Philadelphia magazine presents

THINKPINK



FOR MORE ON BREAST HEALTH: PHILLYMAG.COM/THINKPINK





THE OFFICIAL SPONSOR OF BIRTHDAYS.

BREAST CANCER -HOW YOU CAN MAKE A DIFFERENCE

The chance of a woman developing invasive breast cancer at some time in her life is about 1 in 8. This year alone more than 230,000 women will hear "you have breast cancer," including 3,000 in the Greater Philadelphia area. We've seen a lot of progress made against the disease in the past century, but these numbers illustrate how much more there is to be done.

That's where you come in. The American Cancer Society is making the most impact in the fight against the disease, and support from people like you is what makes that possible. By contributing to our mission, you can help change these numbers.

The American Cancer Society has been fighting cancer for more than 100 years. We're helping people with breast cancer today, and we are working tirelessly to find cures to end the disease tomorrow.

For example, the American Cancer Society has played a role in nearly every major breast cancer research breakthrough in recent history. We have demonstrated that mammography is an effective screening test for breast cancer and funded research that has led to the development of Tamoxifen and Herceptin. We are continually increasing our knowledge about the influence of genetics and unhealthy lifestyle choices on a person's breast cancer risk. These efforts have contributed to a 34% drop in the breast cancer death rate in the past two decades.

These milestones are possible with the support of volunteers and donors like you. We encourage you to volunteer, make a donation, or walk in the Making Strides Against Breast Cancer event closest to you. We also encourage women in our community to stay well by making healthy lifestyle choices, talking to their doctor about annual screening starting at age 40, and encouraging all their loved ones to do the same.

To find out more, visit cancer.org/fightbreastcancer

Sincerely,



Miole Crist

Nicole Crist

Philadelphia Senior Director of Community Engagement **East Central Division** American Cancer Society, Inc.



Wan & Howard

Alan G Howald

Volunteer Chair Greater Philadelphia Area Leadership Council American Cancer Society, Inc.

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Retire the Lame Excuses, Go Get a Mammogram

The endless "To Do" list – everyone seems to have one these days. For many, scheduling their annual mammogram keeps slipping to the end of the list. But it shouldn't.

Catching breast cancer at an early stage significantly improves the chance that it can be successfully treated and cured. In fact, women diagnosed with stage one breast cancer have a 100% five-year survival rate. Here are the top 10 excuses used to avoid mammograms - and why they simply don't hold water.

I'M TOO YOUNG FOR A MAMMOGRAM.

The American Cancer Society recommends women get annual mammograms beginning at age 40 - younger for those with certain risk factors or a family history of the disease.

8 I DON'T HAVE A HISTORY OF BREAST CANCER IN MY FAMILY.

While risk is increased for women with a close blood relative with breast disease, 85% of women who get breast cancer DO NOT have a family history of the disease.

8 MAMMOGRAMS ARE PAINFUL.

Mammograms may be uncomfortable. but should not be painful. Talk to your healthcare provider about ways to make the test more comfortable.

I CAN'T AFFORD A MAMMOGRAM.

Most insurance companies cover the cost of routine screening mammograms. Low-cost and free mammograms are also offered through national programs and community organizations.



SUPPORT FROM THOSE WHO'VE BEEN THERE

It's common for breast cancer patients to be surrounded by friends and family eager to help. But even with that support, many patients describe themselves as feeling emotionally "alone."

"Finding out you have breast cancer can leave you overwhelmed, confused and vulnerable," says Sue Axler, a retired Bucks County teacher who was first diagnosed with breast cancer in 1988 and continues to fight the disease today. "People can really benefit from talking to someone who has been through the journey themselves."

Meeting that need is "Reach to Recovery" - a free American Cancer Society program that pairs current breast cancer patients with those who have been through treatment. Reach to Recovery volunteers are specially trained to help people through their experience by offering understanding and support.

Axler has been on both sides of Reach to Recovery - first as a patient and today as a volunteer. She says having a "friendly voice" helped ease her fears and concerns.

"The woman I was paired with helped me through surgery, was there when I lost my hair from chemotherapy, and directed me to a support group," says Axler. "It was wonderful having someone I could turn to who really understood."



