

CBCS Newsletter

For Study Participants

Phase III: The Jeanne Hopkins Lucas Study

Greetings from CBCS! From all of us at the Carolina Breast Cancer Study (CBCS), we want to express our deepest appreciation for all the years you have dedicated to our study. Thank you for sticking with us!

You have participated in the Carolina Breast Cancer Study for over ten years, and all the information you provided is being analyzed by researchers who want to learn more about the diagnosis, treatment, and outcomes experienced by women like you. Your continued participation helps us to better understand why some women get breast cancer while others don't, and how to stop the spread of breast cancer.

As we have done each year since your in-home interview, we'll be contacting you by telephone within the next few weeks to update your health information. We'll be asking you about your general health and any recent procedures or treatments you may have had since the last time we spoke. Upon completion of this telephone survey we will send you a payment for \$10 as a thank you for your time! If your contact info has changed, please send us your updated information using the enclosed form, or call us at 1-866-927-6920 to update your information.

In the meantime, we hope you will enjoy our latest newsletter. Inside you will find a summary of a recent publication by Stephanie Wheeler that discusses the use of endocrine therapy by race that may contribute to breast cancer outcome disparities. We also have included highlights from the 2018 Symposiums. In the meantime, please accept this latest newsletter with our thanks. In particular, we hope you will enjoy reading about the recent findings that our researchers have developed.

An epidemiologic population-based breast cancer research study at the University of North Carolina-Chapel Hill Lineberger Comprehensive Cancer Center funded through the University Cancer Research Fund, the National Cancer Institute and Susan G. Komen

"Beauty, grace, strength, and persistence..."

Follow-Up Issue #10

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Study Contact Information

Carolina Breast Cancer Study
UNC-Chapel Hill
LCCC-North
1700 MLK Blvd, Rm 312
CB #7294

Phone: 1-866-927-6920
or, 919-966-9439
Fax: 919-966-0162
Email: cbsc@unc.edu
Web: unclineberger.org/

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Thank you to our research team. This study would not be possible without the hard work and commitment of researchers and the Carolina Breast Cancer Study staff who undertake the research.

Love,
laughter
and pray!

Endocrine Therapy Nonadherence and Discontinuation in Black and White Women

In a study reported in the *Journal of the National Cancer Institute*, **Stephanie B. Wheeler, PhD, MPH**, of the Department of Health Policy and Management, University of North Carolina, Chapel Hill, and colleagues found that black women reported they had difficulty with side effects of endocrine therapy for breast cancer more often than white women, although no significant difference in discontinuation of treatment was observed. The study included 1,280 women aged 20 to 74 years with first primary, stage I to III, hormone receptor–positive breast cancer in the phase III Carolina Breast Cancer Study. Of these women, 43.2% self-identified as black. Nonadherence—defined as not taking endocrine therapy every day or missing more than 2 pills in the past 14 days—and treatment discontinuation were analyzed at 2 years post diagnosis.



Race and Delays in Breast Cancer Treatment across the Care Continuum in the Carolina Breast Cancer Study

In a study reported in *Cancer*, **Katie Reeder-Hayes, MD, MBA, MSc**, of the Department of Medicine, University of North Carolina, Chapel Hill, and colleagues found that compared to white women, black women experienced some treatment differences that may contribute to poorer outcomes. Specifically, delays in initiating and completing treatment are one proposed mechanism.

Black women more often had delayed treatment initiation (defined as more than 60 days between diagnosis and first treatment) and a longer time to completion than whites receiving similar treatment. Interventions that target access barriers may be needed to improve timely delivery of care.



Racial Differences in PAM50 Subtypes in the Carolina Breast Cancer Study

In a study reported in the *Journal of the National Cancer Institute*, **Melissa Troester, PhD, MPH**, of the Department of Epidemiology, University of North Carolina, Chapel Hill, and colleagues found that African American breast cancer patients have higher frequency of triple negative breast cancer and lower frequency of hormone receptor-positive (HR+)/human epidermal growth factor receptor 2 (HER2)-negative disease. These differences are hypothesized to contribute to poorer breast cancer outcomes among black women. However, new genomic tests are now available for further classifying tumors by risk of recurrence, and racial differences in genomic subtype within clinically defined subgroups are not well understood. New results from the CBCS show that genomic assays highlight racial disparities in tumor subtype distribution that persist even in clinically defined subgroups. Differences in tumor biology (e.g., HER2-enriched status) may be targetable to reduce disparities among clinically ER+/HER2- cases.



Why the ginkgo leaf?

