

The Anniston Star

# Breast Cancer Awareness

OCTOBER 10-11, 2020



## BREAST CANCER FACTS

- 1 in 8 women in the United States will be diagnosed with breast cancer in her lifetime.
- In 2020, an estimated 276,480 new cases of invasive breast cancer will be diagnosed in women in the U.S. as well as 48,530 new cases of non-invasive (in situ) breast cancer.
- 64 percent of breast cancer cases are diagnosed at a localized stage (there is no sign that the cancer has spread outside of the breast), for which the 5-year survival rate is 99 percent.
- Although rare, men get breast cancer too. In 2020, an estimated 2,620 men will be diagnosed with breast cancer this year in the U.S. and approximately 520 will die.
- Breast cancer is the most common cancer in American women, except for skin cancers. It is estimated that in 2020, approximately 30 percent of all new women cancer diagnoses will be breast cancer.
- There are over 3.5 million breast cancer survivors in the United States.
- On average, every 2 minutes a woman is diagnosed with breast cancer in the United States.

SOURCE: National Breast Cancer Foundation

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## PINK QUEENS

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Stephen Gross/The Anniston Star

Sherry Jones is a survivor of a five-year battle with Stage 3 triple-negative breast cancer. She was pronounced cancer-free on March 4, 2020.

# "I NEVER ASKED GOD, 'WHY ME?'"

BY FAITH DORN  
Special to the Star

Six years ago, when Sherry Jones was 50 years old, Dr. Susan Winchester gently placed her hands on Jones' knees and said something that made Jones temporarily lose her hearing.

"She said, 'You have cancer. I'm going to stop speaking for a minute because you aren't going to hear anything else I say,' and she was right. I couldn't hear anything," said Jones, now 56.

Living with fibrocystic breast disease, Jones had been getting yearly mammograms, and, like always, her mammogram in December 2014 was good.

In the months that followed, Jones began experiencing pain in her breasts. She thought it might be a symptom of her disease, but she knew that something was not right.

"They always tell you cancer doesn't hurt. That isn't true, it does hurt," Jones said. "I was also always fatigued, but I

## Sherry Jones leaned on faith, family and friends during her battle with breast cancer

thought I was just tired from the holidays."

She went back to Dr. Winchester, who performed eight biopsies. By May 19, 2015, Jones had been diagnosed with Stage 3 triple-negative breast cancer, which had spread to her lymph nodes. "I had a double mastectomy and had several lymph nodes removed," Jones said.

Jones did not get a chance to recover from the surgeries before starting chemotherapy. Her chemotherapy consisted of doxorubicin — they call it "Red

Devil" — every three weeks. Jones received chemotherapy until that November, when she started 28 rounds of radiation.

The oncologist told Jones she was cancer-free on March 4, 2020.

Jones credits her endurance through her five-year battle to her faith and her support group, including her late mother, Mary, sisters Sandi and Susie, children Lauren and Alex, friends and her church, Church of the Cross in Golden Springs. Just knowing that people were pray-

ing for her helped her get through treatments when she felt like giving up, she said.

"I never asked God, 'Why me?' because it was part of my journey. It was part of my valley, and when we are in the valley, we grow. Your faith just becomes so much stronger," Jones said.

"I didn't really pray for myself because I didn't know how to pray for myself, but God knew my need. I prayed for other people. God was going to get the glory. If even just one person comes to know him through this, it was worth it," Jones said.

Jones is grateful for all the help she received during her battle with cancer and for the selflessness of her friends. Denise White took her to every chemotherapy treatment and stayed with her, putting warm blankets on her.

White also ordered "Team Sherry" T-shirts to benefit Jones, featuring one of favorite Bible passages,

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Submitted photo

The Pink Queens (from left) Shandrika Christopher, Temecha Williams and Jackie Judkins.

# BRUNCH WITH THE QUEENS

## Anniston's 'Pink Queens' host a fundraising brunch, group photo shoot for survivors

**BY FAITH DORN**  
Special to the Star

Shandrika Christopher, Jackie Judkins and Temecha Williams — a trio of local breast cancer survivors known as the “Pink Queens” — are hosting a brunch fundraiser today in Anniston and a group photo shoot Sunday in Oxford.