For more information about the Reach to Recovery program or to become a volunteer, call 1-800-227-2345 or visit cancer.org.



I DON'T HAVE TIME TO GET A MAMMOGRAM.

A typical screening mammogram takes 15-30 minutes, and many mammography centers now offer convenient evening and weekend appointment times and free parking.

I'M AFRAID THEY'LL FIND SOMETHING WRONG.

If a problem is detected, it's good to catch it early. Early detection of breast cancer can greatly improve treatment options and prognosis for the disease.

THE RADIATION FROM A MAMMO-**GRAM CAN CAUSE** CANCER.

Modern mammography involves a tiny amount of radiation - less than a standard chest X-ray - and does not significantly increase the risk for cancer.

a MAMMOGRAMS ARE USELESS. I MAY HAVE SOMETHING THE TEST DOESN'T FIND.

Mammograms can often show a breast lump before it can be felt. They can also show tiny clusters of cells that could potentially be cancerous.

0 I DO BREAST SELF-EXAMS SO I DON'T NEED A MAMMOGRAM.

Research shows that breast selfexams play only a small role in finding breast cancer. An annual mammogram is still the best means of detection.

◐ I'M A MAN. SO I DON'T NEED A MAMMOGRAM.

Men who have a family history of breast cancer, have found a lump in their breast, or are experiencing breast pain should speak with their doctor.

40% less chance to be called back for a second look*

3D Mammography.

Transforming breast cancer screening.

Earlier detection — fewer false alarms. The test matters.

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FOUNDER AND PRESIDENT, BREASTCANCER, ORG



As I went through the process of diagnosis and treatment, I realized just how important every word and expression matters. You study your doctor's face and hang on every word he or she says. Even small details can make a big difference. Realizing how much excellent care depends on excellent communication sets the standard for how I interact with my patients. They deserve the best.

Why did you launch

Breastcancer.org? I wanted to make sure people could receive the right information at the right time on breast health and breast cancer to protect their precious lives. With a great team and taking full advantage of technology, I was able to create a web and mobile resource where people can connect with medical expertise and each other 24/7. I had no idea it would grow into the world's #1 source of breast cancer information with 10 million followers. We were a small operation that has grown into a global non-profit communications company based right here in the Philadelphia area.

What is Think Pink, Live Green?

Think Pink, Live Green is a stepby-step guide I created to help women and girls reduce their risk of breast cancer. Most breast cancers don't run in families. In fact,

research shows that most breast cancers are related to reproductive and lifestyle risk factors and environmental exposures. People need to understand that how you lead your life and what you take in from the outside environment can directly affect what happens inside your body.

What inspires you?

Main Line Health®

I'm inspired by my wonderful patients and my talented medical colleagues. I'm also grateful and fortunate to work in a place where there is a strong commitment to excellence throughout the total patient experience - from risk reduction, detection and treatment to recovery and survivorship. My passion and determination to provide the best care possible is further fueled by exciting new medical advances and the opportunity to prevent breast cancer in the next generation.



FAMILY FIGHTS BREAST CANCER TOGETHER

Laughter was always a familiar sound among the Loughlins, a close-knit, fun-loving family from Bucks County. That's why when the family's five sisters all tested positive for BRCA2 - one of the so-called "breast cancer genes" - they started calling each other "mutants" as a coping mechanism.

Their story began in 2002 when middle sister Helen was diagnosed with breast cancer at age 39. At the time, she had never heard of the BRCA genes. But she did know breast cancer ran in her family. Her grandmother had beaten it, and a great aunt had died of it.

"I had genetic testing done at the urging of my cousin, and the results came back positive for BRCA2," says Helen. "I didn't really know what that meant. I ended up having a lumpectomy and radiation, and everything was fine."

Seven years later, Helen was diagnosed with ovarian cancer, another disease that is closely linked to the BRCA genes. At that point, the four remaining sisters went for genetic testing. All tested positive.

"We weren't shocked by the results because of our family history," says Carol, the youngest sister. "I think all of us actually felt better informed about our situation."

