



## The Greater Richmond Affiliate of the Susan G. Komen Breast Cancer Foundation

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The start of the new year signals new beginnings for many, including, perhaps, your own recovery from treatment or an anniversary of your survival date. The Susan G. Komen Breast Cancer Foundation's Greater Richmond Affiliate embraces the energy the new year brings us as we look forward to exciting advances in our community outreach.

We offer an enthusiastic welcome to Judy Adams, our first-ever Executive Director, who assumed her role in late summer. Judy, a five-year survivor, comes to us with a distinguished corporate background in marketing, sales and operations. She began volunteering with the Affiliate last fall as Co-Chair of the Education and Outreach Committee and made wonderful strides in helping to establish the Speakers' Bureau and this quarterly newsletter. She has been a tireless advocate for Komen and our affiliate, helping to raise our visibility locally and nationally. Welcome Judy!

Thank you to the nearly 40 women and men who have volunteered for the Speakers' Bureau. As you know, October is Breast Cancer Awareness Month, and our participation was sought for numerous health fairs and presentations throughout our service area. Our volunteers have done a remarkable job filling the requests—doing so with enthusiasm. We are still actively recruiting volunteers, so please be in touch if you or someone you know is interested in playing a role.

As part of our outreach, we are pleased to offer this second issue of the quarterly newsletter. This issue focuses on breast cancer as it relates to older women. As you know, the chances for developing breast cancer increase with age, so we should all be especially mindful of breast health as we grow older. Articles in this issue touch on areas of particular concern to women over 60, such as hormone replacement therapy and the "undertreatment" of elderly women with regard to mammogram utilization. Please use this newsletter as a conversation starter should you need to provide extra encouragement to a beloved elderly grandmother, mother, aunt or family friend who has been reluctant to be screened. Your vote of encouragement could make the difference!

Work is ongoing on our Community Profile—the needs assessment we complete every other year for Komen headquarters. The profile will serve as the basis for our strategic planning process and help guide the work of the Education and Grants Committees. A graduate student from VCU and two undergraduates from the University of Richmond have partnered with us on this project, and we welcome their unique perspectives.

These next few months promise to be filled with exciting opportunities as we lead up to our Race for the Cure® on May 13. We welcome your engagement every step of the way! Thank you for your ongoing support of the affiliate's work and your commitment to Komen's mission to eradicate breast cancer through research, education, screening and treatment.

—Susan G. Quisenberry, President



### The Myth about Older Women and Treatment

Recently there has been much confusion among aging women as to the safe cut-off age for mammography. Indeed, the United States Preventive Services Task Force (USPSTF) currently recommends mammography every two years for ages 50 to 70; the American College of Physicians (ACP) recommends mammography screening until age 74; and the Komen Foundation, American Cancer Society (ACS) and the National Cancer Institute (NCI)

currently advise annual mammography with no upper age cut-off.

Population studies have shown that older women receive mammograms and doctor-performed breast examinations less often than they should. This is due in part to the fact that postmenopausal women are less likely to have routine gynecological or general physical examinations. Other factors may contribute to this, including increased difficulties in accessing health care and

the presence of multiple other health problems which may mask the presence of cancer or attract attention away from it. Furthermore, studies have shown that older women sometimes receive less aggressive treatment due to the decline in kidney, heart, lung and immune function seen with aging. These conditions may make more potent chemotherapeutic drugs more risky.

However, some studies have alluded to the possibility that

there exists some physician bias in under-treating women over 70. One such study published in the October 1, 2003, issue of the *Journal of Clinical Oncology* found that only 47% of women over age 80 receive standard treatment, as compared to 90% of women aged 50 to 79. Surveys of older women indicate that physician recommendation is the major determinant of screening adherence (*The Importance of Physician Communication on Breast Cancer Screen-*



### Statistics on Aging

- ✂ Each year about 50% of the 185,000 new cases of Breast Cancer in the USA occur in women 65 years or older.
- ✂ If current rates stay constant, a female born today has a 1 in 8 chance of developing breast cancer sometime during her life.

### A Woman's Chance of Being Diagnosed with Breast Cancer

- ✂ by age 30... 1 out of 2,212
- ✂ by age 40... 1 out of 235
- ✂ by age 50... 1 out of 54
- ✂ by age 60... 1 out of 23
- ✂ by age 70... 1 out of 14
- ✂ by age 80... 1 out of 10

ing in Older Women. Arch Intern Med. 1994; 120: 602-608) . Older women are more likely to visit physicians and to have Medicare coverage for primary and preventive care, including Clinical Breast Exam (CBE) and mammography, than are women under age 65. Therefore missed opportunities by primary care physicians clearly contribute to low screening rates among older women.

