

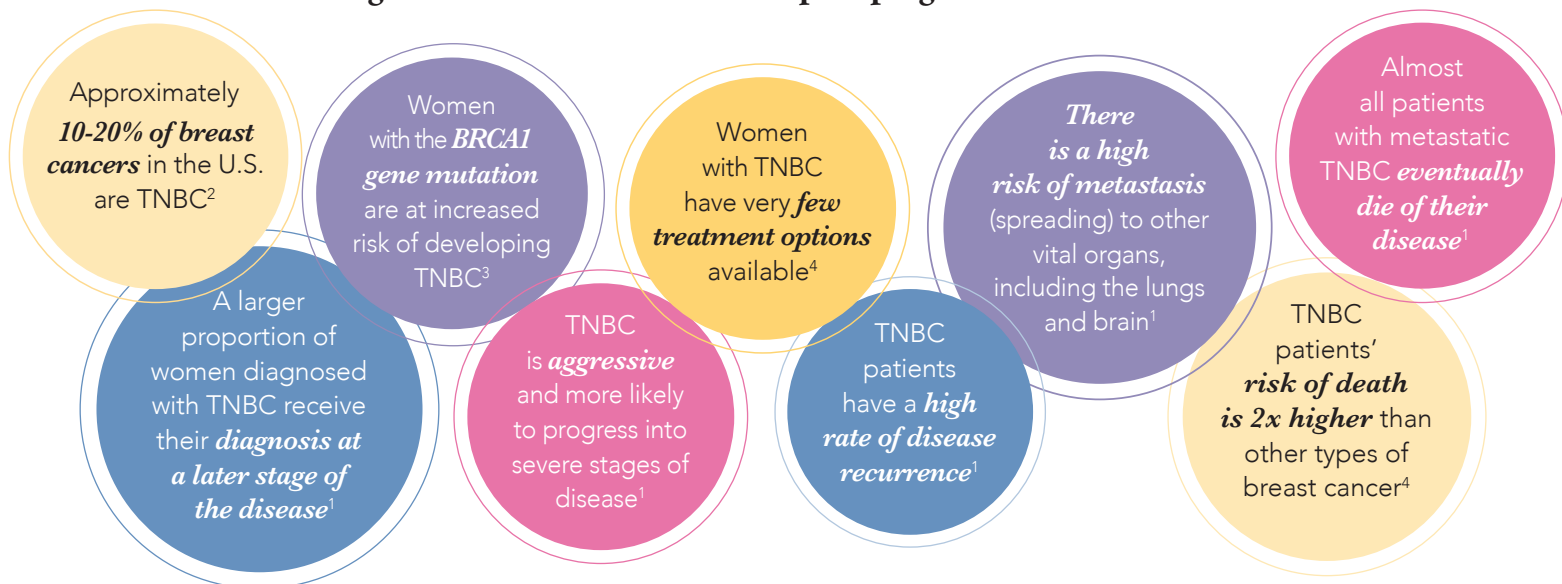
# Triple Negative Breast Cancer (TNBC)

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.*

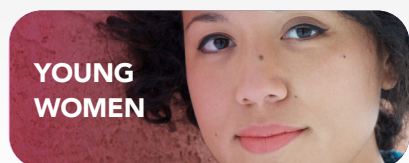
## THE FACTS ABOUT TRIPLE NEGATIVE BREAST CANCER (TNBC)

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



## THE DISPROPORTIONATE IMPACT OF TNBC

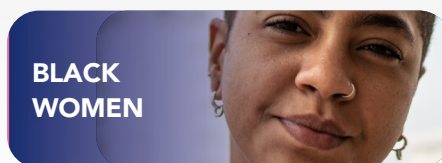
Anybody can be diagnosed with TNBC, but Black and Hispanic communities experience significantly worse outcomes.



**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 50-64<sup>5</sup>

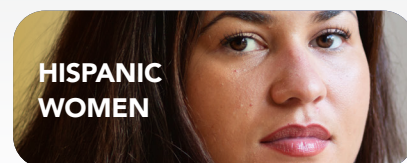


**BLACK WOMEN**

Black women are **three times as likely** to be diagnosed with TNBC than non-Hispanic white women and TNBC tumors tend to be larger<sup>6, 7</sup>

Black patients are diagnosed later when treatment is **less likely** to be effective<sup>7</sup>

Black women have the **lowest survival rate** at each stage of diagnosis<sup>8</sup>



**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 women<sup>5</sup>

# 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 insurance<sup>9</sup>

**38%**

**increased risk for Black women** to be diagnosed with Stage IV TNBC than white women<sup>10</sup>

**57%**

**decrease in Black-white breast cancer mortality disparity** if screening for Black women started at age 40<sup>11</sup>

**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<sup>12, 4</sup>

**THIS SITUATION IS UNACCEPTABLE AND IMMEDIATE CHANGES ARE NEEDED.**

## Policy Actions to Improve the Care, Outcomes and Survival of Women at Risk for TNBC



### INCREASE EDUCATION

More education is urgently needed to raise TNBC risk awareness among Black, Hispanic, and young women and the providers who care for them



### PROMOTE EARLY DIAGNOSIS

Black, Hispanic and young women at increased risk of late stage TNBC diagnosis must be identified by providers and have earlier access to screening services



### INCREASE PATIENT AFFORDABILITY

Barriers in the form of patient cost-sharing requirements for diagnostic services and treatments must be removed to promote timely delivery of care



### PROVIDE PATIENT NAVIGATION

These essential services must be reimbursed and consistently available to help women receive the most clinically appropriate care



### INVEST IN TNBC SPECIFIC RESEARCH

More data is needed on the impact of TNBC on Black, Hispanic, and young women to drive reforms in guidelines and clinical recommendations



### ADVANCE EQUITY IN CLINICAL TRIALS

Support stakeholders to increase diversity and participation in clinical trials



### UTILIZE EQUITY METRICS

Incentivize providers to improve patient care through health equity-focused quality metrics developed to mitigate breast cancer disparities

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