team.

If you are having a mastectomy, your surgeon will talk with you about choosing whether or not to have breast reconstruction surgery.

Surgery

What is breast reconstruction?



Breast reconstruction is an operation, or more than one operation, to make a new breast shape when you have had your mastectomy.

There are lots of different ways surgeons can do a breast reconstruction. There are also different times when it can be done.

If you have a mastectomy, your treatment team should talk with you about:

- whether you want a breast reconstruction
- what sort of breast reconstruction would work best for you
- when you might have breast reconstruction.

Surgery

More about breast reconstruction

The type of breast reconstruction you have and when you have it depends on lots of things. For example:

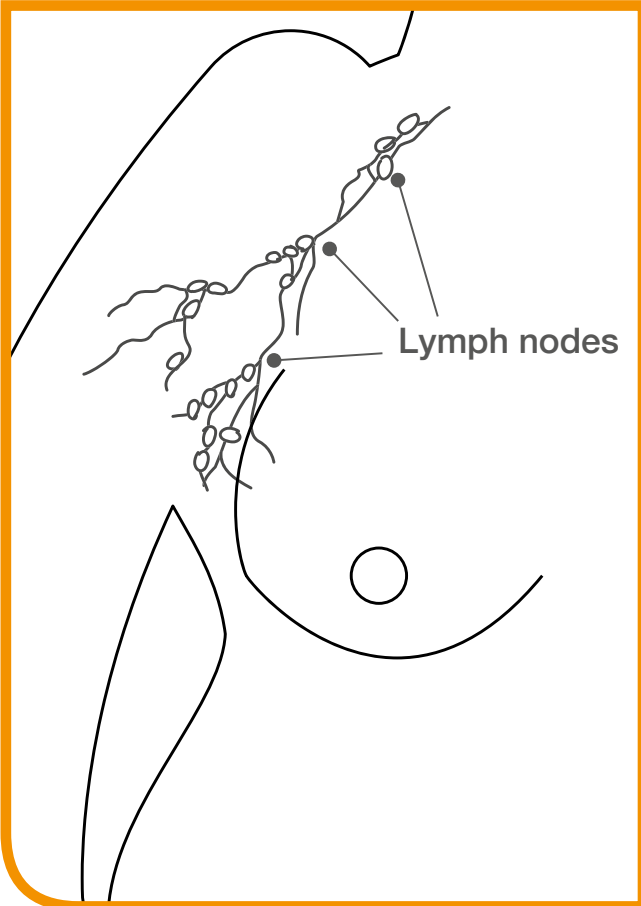
- your age
- your body shape
- your fitness
- the sort of breast cancer you have
- the breast cancer treatments you are having.

Breast reconstruction done at the same time as your mastectomy is called immediate reconstruction.

Breast reconstruction done months or years after your mastectomy is called delayed reconstruction.

Surgery

What is lymph node surgery?



Lymph node surgery is an operation to take away glands from under your arms. The glands are called lymph nodes.

The lymph nodes are part of the lymph system. The lymph system is made up of small tubes and nodes. It runs all over your body, including around your breast, into your armpits and up your neck.

Because breast cancer sometimes spreads to the lymph nodes, there are two reasons for doing lymph node surgery.

- To take lymph nodes away if tests have already shown they have cancer in them.
- So that lymph nodes can be looked at closely to see if they have cancer in them.

Most people will have lymph node surgery.

Surgery

When do you have lymph node surgery?

When your lymph node surgery is done depends on if and when breast cancer cells are found in your lymph nodes.