The royal three were acquainted before their diagnoses, but officially came together as the “Pink Queens” last September for an inspirational photo shoot organized by Christopher. The photos

went viral on social media.

“The motivation behind the photo shoot was to remind others that you do not have to look like what you’ve been through,” according to Cameron Christopher, son of Shandrika Christopher.

The photo shoot was made possible through generous donations from the community, including Clear Vision Photography, C Squared Photography, Elegant Rentals, makeup from Clowned by Shonda and the Pink Heals Eastern Alabama truck, provided by Billy Ray Wilson.

The Pink Queens are hosting a “Mimo-

sas & Awareness” fundraiser brunch today from 3-5 p.m. at Pure, 1800 S. Quintard, just north of the bridge between Anniston and Oxford. The Pink Queens will be sharing their stories at the brunch.

Tickets will be available at the door for \$20. If you would like to support the Pink Queens but cannot attend, donations are welcome.

Money raised from the brunch will assist one or more people battling breast cancer.

On Sunday, survivors are invited to join the Pink Queens for a free group

photo in front of the Pink Heals of Eastern Alabama pink fire truck. Survivors should meet across the street from Choccolocco Park in Oxford by 1 p.m. Sunday. The requested attire for the photo is any combination of pink and denim.

The Pink Queens have a huge reason to celebrate this year — all are cancer free: Christopher for three years, Williams for two years and Judkins for one year.

To purchase fundraiser tickets or for more information, contact Cameron Christopher at 256-453-6852.

## BREAST CANCER SIGNS AND SYMPTOMS

Knowing how your breasts normally look and feel is an important part of breast health.

Finding breast cancer as early as possible gives you a better chance of successful treatment.

But knowing what to look for does not take the place of having regular mammograms and other screening tests.

Screening tests can help find breast cancer in its early stages, even before any symptoms appear.

The most common symptom of breast cancer is a new lump or mass. A painless, hard mass that has irregular edges is more likely to be cancer, but breast cancers can be tender, soft, or rounded. They can even be painful. For this reason, it is important to have any new breast mass or lump or breast change checked by a health care provider experienced in diagnosing breast diseases.

Other possible symptoms of breast cancer include:

- Swelling of all or part of a breast (even if no distinct lump is felt)
- Skin irritation or dimpling
- Breast or nipple pain
- Nipple retraction (turning inward)
- Redness, scaliness, or thickening of the nipple or breast skin
- Nipple discharge (other than breast milk)

Sometimes a breast cancer can spread to lymph nodes under the arm or around the collar bone and cause a lump or swelling there, even before the original tumor in the breast tissue is large enough to be felt. Swollen lymph nodes should also be checked by a health care provider.

Although any of these symptoms can be caused by things other than breast cancer, if you have them, they should be reported to a health care provider so that he or she can find the cause.

Because mammograms do not find every breast cancer, it is important for you to be aware of changes in your breasts and to know the signs and symptoms of breast cancer.

— The American Cancer Society

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Submitted photo

The Pink Queens (from left) Temecha Williams, Jackie Judkins and Shandrika Christopher.



Submitted photo

The Pink Queens (from left): Shandrika Christopher, Jackie Judkins and Temecha Williams.

## WHAT IS BREAST CANCER?

Research is important to understanding, lowering risk of disease

**BY VALLEAN JACKSON**

Special to The Daily Home

Breast cancer is the second most common cancer in women after skin cancer, according to the National Cancer Institute. It is often first recognized by a lump in the breast.

As is the case with all cancers, breast cancer is the result of cells beginning to grow abnormally. Exactly what causes breast cancer is still being researched.

Typically breast cancer is found in older women, but has been found within women younger than age of 40. It has even been identified in babies, toddlers, adolescents, young women and men, but such cases are uncommon. Those who have a family history of breast cancer are at a higher risk for it, but that does not mean that women who have such histories will definitely be affected by the disease. Life choices in favor of good health and exercise can reduce the risk of developing breast cancer, even with the increased risk due to family history.