As a proactive measure, all the sisters had their ovaries removed to lessen the chance they would contract ovarian cancer. Still, the trials kept coming for the family.

In 2011, sister Mary was diagnosed with breast cancer, followed a few months later by her mother, Cass. That's when "the sirens started going off" for everyone.

"I had looked into the possibility of a double mastectomy after I tested positive for the BRCA2 gene, but once Mary got breast cancer that was the turning point for me," says sister Chris. "I didn't want to spend the rest of my life looking over my shoulder in fear. If there was something I could do to lessen my risk, I wanted to do it."

Serious discussions began among the sisters about all having double mastectomies. For some, it was an easy decision. For others, it took some time.

"I admit I dragged my feet," says oldest sister Kathy. "I kind of rationalized it; maybe I didn't have to go to this extreme. But my sisters convinced me that it was the best way to lower my our chance of getting breast cancer."

Beginning in January 2012, all five sisters and their mother began having double mastectomies - one every two weeks. Each helped the others through the process, including their father, who they describe as the rock in the family.

Following the successful mastectomies and breast reconstruction, pathology results from two of the three sisters who hadn't contracted breast cancer came back showing atypical cells – a possible precursor to breast cancer. "That validated the decision for me," says Chris.

Since their positive tests for BRCA2, many of the sisters' children have been tested - both girls and boys, since men can also be carriers of the gene. A number have come back positive, including Chris's 25-year-old daughter, Caitlin.

"I was a senior in college when all of my aunts had surgery, and I told my mom I wanted to know," says Caitlin, who tested positive for BRCA2. "The result wasn't a huge shock; I think it was harder for my mom to hear the news."

Caitlin now gets six-month check-ups and yearly breast MRIs, and will get a yearly mammogram starting at age 30. She says that knowing her positive status gives her a feeling of control over her life.

When asked what she would tell other women who have a family history of breast cancer, Cass responded, "Get tested, absolutely without question. There are no guarantees in life, but this test can give you some control over your future and give you a better shot at living a long life."



Who should get tested?

Women with a family history of breast cancer are at greater risk of developing the disease themselves. In some cases, the risk is tied to two genes - BRCA1 and BRCA2. When these genes function normally, they help repair DNA damage and prevent cancer cell growth. But when they are damaged, the risk of developing cancer goes up. Fortunately, modern genetic tests can identify these faulty genes, allowing women to make informed, proactive decisions about their health. A gene mutation is more likely to run in your family if:

- · Several women in your family have had breast cancer, or if any woman in your family was diagnosed with breast cancer at a young age (before age 50)
- · Any woman in your family has had ovarian cancer
- · Men in your family have had breast cancer
- · Your family is of Ashkenazi (Eastern European) Jewish descent

Source: breastcancer.org



I was shocked when a routine mammogram revealed a tumor in my breast. I needed to have a mastectomy, and for me, this was devastating. I chose a surgeon at Penn because of her outstanding reputation and experience, and stayed to receive all my care, because I wanted to know I had access to every option available. From advanced surgical procedures and genetic testing, to reconstruction that will make me feel like me again, I'm a living witness to tell that the cure is within at Penn's Abramson Cancer Center.

MY LIFE IS WORTH PENN MEDICINE.

See my story at **TheCureisWithin.com.**Then, tell the world.



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"My breast cancer diagnosis was the heaviest weight I've ever had to bear."

As a world-record-setting weight lifter, I was determined to bring the tenacity that had served me so well in the gym to my fight against breast cancer. I went to Cancer Treatment Centers of America® (CTCA) in Philadelphia for what was my second opinion. As a chiropractor, it was really important to include chiropractic and holistic healthcare with my traditional cancer treatment. The fact that CTCA® did that and also had top-notch medical teams made it the right place for me. Today, I'm busy training for fitness competitions again and I'm more certain than ever that CTCA was the right choice for me.

See Karyn's entire story at cancercenter.com/community/survivors/karyn-marshall

At Cancer Treatment Centers of America, we encourage you to be an informed consumer when it comes to your health care: Research your treatment options and make the choice in which you are most comfortable and confident.