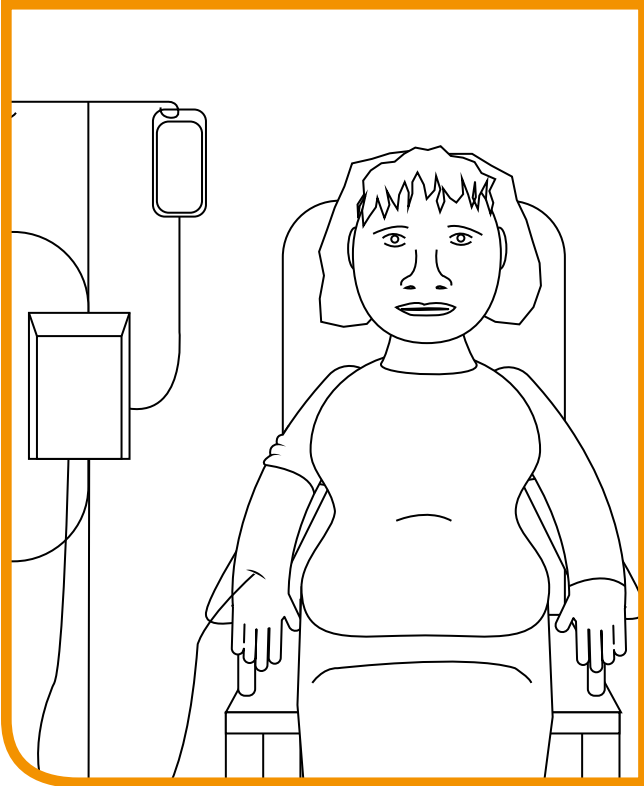
Some tests and checks to find out if there are cancer cells in your lymph nodes can be done before your breast cancer surgery.

If these tests and checks show up cancer cells, you will usually have all the lymph nodes taken out from under your arm at the same time as you have your breast surgery.

Sometimes the only way to tell for sure if there are breast cancer cells in your lymph nodes is to take one or two of them during your breast cancer surgery. They are looked at under a microscope. If breast cancer cells are seen, you might need another operation to take out some or all of your lymph nodes.

Chemotherapy

What is chemotherapy?



Chemotherapy uses drugs to kill cancer cells.

There are different sorts of drugs that can be used in different combinations.

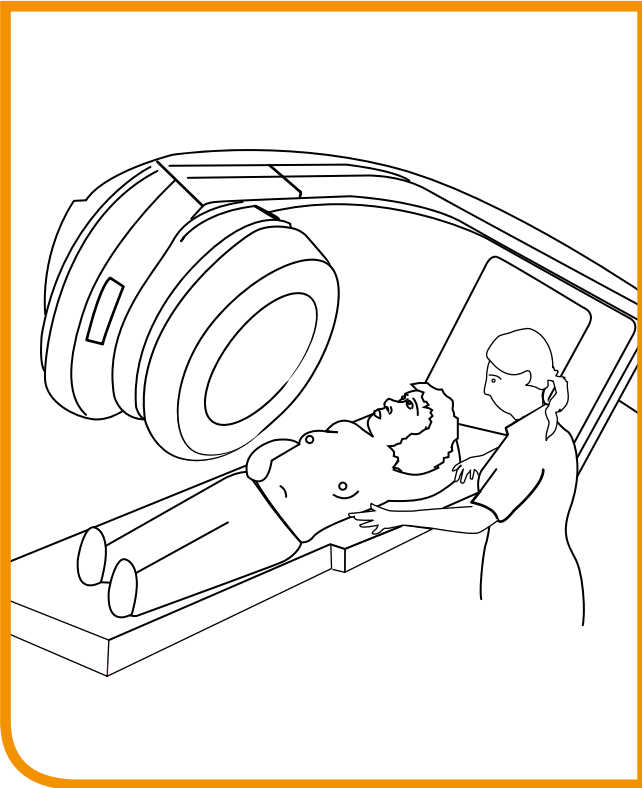
The drugs used for treating breast cancer are usually given into a vein in the hand or arm. Giving drugs this way is called 'intravenously'.

Chemotherapy is most often given after you have had breast cancer surgery. The aim is to destroy any breast cancer cells that might have spread from your breast to other parts of your body.

It can also be given before surgery to make the cancer smaller so that it is easier to take out.

Radiotherapy

What is radiotherapy?



Radiotherapy uses x-rays to kill cancer cells.

The x-rays are carefully measured and targeted so that they kill cancer cells but cause as little harm as possible to other parts of the body.

If you are having surgery then chemotherapy, radiotherapy is usually given after your chemotherapy has finished.