Many people have asked why the ginkgo leaf was chosen as the symbol of the Carolina Breast Cancer Study. The ginkgo tree is one of the oldest trees in the world and, because of this, is often referred to as a 'living fossil.' Recognized for its longevity, the ginkgo tree and its leaves are also well known for surviving times of adversity. Despite adversity, the ginkgo tree and leaves have persevered and are currently recognized as a symbol of hope, beauty, grace, and enduring strength. The women contributing their time and personal stories to the Carolina Breast Cancer Study all share the qualities of this amazing and beautiful leaf.

Research Highlights by Topic



Left: Dr. Eboneé Butler
Cancer Prevention Fellow, National Cancer Institute

Right: Dr. Humberto Parada
Faculty, San Diego State University

Research focus: Effects of **SMOKING** on cancer risk and long-term survival rate.

Findings: Smoking may *increase* the risk of certain subtypes of Breast Cancer, but not others. Smoking may also have a negative impact on long-term survival.



Dr. Laura Pinheiro
Faculty, Weill Cornell Medical College

Research focus: **QUALITY OF LIFE**

Findings: During treatment, white women reported *better physical, social, and functional well-being* compared to black women. Both during and after treatment, black women reported *better spiritual well-being* compared to white women.



Dr. Stephanie Wheeler
Faculty, UNC-Chapel Hill

Research focus: Impact of **FINANCIAL STRAIN** on stress, treatment adherence, and disparity outcomes.

Findings: 58% of black women and 39% of white women in CBCS reported adverse financial impact due to Breast Cancer diagnosis including income loss, transportation barriers, job loss, financial barriers to care and insurance loss.



Dr. Lindsay Williams
Faculty, University of Minnesota

Research focus: **ALCOHOL** as a risk factor in black women.

Findings: Drinking 7 or more alcoholic beverages per week increases Breast Cancer risk among both black *and* white women.



Dr. Brionna Hair
Health Statistician, Department of Health & Human Services

Research focus: **PHYSICAL ACTIVITY**

Findings: The American Cancer Society recommends 150 minutes of moderate activity per week such as domestic chores, gardening, or brisk walking. Before diagnosis, 61% of CBCS participants met these guidelines. This dropped to 35% of participants after diagnosis.



Dr. Samantha Puvanesarajah
Cancer Prevention Fellow, American Cancer Society

Research focus: **SCREENING VS. DETECTION**

Findings: Certain subtypes of Breast Cancer are more likely to be interval cancers than others. Interval breast cancer is a term given to cancers detected/presenting within 12 months after a mammographic screening in which findings are considered normal.

Cancer survivors honored at Carolina Breast Cancer Study celebrations

UNC Lineberger's Carolina Breast Cancer Study hosted events in 2018 in Concord, Greenville, and Cary to recognize the contributions of the study's participants and their caregivers as the study marked the 10th year of its third phase.

The study's leadership hosted events this fall to bring together and recognize the contributions of the study's participants and their caregivers. Between 2008 and 2013, the study enrolled 3,000 participants shortly after their breast cancer diagnosis, and they have been followed for up to 10 years to capture information about additional treatments and outcomes.

The events featured presentations on a range of topics, including breast cancer advocacy, self-care and stress management, an "ask the expert" question-and-answer session, and resource tables from community and health care organizations.

Study leaders wanted to thank study participants, as well as to provide resources and information about the study's findings, said UNC Lineberger's Melissa Troester, PhD, professor in the UNC Gillings School of Global Public Health and the study's principal investigator.

"We wanted to celebrate this partnership, to remember and honor those women who have died, and to share our scientific findings to help inform survivors based on our public health findings," Troester said.

Through the study, researchers established a long-term relationship with participants, and study leadership wanted to support the survivors, said UNC Lineberger's Andrew Olshan, PhD, professor in the UNC Gillings School of Global Public Health

"Women are enrolled soon after diagnosis with breast cancer, and then we follow them for 10 years or longer," said Olshan. "We wanted to thank them for this partnership, and to give back, sharing what this study has found, and offering information to address health questions and issues that survivors may be having."

Supported in part by the University Cancer Research Fund and Susan G. Komen, the Carolina Breast Cancer Study originally opened in 1993 to investigate the causes of breast cancer in black and white women in North Carolina. Today, it is one of the largest African-American breast cancer resources in the United States.

"There will still be valuable findings from the study that we have not yet uncovered," Olshan said.

For the full story, go to: <https://go.unc.edu/cbcs-symposia>



*Dr. Melissa Troester (left) & Dr. Andrew Olshan (right)
Professors at UNC-CH Gillings School of
Global Public Health*

THANK YOU FROM ALL OF US AT THE CAROLINA BREAST CANCER STUDY!