To learn more about seeking a second opinion call 800-333-CTCA or visit cancercenter.com



Winning the fight against cancer, every day."



What does the future hold for cancer care?

The future is personalized treatment. Right now we have three to four general strategies for fighting cancer. In the future we might have 10 to 15 strategies because we'll know what will work best on a particular tumor due to genomic testing. Just as importantly, we'll also know who won't benefit from aggressive therapy, thus improving the quality of life for patients.

What is your typical day like?

A great deal of my clinical practice involves breast cancer. Even though I'm a surgeon, I interact with patients during all stages of their journey - from biopsy to diagnosis to recovery. I may not be the one overseeing their chemotherapy or radiation, but I develop such a strong relationship with them that I still remain involved with their care

What is the newest treatment being offered today? Intraoperative Radiation Therapy (IORT) is a concentrated and precise way of radiating the breast tissue - and only the breast tissue - while still in the operating room during surgery to remove a tumor. Using IORT, we can accomplish in four minutes what could take weeks for some patients after surgery.

Have patients changed since you first started practicing?

Cancer Treatment Centers of America

> Women come in with much better questions than in the past. This is due to the Internet, but also to a greater openness our society has about cancer. Patients want to know why you make the treatment choices you do and that's a good thing.

Is there a particular patient who has stayed with you? I'll never

forget an 80-year-old breast cancer patient who was thrilled that she could have a lumpectomy and avoid a mastectomy. She said, "I'm not using them [her breasts] very much, but they sure dress a girl up!" I see patients all the time who have never been asked what is important to them. That woman taught me to get to know my patients and learn what they value.







THE SUPER FOODS RAINBOW

Attention everyone waiting for cheesesteaks, soft pretzels and hoagies to be classified as "super foods": Prepare to be disappointed.

"A super food is packed with nutrients that may help ward off cancer or other diseases," says Jen Koffs, a clinical oncology dietitian at Cancer Treatment Centers of America in Philadelphia. "Well-known super foods are fruits and vegetables like berries, broccoli and spinach, but they also include some nuts and fish."

According to Koffs, super foods can often be identified by their color. The deeper and more varied the better.

"I tell people they should try to get every color of the rainbow in their diet on a daily basis," she says. "Think red tomatoes, purple cabbage, blueberries, collard greens, orange sweet potatoes and yellow squash."

But what exactly makes a super food super? In many cases, it's the high amount of antioxidants found within them. Antioxidants are molecules which patrol the body destroying free radicals – harmful atoms that can cause cell damage and lead to age-related diseases such as cancer or heart disease.

"In addition to antioxidants, there are other nutrients in super foods that can help flush cancer-causing carcinogens out of the body or stimulate anticancer enzymes,"

JENN KOFFS' TIPS ON HOW TO WORK SUPERFOODS INTO YOUR DIET

- → Cut up vegetables and store them in small containers for easy access during the week
- → Use frozen fruit to make smoothies
- → Include greens or other vegetables in your sandwiches
- → Eat fish at least twice a week and a handful of nuts once a day
- → Snack on fresh vegetables and hummus during the day
- → Mix ground flaxseed into hot cereal and smoothies

"THE BENEFIT OF EATING SUPER FOODS IS GREATER IF YOU START YOUNG, BUT IT'S NEVER TOO LATE TO START EATING RIGHT AND CUT BACK ON FOODS THAT ARE DOING DAMAGE TO YOUR BODY," SAYS KOFFS.

SUPERFOODS

Berries

Cruciferous vegetables (broccoli, cauliflower, cabbage, kale, collard greens, Brussels sprouts)

Carotenoid-rich foods

(carrots, sweet potatoes, winter squash, cantaloupe, cooked tomatoes, apricots, leafy greens, watermelon)

Nuts (pistachios, walnuts, almonds)

Beans/peas (legumes)

Flaxseed

Green tea



CHECK OUT THE BELOW DELICIOUS SUPER FOODS RECIPES BROUGHT TO YOU BY CANCER TREATMENT CENTERS OF AMERICA AT PHILLYMAG.COM/THINKPINK

Carrot Ginger Bisque, Home Made Power Bar, Mustard Glazed Brussels Sprouts, and Pan Seared Glazed Salmon

Chief Cancer Control Officer: Lifestyle Choices Do Make a Difference



Whether or not you get breast cancer can feel like a roll of the dice. But that's not entirely true, according to a leading expert at the American Cancer Society (ΔCS)

"Many risk factors for breast cancer cannot be controlled, including gender, age or family history, but there are ways to help lessen the chance that a woman will get this disease," says Richard Wender, MD, a primary care physician and Chief Cancer Control Officer for the ACS.