When it comes to identifying symptoms of breast cancer, every individual is different. In some cases, there are no symptoms, which can come as a shock to someone who does not even have a family history of breast cancer. Studies indicate that many women diagnosed with breast cancer have no history of breast cancer in their family. Some symptoms of breast cancer may include skin changes, swelling, redness, increase in size or shape of the breast, nipple differentiation, nipple discharge, general pain and lumps on or inside the breast. Mammograms are used to detect breast cancer early enough to provide life-saving treatments.

With a doctor's evaluation of the breast tumor, it can be determined what form of breast

cancer a patient has, in order to conduct the proper treatment. To determine the type of breast cancer also identifies whether the disease has spread beyond the breast or not. Breast cancer can be invasive or noninvasive breast cancer, triple negative or inflammatory. The most common type of breast cancer is ductal carcinoma in situ (DCIS).

When patients learn that they have been diagnosed with breast cancer, many are often not concerned about the exact type or medical terminology, but about what they can do to get it treated. The plan of treatment is based on the progress and type of breast cancer, but options can include surgery, chemotherapy, radiation and various medications.

A plan of action is based on recurrence possibilities. In some cases, even after treatment the disease recurs because treatments are just that — treatments, not a cure. A cure has yet to be discovered, so it is advised for patients to continue following up with their physicians for scheduled appointments, check ups and mammograms.

According to the American Cancer Society, there is no way to prevent breast cancer, but there are ways to lower the risk. Things that lower the risk are maintaining a healthy weight, being physically active, avoiding or limiting alcohol, early detection, breastfeeding, hormone therapy, genetic counseling and testing, preventive survey, and recommended yearly mammograms.

Sometimes even the healthiest person can be diagnosed with breast cancer because of the lack of knowledge of self observation or annual check ups. Do not avoid needed or suggested physician follow-ups or appointments, because breast health is an everyday, essential concern.

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Stephen Gross/The Anniston Star

Sherry Jones goes over the work schedule with Susie, her sister and co-owner of Hair & Co. Salon in downtown Anniston.

## JONES

Continued from Page 1A

Philippians 4:13: "I press on toward the goal to win the prize for which God has called me heavenward in Christ Jesus."

When Jones had to stay at the American Cancer Society Hope Lodge in Birmingham — a free home-away-from-home for cancer patients and their caregivers — White would stay with her for three days, and Jones' friend Robbin Hodges would stay with Jones the other days.

Scott Shiflett organized a golf tournament in Jones' honor, and people who did not even know Jones played in the tournament. Other friends regularly brought dinner to Jones' house, and others made prayer shawls for her.

"My friends gave me a basket of little gifts and told me I could open one each day. My mom would ask if I wanted to open a gift, and sometimes I didn't feel up to it, but I would

ask her to open it in front of me, and those gifts meant so much," Jones said.

Jones' mother had her own battles with cancer. She was diagnosed with lung cancer in December 2005 and told she had five years to live. She lived another 14 years before being diagnosed with a different kind of lung cancer in July 2019 and passing away in November 2019.

"She was such a stronghold for me. Her faith and her walk with God was so strong. She was my biggest cheerleader," Jones said.

When she is not running the front desk at Hair & Co. Salon in Anniston, Jones enjoys reading, solving jigsaw puzzles, spending time with family and friends and spreading positivity.

Asked what positive Jones found in her cancer battle, she replied, "The good thing about cancer treatments is that because you're emitting poison, bees, flies and spiders don't get around you. That was my positive. Always find the positive in everything."