This missed opportunity by primary care physicians greatly affects outcome of the disease, as five-year survival was greater than 80% for women who received surgical treatment and only about 50% for women who received tamoxifen alone. Recent cancer mortality statistics have shown promising declines in breast cancer mortality among

Hormone replacement therapy (HRT) is becoming more common among older women. Estrogenic effects on breast tissue density may also slightly increase the chance of false positive mammograms. However, prolonged exposure to HRT may also increase the occurrence of breast malignancies. Starting an older woman on HRT may stimulate growth of estrogen responsive tumors. For these reasons, periodic mammography is strongly recommended

## Myth (continued from page 1)

women younger than 70, but no improvement in cancer mortality among the oldest women.

But there is hope. Institutions such as the American Geriatrics Society (AGS) and the American Federation for Aging Research have begun publicizing possible solutions to this problem and recommendations for physicians. The AGS stated in 1999 that physicians should strongly consider recommending annual or at least biennial mammography until age 75 and biennially or at least every three years thereafter with no upper age limit. They also suggested that women with arthritic hand deformity or neuropathy consider annual clinical breast examinations if such ailments prevent monthly breast self examinations. In addition, the AGS has also noted that nurse case managers are a successful solution

to under-treatment. Breast cancer patients who were 65 years and older and who received calls, visits, and/or accompaniment to medical appointments from nurse care managers were 64% more likely than controls to receive lumpectomy, and 60% more likely than controls to receive adjuvant radiation after breast-conserving surgery.

[www.americangeriatrics.org/products/positionpapers/brstcncr.shtml](http://www.americangeriatrics.org/products/positionpapers/brstcncr.shtml)

[www.infoaging.org/d-breast-7-aging.html](http://www.infoaging.org/d-breast-7-aging.html)

## The Truth about HRT

For women on HRT or for women who have had prolonged (more than 7 years) exposure to HRT. Before starting HRT, women, regardless of age, should be encouraged to receive a screening mammogram and Pap smear.

Use of HRT for 5, 10, or 15 years is associated with 2, 6, and 12 excess breast cancers diagnosed per 1000 women, respectively. Risk returns to normal 5 years after stopping

estrogen replacement therapy.

Search the Komen Website ([www.komen.org](http://www.komen.org)) with the key term HRT to find additional information and documents.

## Risk Factors for Developing Breast Cancer

- ✂ Increasing age
- ✂ Personal or family history of breast cancer
- ✂ Reproductive history
  - Late menopause (55 or older)
  - No pregnancies or late first pregnancy-at age or above age 30
- ✂ Diet
  - Regular consumption of alcohol
  - High-fat diet (*inconclusive evidence*)
- ✂ Body size
  - height (being taller)
- ✂ History of colon or endometrial cancer in first-degree relatives
- ✂ Estrogen replacement therapy
- ✂ Current or recent use of birth control
- ✂ Exposure to high doses of ionizing radiation
- ✂ Personal history of breast cancer
- ✂ Overweight
- ✂ High Bone density
- ✂ Benign Breast disease (hyperplasia)

## Ukrop's Has Updated the Golden Gift Program

You are probably familiar with Ukrop's annual Golden Gift program, which allows customers to donate a portion of their purchases to their favorite charity. Ukrop's has recently announced an enhancement to this program that will allow year-round giving through a partnership with Benevolink.

Ukrop's Golden Gift powered by Benevolink is an innovative community giving program. There is no cost to you or the Greater Richmond Affiliate, and you pay nothing extra for the things you buy. Plus, you now have two shopping options that generate charity dollars - at your local Ukrop's grocery stores and online with 200 major retailers through [benevolink.com](http://benevolink.com). We encourage you to make the very most of your regular shopping dollars and help support of our cause to eradicate breast cancer as a life-threatening disease by joining now and selecting the Greater Richmond Affiliate as your designee.

To join & start supporting the Greater Richmond Affiliate follow these 3 easy steps:

- 1) Register once to participate – it's free, quick and secure. Visit [www.benevolink.com](http://www.benevolink.com) and click on "Richmond Ukrop's Shoppers" to learn more and join.
- 2) When you join, please enter our promotion code, **RMDSGK93**, in the online registration form.
- 3) Begin shopping!

To make sure that the Greater Richmond Affiliate receives your earned charity dollars, be sure to add us to your Benevolink giving list when registering. Select us from the list of charities (or simply type "Komen" and select "Virginia" in the charity search). Then, at the end of each quarter, please remember to direct your earned charity dollars to us (you will receive a reminder) to help us continue our mission. Please note that this program replaces Ukrop's former Golden Gift program, so you will not need to mail in your gift receipt at the end of the year.

We are truly grateful for your constant support of our cause to eradicate breast cancer and to offer support to those affected by the disease. Through your generosity, the Greater Richmond Affiliate has granted over \$1,400,000 in our service area to provide education, treatment and early detection.

Thank You and Happy Shopping!