In this position, Dr. Wender oversees the ACS global cancer control program. From this perspective, he wants all women to understand that lifestyle factors, including tobacco use, diet, exercise and routine screenings can influence a woman's breast cancer risk.

"Most people readily acknowledge the link between tobacco use and lung cancer, but studies show that women who smoke are at an increased risk for breast cancer as well," says Dr. Wender.

As for diet and exercise, obesity is clearly a risk factor. Even 15 to 20 extra pounds is associated with increased risk, especially in post-menopausal women. According to Dr. Wender, "There is good evidence that eating lots of fruits and vegetables, keeping a healthy calorie count, and staying physically active can reduce the overall risk of breast cancer. Excess alcohol intake, even an average of two drinks a day or more, also increases a woman's risk for developing breast cancer.

"And regular screenings are critically important," adds Dr. Wender, who says that there is at least a 19 percent reduction in the risk of dying from breast cancer with annual mammogram screenings for women age 40 to 49.

"It's never too late to change your lifestyle, and these changes not only reduce breast cancer risk, they help with other areas of your health as well."



The biggest challenge for cancer treatment often lies

in trying to navigate medical needs with other daily responsibilities. Take Christina Meehan of Ardmore. At 31, she was diagnosed with inflammatory breast cancer. She immediately began treatment, including surgery and numerous rounds of chemotherapy and radiation.

For six months, Meehan's mother, who is from out of town, stayed with her, but she eventually had to return home. With no car, Meehan planned to use public transportation to get to her radiation appointments - which was more difficult than she expected.

"They were early morning appointments, and I was often walking in unshoveled snow to get to the train station," she says. "It was exhausting, but I could only ask friends or co-workers for rides so many times before feeling like a burden."

That's when Meehan learned about the American Cancer Society's free "Road to Recovery" program, where volunteers drive patients to appointments.

"The program was a godsend," says Meehan. "The drivers were always so supportive. I never felt pressured to say anything about my diagnosis or treatment either." Once finished treatment, Meehan became a Road to Recovery volunteer herself.

"It's easy to get started as a driver...anyone with a car, clean driving record and a little bit of time can do it," she explains. "I work during the day so I can only provide rides when I'm off, but the program works around your schedule. Even if you can only provide one ride per month it means so much to patients."

For more information about the Road to Recovery program, call 1-800-227-2345 or visit cancer.org

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Digital Breast Tomosynthesis, also known as **3D Mammography**, provides a more accurate view of the breast, allowing physicians to better pinpoint any abnormalities, leading to better detection and greater peace of mind.

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invasive breast cancers* *According to a JAMA study





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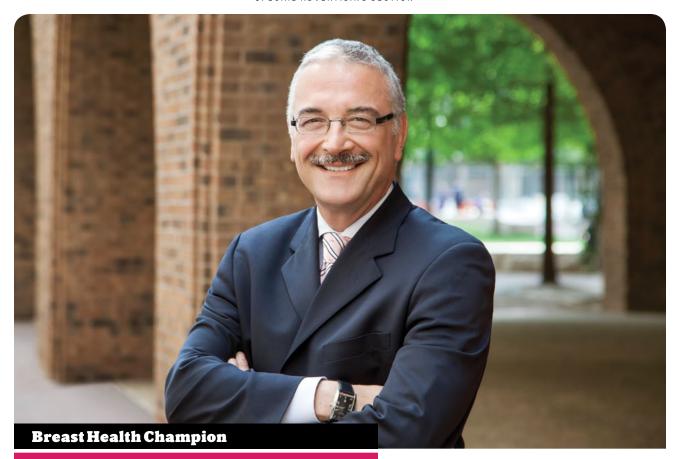


