

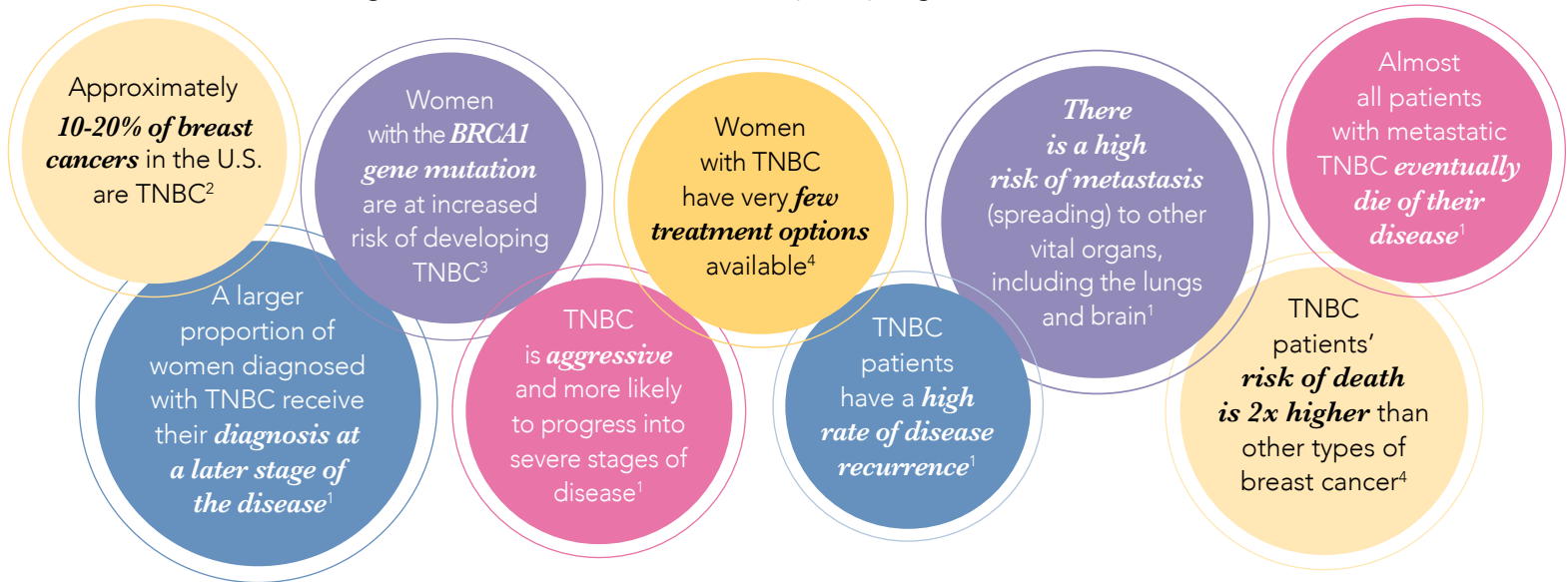
Triple Negative Breast Cancer (TNBC)

is an aggressive form of cancer that disproportionately impacts women who are medically underserved.

Increase funding to raise awareness of TNBC and improve early detection and survival.

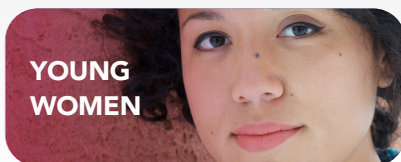
THE FACTS ABOUT TRIPLE NEGATIVE BREAST CANCER (TNBC)

Women diagnosed with TNBC often have a poor prognosis and lower rates of survival.



THE DISPROPORTIONATE IMPACT OF TNBC

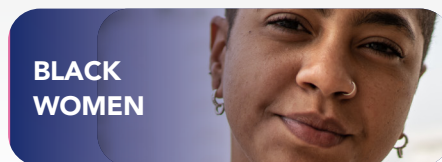
Anybody can be diagnosed with TNBC, but Black and Hispanic communities experience significantly worse outcomes.



YOUNG WOMEN

TNBC is **more common** in **young women**

Those **under the age of 40** diagnosed with breast cancer are **nearly twice as likely** to have TNBC than women aged 50-64⁵

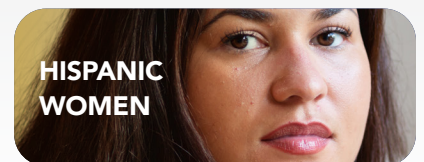


BLACK WOMEN

Black women are **three times as likely** to be diagnosed with TNBC than non-Hispanic white women and TNBC tumors tend to be larger^{6,7}

Black patients are diagnosed later when treatment is **less likely** to be effective⁷

Black women have the **lowest survival rate** at each stage of diagnosis⁸



HISPANIC WOMEN

Hispanic women are also diagnosed with the TNBC subtype **more often** than white women

Hispanic women have a **higher risk of mortality** from TNBC compared to non-Hispanic white women⁵

Triple Negative Breast Cancer

care is failing our mothers, daughters, family, and friends.