### Announcement of Komen Night with the Spiders!

The University of Richmond Athletics Department is hosting "Komen Night with the University of Richmond Spiders" at the Hall of Fame Day men's basketball game against George Washington University scheduled for 7:00 p.m. on Saturday, February 18<sup>th</sup> in the Robins Center Main Arena. See the Spiders in action against the Colonials, applaud the 1988 Richmond NCAA Sweet Sixteen men's basketball team and participate in a fund raising event for the Greater Richmond Affiliate of the Susan G. Komen Breast Cancer Foundation. For every ticket sold, \$2.00 will be donated to the Greater Richmond Affiliate to support the mission of eradicating breast cancer as a life threatening disease. Every fan can also make a minimum \$2.00 pledge for each 3 pointer the Spiders hit during the game. Don't forget to wear your pink for a "Pink Out" with all in attendance showing their support! For more information contact the University of Richmond Robins Center Ticket Office at 1-877-SPIDER-1.

### 2006 Komen Greater Richmond Race for the Cure® Kickoff Event

**Team Packet Pick-up – start now on building your team!**  
**Volunteer Recruitment – check out the opportunities!**

Wednesday, February 22, 2006 ♦ 7:00 p.m. to 9:00 p.m.

Lewis Ginter Botanical Gardens

For more information contact 804-796-RACE or visit

[www.richmondrace.org](http://www.richmondrace.org).

## Daughter's Project

The Daughter's Project is calling for daughters whose mothers have been diagnosed with breast cancer. The project is aimed at learning about the perspectives and informational needs of these women.

Interviews are conducted by telephone and will last between twenty and thirty minutes and the questions will be primarily concerned with mother-daughter communication, perspectives on preventative care, and future resource interests.

Daughters who are at least 18 years of age, who have not been diagnosed

with breast cancer, and whose mothers have been diagnosed within the past 25 years are eligible and encouraged to contact the project at 804-828-1561. Participants will receive a \$15.00 gift card for participating.

*This study is funded by the Massey Cancer Center by principal investigator, and Affiliate board member, Dr. Diane B. Wilson.*





# The Greater Richmond Affiliate of the Susan G. Komen Breast Cancer Foundation

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P.O. Box 11166  
Richmond, VA 23230

Phone: 804-796-RACE

Web: [www.komen.org](http://www.komen.org) or [www.richmondrace.org](http://www.richmondrace.org)

### We Need You!

The Komen Greater Richmond Race for the Cure continues to grow! And as our Race grows - so does our year round involvement in the community!

This means that more volunteers are needed to manage, organize and lead our race committees, our new programs, and our long range planning efforts.

If you possess these skills and would like to learn more about opportunities available to display your talents and contribute to the community, please contact us today!

To volunteer for the 2006 Race for the Cure®, email us at [volunteer@richmondrace.org](mailto:volunteer@richmondrace.org) or join us at 7:00 p.m. on February 22 at Lewis Ginter Botanical Gardens.

To join our new Speakers' Bureau, email us at [speaker@richmondrace.org](mailto:speaker@richmondrace.org).

For other volunteer opportunities which include 2006 Survivor Luncheon, Greater Richmond Affiliate Golf Event, Grants, Fund Raising, Finance, Office Support and More, please call 1-800-RACE or email us at [info@richmondrace.org](mailto:info@richmondrace.org).

There are many possibilities for you to be involved!

Make it YOUR New Year's resolution to get involved with the Greater Richmond Affiliate TODAY!

## Greater Richmond Affiliate's Partnership to Raise Mammography Utilization Rates



### Mark Your Calendars!!!

- **February 4, 2006 - CBS6 Healthy Expo at the Richmond International Speedway**
- **February 18, 2006 - Komen Night with the University of Richmond Spiders**
- **February 22, 2006 - Komen Greater Richmond Race for the Cure® Team and Volunteer Kick-off Event**
- **May 13, 2006 - Komen Richmond Race for the Cure®**

The Greater Richmond Affiliate of the Susan G. Komen Breast Cancer Foundation, the South Atlantic Division of the American Cancer Society (ACS) and the Virginia Health Quality Center have partnered to increase mammography utilization rates for Medicare eligible women aged 65 and over in central Virginia through a coordinated plan of education, promotion of services, and follow-up.

Utilizing data from ACS community assessments and the Virginia Health Quality Center, several communities in central Virginia were identified as having large segments of Medicare eligible women aged 65 and over with low annual mammography utilization rates. This is of particular concern as, generally speaking, lack of insurance

coverage is often cited as a major obstacle to regular breast screening, however, the women in the identified category cannot offer this as a rationale.

The population we will target has coverage and needs to be made aware of the benefits available to them. We will accomplish this through a coordinated plan of education, promotion of services, and follow-up activities. We will also seek to identify other hurdles that prevent this audience from seeking annual screening and provide possible solutions.

The goal of the project is to increase the compliance rate for mammograms in Medicare covered women in the targeted counties from an average of 44% to 46% in 2006 and 49% by 2007.

The Greater Richmond Affiliate and the South Atlantic Division of the American Cancer Society have contributed research funds for this joint project.