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at Thomas Jefferson University

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MASSIMO CRISTOFANILLI, MD, FACP

DIRECTOR, JEFFERSON BREAST CARE CENTER DEPUTY DIRECTOR, TRANSLATIONAL RESEARCH THOMAS JEFFERSON UNIVERSITY AND HOSPITALS



What impact do your patients

have on you? You try as much as possible to not get too emotionally involved, but it can be very difficult. In some cases these are young mothers, young wives or daughters. No matter at which stage of their disease they come to us they are always scared and looking for help. I think it is my responsibility to educate them about their disease before the treatment begins and make them comfortable. I always try to imagine what I would like to know if I was in their position. My patients know that I feel for them like they're members of my own family.

What does 'personalized medicine' mean? Research

advances have given us a much better understanding of breast cancer biology. Primary breast cancer is not a single clinical and biological entity, rather there are different subtypes with different characteristics. Using advanced diagnostics allows us to design more accurate or personalized treatments. Simply stated, we are now in the position to implement 'personalized' treatments that have the best chance of working for you as an individual. Previously, most patients received the same broad brush-stroke treatments.

You are an expert on liquid biopsy... what is that? Standard biopsies involve extracting tissue from a patient and analyzing it for its tumor characteristics. Liquid biopsies are relatively simple blood tests that allow us to enumerate cancer cells circulating in the blood, evaluate their genes or simply monitor tumor DNA. When speed is paramount or standard biopsy is too painful or impossible, liquid biopsy can help tell us whether a patient's cancer requires more aggressive therapy or when a treatment stops working, allowing us to switch therapies.

Are these liquid biopsies being used right now? We are offering the test at Jefferson, and research is ongoing. I believe in a couple of years the bulk of the data will be in and more doctors will become comfortable using these tests.



A Surprise Diagnosis

Eight years ago this fall, Margaret Zuccotti was thoroughly enjoying motherhood and nursing her third baby when she started to experience symptoms of mastitis, or a breast infection. Her breast was red, swollen, and painful to the touch. When doctor-prescribed antibiotics were ineffective, she underwent tests and was referred to a breast surgeon, who diagnosed her with stage IV inflammatory breast cancer. This came as a real surprise for Margaret, since breast cancer does not run in her family. She was just 37 at the time.



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A Tailored Treatment Plan

Doctors at Memorial Sloan-Kettering in New York referred Margaret to Fox Chase Cancer Center, where Dr. Lori Goldstein ordered further testing and developed a tailored treatment plan, including eight months of chemotherapy. An avid lifelong athlete, Margaret believed exercise helped her recover more readily. "I was amazed at how well my body responded to treatment," she says. And she felt a true connection to her nurses and her treatment team. Five years ago, under the careful guidance of Dr. Goldstein and Dr. Richard Bleicher, she underwent a mastectomy. Looking back, she feels she did everything she could with her Fox Chase team to remain cancer-free.

Margaret has resumed her full life, including the activities she loves with her husband and children: running, skiing, fishing, and coaching. "A cancer diagnosis is incredibly hard on families," she says, "and Fox Chase Cancer Center has helped my family face this challenge with confidence and success."



LORI J. GOLDSTEIN, MD

DIRECTOR, THE NAOMI AND PHIL LIPPINCOTT BREAST EVALUATION CENTER DEPUTY ASSOCIATE DIRECTOR OF CLINICAL RESEARCH FOX CHASE CANCER CENTER



Can you provide an example of the impact research has had?

A few years ago I had a patient in her mid-30s with stage four breast cancer. Fifteen years prior to that, the average survival for a patient like her was 24 to 36 months. But thanks to molecularly targeted treatments, she has done well and has gone on to run marathons and raise her children. If she had been diagnosed prior to this new treatment she likely would not have had that outcome. She provides inspiration to me every day.