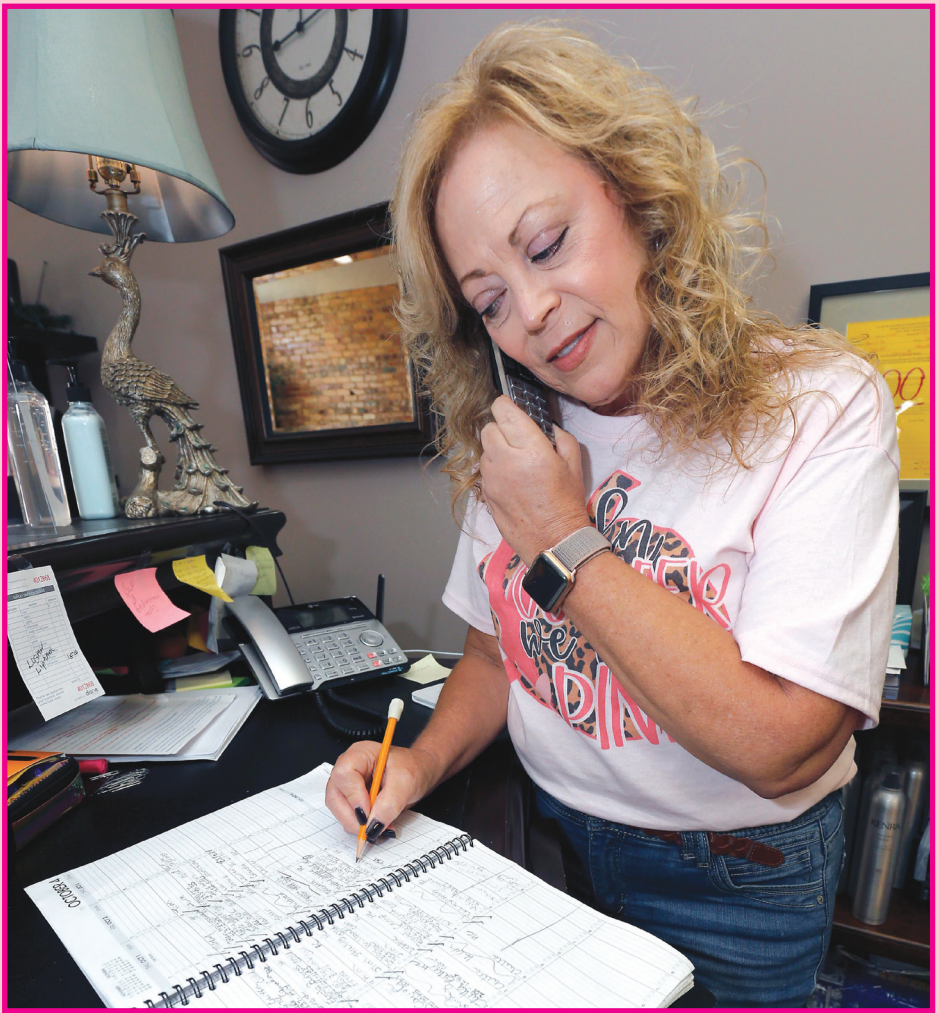
“ I didn't really pray for myself because I didn't know how to pray for myself, but God knew my need. I prayed for other people. God was going to get the glory. If even just one person comes to know him through this, it was worth it.”

— Sherry Jones



Stephen Gross/The Anniston Star

Jones poses with a pink flower painting at Nunnally's Noble Frame & Gallery in downtown Anniston.



Stephen Gross/The Anniston Star

Jones writes in a scheduling book at Hair & Co. Salon in Anniston.

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# 'FOR COMFORT AND DIGNITY'

## Cancer survivor, 86, leads breast-knitting campaign

BY PAM KRAGEN

The San Diego Union-Tribune

Pat Anderson admits to spending nearly half of every day knitting in her living room rocking chair. But don't underestimate this hard-working philanthropist.

Anderson, 86, is the founder of the Sisterhood of the Boobless Wonders, and the fashion accessories she turns out in her "knocker rocker" each day are knitted pairs of breast-shaped bra inserts that she calls "Busters."

At her own expense, the veteran textile designer makes the lightweight synthetic yarn-and-microfiber cushions and mails them to women like herself who have undergone mastectomies as the result of breast cancer.

Since January 2017, she has shipped 187 pairs of Busters to grateful women around the country, and the prolific artisan has another 100 pairs in reserve for anyone else in need.