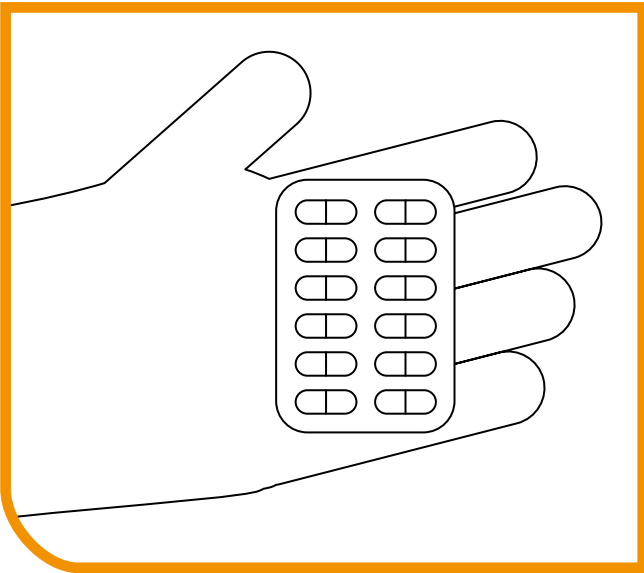
Radiotherapy is given to the breast to kill any cancer cells that might be left behind after surgery.

Some other places where radiotherapy can be used to treat breast cancer are:

- under the arm to destroy any cancer cells in the lymph nodes
- the chest after a mastectomy
- the side of your neck and around your collarbone on the side where you had surgery.

Hormone therapy

What is hormone therapy?



Hormone therapy is the name for a range of different treatments that work in a similar way.

All hormone therapies aim to stop a hormone called oestrogen from helping your breast cancer to grow.

Not all breast cancers are helped to grow by hormones. Hormone therapy is also sometimes called endocrine therapy.

Hormone therapy

How will I know if hormone therapy will help me?

Hormone therapy will help you if you have the sort of cancer that is helped to grow by oestrogen.

To find out, tests are done on a small part of the breast cancer.

If the tests show that your cancer is helped to grow by oestrogen, it is oestrogen receptor positive. This means hormone therapy will be helpful in treating your breast cancer.

If your breast cancer is not the sort that is helped to grow by oestrogen, it is oestrogen receptor negative. This means hormone therapy won't be used in treating your breast cancer.

There are lots of different hormone therapy drugs.

Hormone therapy is usually given after you have had other treatments. Sometimes it is given before surgery.

Ovarian suppression

What is ovarian suppression?

When you have not been through the menopause, your body produces a lot of a hormone called oestrogen. As well as doing its job in your body, oestrogen can help breast cancer to grow.

One way to stop your body making oestrogen is to stop the ovaries from working. Ovaries are where most of a woman's oestrogen comes from.

Stopping the ovaries working is called ovarian suppression. Ovarian suppression can be done with drugs, radiotherapy or by surgery.

Targeted therapy

What is targeted therapy?

Targeted therapy is when drugs are used to try to block the growth and spread of breast cancer.

The drugs interfere with the way breast cancer cells grow.

Targeted therapy is also sometimes called biological therapy.

Not all breast cancers can be treated with targeted therapy.

The most widely used targeted therapy is a drug called trastuzumab. It is also sometimes called Herceptin.

Trastuzumab targets a protein called HER2 because HER2 makes cancer cells grow.

Targeted therapy

How will I know if targeted therapy will help me?

Targeted therapy drugs such as trastuzumab will help you if you have the sort of cancer that has high levels of HER2.

To find out, tests are done on a small part of the breast cancer. The tests will show one of two things.

1. Your breast cancer has high levels of HER2, which means it is HER2 positive.

You will probably be offered trastuzumab to help treat your breast cancer.

2. Your breast cancer does not have high levels of HER2, which means it is HER2 negative.

You will not be offered trastuzumab as a treatment because it won't help treat your breast cancer.

Bisphosphonates

What are bisphosphonates?

Bisphosphonates are drugs that have more than one use in treating primary breast cancer.

1. To keep your bones strong when you are having another treatment that might have the side effect of weakening them.
2. If you are a woman who has been through the change (also called the menopause), bisphosphonates may make it less likely that your primary breast cancer will spread to other parts of your body when your treatment has finished.

If you are offered bisphosphonates to make it less likely that your breast cancer will spread, you'll probably be asked to have them for at least three years.

Side effects

Are there side effects from treatments?

Almost any sort of treatment has possible side effects, and it is the same with breast cancer treatments.

It is not easy to know before your treatment which side effects will happen to you.

You won't have all the side effects talked about here.

You might have some side effects that are not talked about here.

Some side effects are more common than others.

Your breast care nurse can tell you more about the most likely side effects of your treatment.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Side effects

What are the side effects of surgery?

There are lots of possible side effects from breast cancer surgery. You probably won't have them all.