In addition to providing patient care, you are also an active

researcher. Conducting and participating in research is one of the many hats I wear. Most of my research is in the area of novel targeted therapy - often referred to as 'personalized medicine.' We now know that breast cancer is not just one disease... that each tumor has a unique biology and genetic makeup. Knowing this, we are starting to be able to choose the treatment that has the best chance of working against a particular tumor. At Fox Chase, I work with innovative investigators from basic, clinical and population science who collaborate in their research of breast cancer prevention - what causes tumors to develop, detection, treatment and survivorship.

Is there an exciting breakthrough on the horizon? We are

living in extraordinary times. While there is not one single big breakthrough coming, we have seen an average of one new breast cancer treatment a year for the last 10 years, which is extremely encouraging. We have also reduced mortality rates from breast cancer 30 percent over the last 30 years, a trend I expect to continue. One thing I learned early on in my career is that there are no quick homeruns in science. Meaningful advances rest on the shoulders of many smaller discoveries. Not only are breast cancer survivors living longer because of research, they are also living better.



From 'Action News' to 'Taking Action'

Since joining 6abc as its health reporter, Ali Gorman has broadcast countless stories about breast cancer. In 2010, those stories suddenly became very personal.

"My sister was diagnosed with stage three breast cancer at the age of 36," says Gorman, who has served as host for the local Making Strides Against Breast Cancer walk since 2008.

Although she worked as a nurse prior to her broadcast career, Gorman says that nothing could have prepared her for watching a loved one go through the cancer journey.

"It was truly an emotional roller coaster," she says.
"My sister underwent surgery, chemotherapy and radiation. It wasn't easy but she took each day and each treatment at a time and stayed positive throughout."

Gorman says that her sister's fight against breast cancer reinforced in her mind the impact of research and the important role fundraising has in supporting it.

"The treatments my sister received saved her life, and they were discovered through research," she says. "Thanks to new discoveries, many more women are surviving breast cancer and 'Celebrating more Birthdays' as the American Cancer Society's slogan points out."

Today, Gorman's sister is cancer free and back to living an active life.

"I'm honored to work with the American Cancer Society," says Gorman. "Standing on the stage before the walk and seeing that sea of pink is an incredible sight."









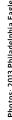
WEAR YOUR EAGLES PINK IN OCTOBER

On October 5th in the home game against the St. Louis Rams, Lincoln Financial Field will become a sea of pink in the name of breast cancer awareness. It's part of the Eagles Tackling Breast Cancer Campaign that raises awareness and funds to support breast cancer care and research in partnership with Thomas Jefferson University Hospitals. Fans will wave pink rally towels, and players, cheerleaders and even SWOOP will be outfitted in pink. An online auction of the pink equipment worn by players during the game at nfl.com/auction will raise hundreds of thousands of dollars to support American Cancer Society through the NFL's Crucial Catch Campaign. Locally, the campaign will fund an American Cancer Society grant to increase breast cancer screenings among women in southwest Philadelphia, without regard to insurance status.









HELPING WOMEN FEEL BEAUTIFUL

DURING TREATMENT

Feeling attractive while being treated for cancer is a tall order for many women. That's where "Look Good Feel Better" comes in.

Look Good Feel Better is a free American Cancer Society program that boosts women's morale by providing them with expert beauty advice to cope with skin changes and hair loss caused by cancer treatments. In the Philadelphia region, the program serves about 700 women annually.

Jean Gallagher, a licensed medical esthetician at Jefferson University Hospital, has volunteered to teach monthly Look Good Feel Better sessions for the past five years. She says the two-hour class focuses on helping women choose and apply skin care products, makeup, hair accessories and other beauty products while they are being treated for cancer.

"I'm a breast cancer survivor myself so I can empathize with these women - it's hard to view yourself as beautiful and confident when you feel bad," says Gallagher. "I keep my classes lighthearted and fun, and by the end of the two hours the mood in the room is elevated and the women begin to bond."

Gallagher limits each class to a handful of participants in order to provide a personalized experience for each woman. At the end of the class, each woman walks out made up and feeling more confident

"After my treatment I knew I wanted to give back in some way," says Gallagher. "I'm happy my profession allows me to volunteer my time and help other women feel better."