Most current clinical guidelines and medical practice patterns for breast cancer screenings ***fail to include the recognized risk factors for TNBC and disproportionately jeopardize the health and survival of Black and Hispanic women.***

Race, ethnicity, socio-economic status, and insurance type are indicators for worse TNBC outcomes in the U.S.

93%

increased risk of death for women who are uninsured or Medicaid-insured compared to women with private insurance⁹

38%

increased risk for Black women to be diagnosed with Stage IV TNBC than white women¹⁰

57%

decrease in Black-white breast cancer mortality disparity if screening for Black women started at age 40¹¹

Black women and Hispanic women are **less likely** to receive guidelines adherent care for TNBC care and are **more likely** to die related to TNBC^{12, 4}

THIS SITUATION IS UNACCEPTABLE AND IMMEDIATE CHANGES ARE NEEDED.

REAUTHORIZE AND INCREASE FUNDING FOR THE NATIONAL BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAM (NBCCEDP)

The NBCCEDP is a partnership between the CDC and state health departments providing breast and cervical cancer screening and diagnostic services to women who do not qualify for Medicaid.

NBCCEDP funding supports interventions which help address inequities in breast cancer screening and diagnosis, focusing efforts on women who are geographically or culturally isolated and racial or ethnic minorities.

A recently introduced bipartisan legislation titled the Screening for Communities to Receive Early and Equitable Needed Services (SCREENS) for Cancer Act of 2022, would modernize the NBCCEDP and reauthorize the essential safety-net program through 2027. The SCREENS for Cancer Act includes several important revisions to promote equitable access and ensure more women are connected with screening services to detect cancer before it is too late.

Only 15% of eligible women¹³

are supported through the NBCCEDP due to inadequate funding levels.

Increase NBCCEDP funding by \$15 million to raise awareness about TNBC and incorporate additional screening and diagnostic services to reach more undersupported women in need of treatment for this aggressive form of breast cancer.

Reauthorize the NBCCEDP by supporting the SCREENS for Cancer Act of 2022.

As TNBC is an aggressive form of cancer, delays in breast cancer screening due to the COVID-19 pandemic can be exceptionally devastating for women with TNBC.

References

- 1 American Cancer Society, Triple-Negative Breast Cancer, 2019. <https://www.cancer.org/cancer/breast-cancer/understanding-a-breast-cancer-diagnosis/types-of-breast-cancer/triple-negative.html>
- 2 Kumar P, Aggarwal R. An overview of triple-negative breast cancer. *Arch Gynecol Obstet*. 2016;293(2):247-269.doi:10.1007/s00404-015-3859-y
- 3 Atchley DP, Albarracin CT, Lopez A, et al. Clinical and pathologic characteristics of patients with BRCA-positive and BRCA-negative breast cancer. *J Clin Oncol*. 2008;26(26):4282-4288. doi:10.1200/JCO.2008.16.6231
- 4 <https://www.cancer.org/cancer/breast-cancer/understanding-a-breast-cancer-diagnosis/types-of-breast-cancer/triple-negative.html>
- 5 Plasilova, M. L., Hayse, B., et al, Features of triple-negative breast cancer: Analysis of 38,813 cases from the national cancer database. *Medicine*, 2016, 95(35), e4614. <https://doi.org/10.1097/MD.00000000000004614>
- 6 McCarthy AM, Friebe-Klingner T, Ehsan S, et al. Relationship of established risk factors with breast cancer subtypes. *Cancer Med*. 2021;10:6456– 6467. <https://doi.org/10.1002/cam4.4158>
- 7 Cho, B., Han, Y., Lian, M., Colditz, G. A., Weber, J. D., Ma, C., & Liu, Y. (2021). Evaluation of racial/ethnic differences in treatment and mortality among women with triple-negative breast cancer. *JAMA Oncology*, 7(7), 1016–1023. <https://doi.org/10.1001/jamaoncol.2021.1254>
- 8 <https://www.breastcancer.org/research-news/triple-negative-breast-cancer-deadlier-for-black-women>
- 9 Cho B, Han Y, Lian M, et al. Evaluation of Racial/Ethnic Differences in Treatment and Mortality Among Women With Triple-Negative Breast Cancer. *JAMA Oncol*. 2021;7(7):1016–1023. doi:10.1001/jamaoncol.2021.1254
- 10 Lu Chen and Christopher I. Li, Racial Disparities in Breast Cancer Diagnosis and Treatment by Hormone Receptor and HER2 Status, *Cancer Epidemiol Biomarkers Prev* November 1 2015 (24) (11) 1666-1672; DOI: 10.1158/1055-9965.EPI-15-0293
- 11 Chapman, C.H., Schechter, C.B., Cadham, C.J., et al. (2021). Identifying Equitable Screening Mammography Strategies for Black Women in the United States Using Simulation Modeling. *Ann Intern Med*, <https://doi.org/10.7326/M20-6506>
- 12 Yang XR, Chang-Claude J, Goode EL, et al. Associations of breast cancer risk factors with tumor subtypes: a pooled analysis from the Breast Cancer Association Consortium studies. *J Natl Cancer Inst*. 103(3):250-63, 2011
- 13 <https://www.cdc.gov/cancer/nbccedp/about.htm>