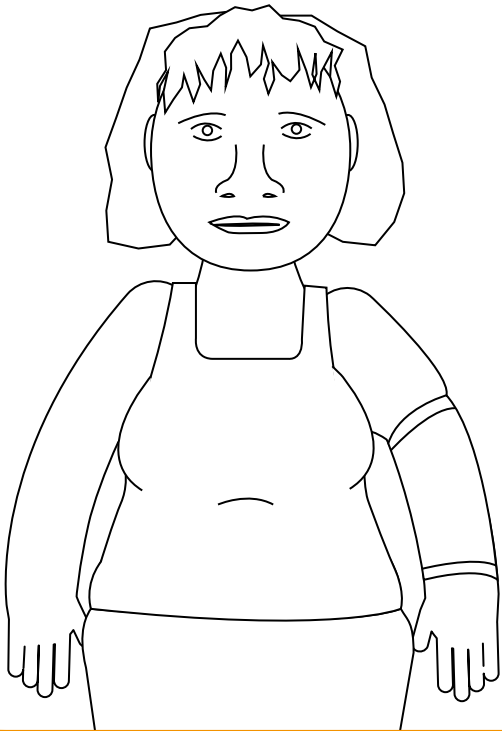
A lot of the side effects only last for a short while after you have had your operation. For example, feeling or being sick.

Some side effects might last a bit longer. These include the list below.

- Pain.
- Bruising and swelling.
- Changes in feelings in your breast area or down your arm on the side where you have your operation.
- Stiff shoulder.

Side effects

More about the side effects of surgery



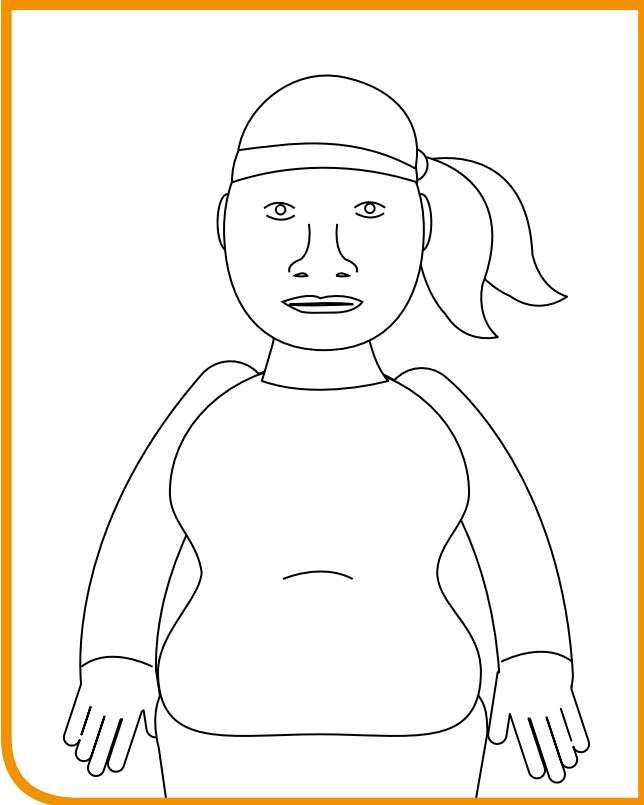
A few side effects from breast cancer surgery can stay with you for good. These include the list below.

- Scars.
- A swelling of your arm, hand or breast area that can happen weeks, months or even years after your surgery. This swelling is called lymphoedema.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Side effects

What are the side effects of chemotherapy?



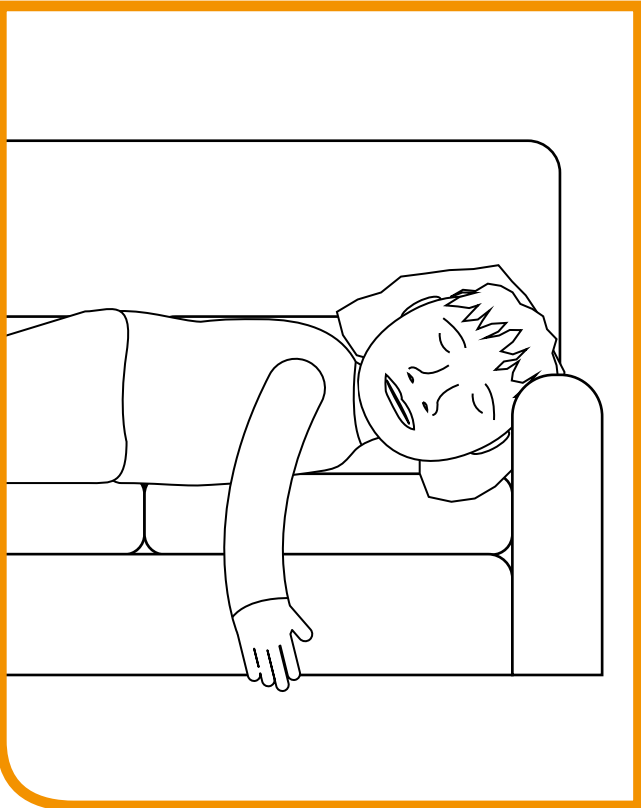
The drugs used in chemotherapy can cause a lot of different side effects. Some of the most common side effects are listed below.