For more information about Look Good Feel Better, call 1-800-227-2345 or visit cancer.org



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Screenings for Underinsured Women

October 4 at 7:30 am Riddle Hospital

3D Mammography informational seminar

October 8 at 6 pm Main Line Health Center in Broomall

Latest Advances in Breast Cancer Risk Diagnosis and Treatment

October 8 at 10 am Main Line Health Care at Exton Square

Nutrition and Healthy Cooking for Breast Cancer Patients

October 21 at 6 pm Main Line Health Center in Newtown Square

Living with Cancer for Patients and Families

October 30 at 6 pm Main Line Health Center in **Newtown Square**

How Cancer Treatment can Affect Your Heart

November 19 at 7 pm Main Line Health Center in Broomall

For these and other events, visit mainlinehealth.org/events

Paws for the Cause

October 5 at 9 am Fox Chase Cancer Center foxchase.org/information/calendar

Look Good Feel Better

Various locations and times, call 1-800-227-2345 for more information

Questions You Should Ask Your Healthcare Provider

October 9 at noon

Navigating Through Cancer Treatment

October 23 at noon

Cancer Screening Program for Women

Thursdays in October Jefferson Breast Care Center City and Methodist Hospital

Wellness Yoga for Cancer Patients

Tuesdays at noon Jefferson Alumni Hall in Philadelphia

For these and other events call 1-800-JEFF-NOW

Ella Bella Fashion Show to support **Bringing Hope Home**

October 10 at 6pm Crowne Plaze Valley Forge bringinghopehome.org/event/ellabella/

Brides Against Breast Cancer Charity Wedding Gown Sale and Bridal Show

VIP event – October 10 at 6pm Main event - October 11 at 11am Sonesta Hotel bridesagainstbreastcancer.org

Pink Thai Ball

October 18 at 6:30 pm komenphiladelphia.org/events

The Butterfly Ball

October 18 at 6:30 pm Loews Philadelphia Hotel lbbc.org/events

Friends of the American Cancer Society Party with a Purpose

October 19 at 5:30 pm Union League of Philadelphia friendsofacs.org

The Black and White Party

October 23 at 7pm (VIP at 6pm) Vie rockforbreastcancer.org

Forever Young: Bringing Happiness to Life!

November 9 at 9am Philadelphia Marriott Downtown foreveryounghealth.org

Breast Tomosynthesis: The Latest Technology in Breast Mammography

October 9 at 6:30 pm Fern Hill Medical Campus, West Chester PA

Breast Cancer Risk: Through the Eye of the Microscope

October 28 at 7 pm Kesher-Israel, West Chester PA

Taking Care of Yourself - A Women's Workshop

November 1 at 9:30 am St. Paul's Church, West Chester PA

Turn Your Health Around

November 15 at 9:30 am Chester County Hospital

For these and other events, visit chestercountyhospital.org/wellness



DEBRA SOMERS COPIT, MD, FACR

NSTEIN HEALTHCARE NETWORK

Your specialty is breast radiology, what does that mean?

It means I spend my day trying to find cancer in its early stages, primarily using mammography. Years ago, that's all breast imaging involved - radiologists reading mammograms in a dark room. Today, we play a greater role on the care team... talking to patients, explaining to them what the mammogram shows, and performing minimally invasive biopsy procedures.

Who has been your biggest influence in your career? My father is a breast surgeon and he is always looking for a better way to do things. He was an early adopter of the lumpectomy. I'm fortunate that I get to work with him today as a colleague.

What has been the biggest change you've seen in your

career? Digital mammography has had the biggest impact. It not only gives us a better view of the breast but it also created the platform for 3D mammography. This technology allows us to see more suspicious spots and catch cancer earlier.

What still needs to be done to raise awareness about the importance of mammograms?

A few years ago, the U.S. Preventive

Services Task Force created a lot of confusion when it recommended that women age 40 to 50 no longer get screening mammograms. That recommendation hasn't been embraced by healthcare providers or cancer-prevention organizations. I still get questions every day from women about what to do. Bottom line, get a mammogram every year beginning at age 40. And there is no upper age limit. Mammography still has merit well into your late 80s.

What do you wish you could say to all women? Stop making excuses for not getting a mammogram, none of them are valid. You just have to make time, you have to.