Managing the risk of breast cancer

INTRODUCTION

Breast cancer accounts for nearly a third of all cancers diagnosed in women each year in the U.S.—but men aren’t immune. In 2012, 226,87 new cases of breast cancer are expected to be diagnosed in women, and another 2,190 in men.¹

This year alone, nearly 40,000 women are expected to die from this disease. Only lung cancer accounts for more cancer deaths in women.²

And while male breast cancer is very rare, mortality rates have actually increased in the last decade.³

Women have about a 1-in-8 chance of developing invasive breast cancer during their lifetime.⁴ Despite the large number of cases diagnosed each year, the disease is highly treatable, particularly in the earliest stages. When breast cancer is diagnosed before it spreads to the lymph nodes or other parts of the body, patients have a 99% survival rate.⁵

KNOW YOUR RISKS

While there is no certain way to prevent cancer, you may get an earlier diagnosis and improved prognosis by monitoring breast changes.

Be aware of these uncontrollable risk factors:

- **Gender.** Breast cancer is diagnosed primarily in women.
- **Age.** 95% of new cases and 97% of breast cancer deaths occur in women aged 40 and older.⁶
- **Ethnicity.** Whites and African-Americans are more likely than other racial and ethnic groups to be diagnosed with breast cancer.
- **Genes.** Certain inherited genetic mutations for breast cancer (BRCA1 and/or BRCA2) can increase your risk.
- **Family or personal history of breast cancer.**
- **History of high-dose radiation to the chest.**
- **High bone density** after menopause.
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You can control these factors to minimize your risk:

• Obesity. Weight gain during adulthood is associated with a higher risk of breast cancer. The increased fat tissue boosts estrogen levels and the likelihood of cancer.

• Postmenopausal hormones. Using combined hormone replacement therapy or estrogen and progestin therapy may boost your risk.

• Alcohol. Consuming the equivalent of two alcoholic drinks per day can increase your risk by 21%.

• Physical inactivity. Research indicates that regular physical activity may reduce the risk of breast cancer, particularly in postmenopausal women.

SIGNS OF BREAST CANCER

Breast cancer typically begins in the breast tissue, the glands for milk production, the milk ducts or the lymphatic tissue. One of the most common early signs is a painless mass. Other symptoms can include breast pain or heaviness and persistent changes, such as thickening, swelling, and redness in the area. Nipple abnormalities like spontaneous discharge, erosion, inversion and tenderness also can signal breast cancer. Any lingering abnormality should be evaluated promptly by a physician.

Because early breast cancer may have no symptoms, women should follow recommended guidelines for the earliest possible detection. When women have an average risk of breast cancer, the American Cancer Society recommends these regular routine tests:

Ages 40 and older

• Annual mammogram
• Annual clinical breast exam
• Monthly breast self-exam
  (optional but advisable)

Ages 20–39

• Clinical breast exam every three years
• Monthly breast self-exam
  (optional but advisable)
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Women with a high risk of breast cancer—including those with a parent, sibling or child who had breast cancer—should ask their physician about annual screenings using MRI and mammography.8

WHEN BREAST CANCER HAPPENS

The seriousness of breast cancer depends on its stage—that is, how far the disease has progressed by the time it’s diagnosed. For most patients, the overall quality of life eventually returns to normal once treatment is complete.

Treatment decisions are made jointly by the physician and patient, factoring in the cancer stage, risks and benefits of available options, and patient’s age and preferences.

The treatment plan may include:

- Surgery
- Radiation therapy
- Chemotherapy
- Hormone therapy
- Clinical trials
- Physical therapy
- Complementary or alternative medicine
- Optional breast reconstruction surgery

Due to the intensity and duration of breast cancer, treatment costs can add up quickly.

COSTS OF CARE

As with all forms of medical care, breast cancer can be costly to treat. In the U.S., annual expenditures for breast cancer care reached $16.5 billion in 2010.9

Many patients and their families struggle to pay medical bills during treatment and recovery. Cancer-fighting medications alone can cost $10,000 per month.10 Other costs can include copays for doctor office visits and lab work, transportation, parking fees, childcare during treatment, clinical trials, counseling and at-home or long-term care.11

Researchers from Duke University Medical Center and the Dana-Farber Cancer Institute studied treatment costs for 216 patients, most of whom had breast cancer. All but one patient had some form of comprehensive health insurance, yet their out-of-pocket costs averaged $712 a month.12 In another analysis, cancer patients with medical insurance faced $35,000 on average in copayments and other out-of-pocket expenses.13

Other financial challenges include lost wages due to fewer hours worked, uneven or lost insurance coverage and high out-of-pocket costs. Plus, some individuals lose their employment and are unable to pay the full premiums to keep employer-provided health insurance benefits.

Given the high cost of care, it’s not surprising that half of personal bankruptcies are attributed in part to medical bills.14

Question: Does your primary insurance have a high deductible or limit your benefits? Many plans do, which can put your financial security at risk if you need breast cancer treatment.
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COST-SAVING SOLUTIONS

Women and men should recognize the risks and understand the costs of cancer. But they shouldn’t stop there. The next step is to evaluate their financial protection to ensure they’re protected in the worst-case scenario.

Supplemental health insurance policies are a reliable source of financial support when someone is diagnosed with cancer. A good policy can provide cash benefits to help cover medical bills, replace lost wages and pay for assisted care. Additional coverage options can pay for complementary-type treatments, such as massage and acupuncture, and hospital intensive care. Some policies provide support from healthcare experts, who help patients and families understand insurance benefits, locate local providers and facilities, and access resources for a variety of health needs.

When breast cancer is found and treated early, most patients experience a full recovery. And when individuals prepare themselves for the future by purchasing a supplemental cancer or critical illness policy, they can secure their personal and financial future.

REFERENCES

2 Ibid., p. 4.
4 Ibid., p. 12.
5 Ibid., p. 9.
6 Ibid., p. 9.
7 Ibid., p. 15–16.
8 Ibid., p. 17.
15 These are limited-benefit policies and have limitations and exclusions. For costs and complete details of coverage, contact an agent. The facts in this document represent the U.S. population, are provided for information only and do not imply coverage under critical illness policies or endorsement of those policies by the cited sources.