- A higher risk of infection, bruising and bleeding.
- Feeling and being sick.
- Your hair getting thinner or falling out.
- Having a sore mouth.
- Being tired.
- Lowering or stopping your chance of having a baby.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Side effects

What are the side effects of radiotherapy?



The x-rays used in radiotherapy can sometimes cause side effects. Some of the most common side effects are listed below.

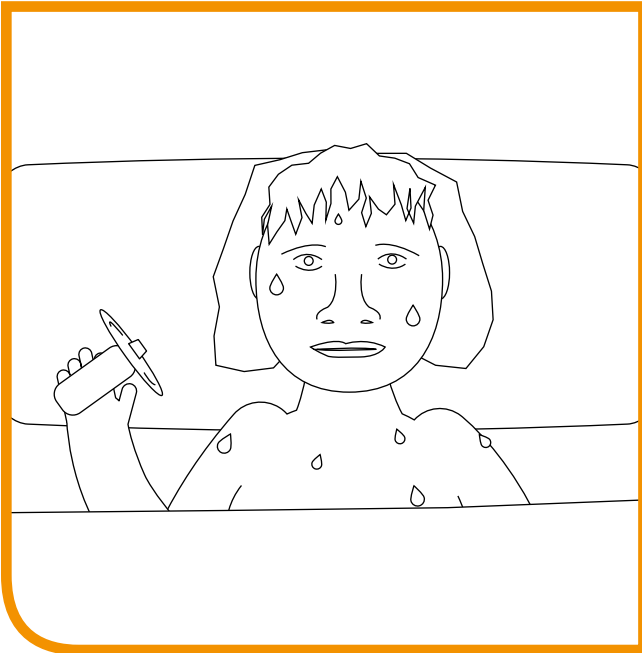
- Being tired.
- Redness in the part of your body being treated.
- Soreness and aching.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help.

Radiotherapy can also sometimes cause a swelling of your arm, hand or breast area that can happen weeks, months or even years after your treatment. This swelling is called lymphoedema.

Side effects

What are the side effects of hormone therapy?



The drugs used in hormone therapy can cause side effects. The most common side effects are below.

- Hot flushes.
- Night sweats.
- Dry, itchy or painful vagina.
- Painful joints.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Side effects

What are the side effects of targeted therapy?



The drugs used in targeted therapy can cause side effects. Some of the most common side effects are listed below.

- Shivering and feeling unwell.
- Feeling or being sick.
- Having diarrhoea.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Side effects

What are the side effects of bisphosphonates?

Bisphosphonates can cause different side effects depending on which sort of bisphosphonate you are having.

Your treatment team will tell you about the side effects you might get with the sort of bisphosphonate you are taking.

Always tell your breast care nurse or treatment team how your treatment is affecting you. They can often suggest things to help make side effects easier to cope with.

Information and support



Who can I talk to about my breast cancer?

You can talk to your breast care nurse.

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About this information

How is primary breast cancer treated? was written by Breast Cancer Care's clinical specialists, and reviewed by healthcare professionals and people affected by breast cancer.

 For a full list of the sources we used to research it:

Phone 0345 092 0808

Email publications@breastcancercare.org.uk

 You can order or download more copies from breastcancercare.org.uk/publications



When you have breast cancer, everything changes. At Breast Cancer Care, we understand the emotions, challenges and decisions you face every day, and we know that everyone's experience is different.

For breast cancer care, support and information, call us free on **0808 800 6000** or visit **breastcancercare.org.uk**

Central Office

Breast Cancer Care
5-13 Great Suffolk Street
London SE1 0NS
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