Anderson's Busters come in all major bra cup sizes and a rainbow of delicate pastel colors. The one yarn shade she avoids is beige because she said it looks too much like skin.

"I don't call my Busters prosthetics because they're not replacement parts," she said. "These are nice little accessory products to give you some comfort and dignity and they help make your clothes fit right."

Anderson lost her breasts to cancer at the age of 74. During her recovery she received a pair of silicone prosthetic forms to wear inside her bra.

"They were terrible," she said. "I think every breast cancer survivor has a pair of those in a box hidden in their closet. They're heavy, they hurt your back and they don't fit properly."

She experimented with rolled-up socks and bath scrubbers but nothing worked. Eventually she gave up and wore nothing, but her clothes never fit properly and she could no longer use her own body as a model for her handmade jackets.

Then three years ago her daughter and fellow fiber artist, Kristin Osborn of Ramona, emailed her a link to the website for Knitted Knockers, an organization that works with knitters nationwide who make breast-shaped bra inserts for people like herself.

Anderson joined the group and produced a couple hundred pairs of Knitted Knockers. But she didn't like the knitting



Charlie Neuman/San Diego Union-Tribune/TNS

**Pat Anderson holds a basket full of her various 'Busters,' or wardrobe accessories for breast cancer survivors.**

pattern they use because the cushion it creates is unnaturally ball-like. She also didn't like that volunteer knitters had to buy the patterns and yarn kits from the yarn stores that run the organization.

Instead, she decided to start her own organization, the Sisterhood of the Boobless Wonders (SBW for short) and has made it the final capstone project of her 50-year career as a fiber designer and craftswoman.

Anderson was raised in Minnesota, the descendent of a long line of Scotch-Canadian weavers, spinners and tailors. She learned to knit as a girl from her mother and grandmother, making socks for injured soldiers in World War II.

As an adult, she taught college-level textile design at a private studio where she made and sold her weavings, pillows, jackets, table linens and yardage for sewing. She said she prefers functional design over visual fiber art because it's designed to be touched.

"It's a form of communication when

you work on a handcrafted item because your entire energy is focused on it and that comes through your hands into the piece," she said.

Her late husband, Duane Anderson, was an early computer design engineer whose company was purchased in 1982 by NCR Corp. As part of the sale, the couple relocated to Escondido, Calif., that year for what was supposed to be a two-year stay while he did transitional work at the NCR plant in Rancho Bernardo, Calif.

But Duane fell in love with California and decided to retire here two years later. They bought a 20-acre ranch in Escondido. He built a woodworking shop and became known for his handcrafted spinning wheels built from his wife's design. She relaunched her fiber business with her daughter.

In 2006, she fought and beat breast cancer. Four years later, her husband passed away. When her eldest son and caretaker, Erik, died earlier this year, she moved into Escondido's Redwood Terrace

retirement community with her dog Charlotte, a Rhodesian ridgeback.

Anderson works with Sharp Memorial Hospital's oncology patient navigators to get referrals for women who'd like a pair of her Busters. She also takes requests via email at [spinshuttlestudio@gmail.com](mailto:spinshuttlestudio@gmail.com).

Among her satisfied recipients is Cindee Collins of Murrieta, Calif., who lost both her mother and grandmother to breast cancer. After her double-mastectomy a few years ago, she found Anderson's Busters during an online search for prosthetics.

Collins said she loves how she can fit the soft, adjustable, lightweight and fully washable Busters in the pockets of her sports bra, and she especially loves how they were designed by a breast cancer survivor who understands the challenge mastectomy patients face.

"She's just a lovely, lovely lady and she does this for the love of it," Collins said. "I think these are the greatest thing since sliced bread."

Another recipient from San Diego, who asked that her name not be used, said she was so unhappy with the prosthetics on the market that she went lopsided for four years after a single mastectomy. Then she heard about Busters.

"I thought I was doing OK without it until I got these and it really changed my perspective," the woman said.

Anderson underwrites the cost of her materials, including the cellophane gift bags she packages the Busters in and the butterfly-decorated shipping bags she mails them in. Inside each package is a letter bestowing upon the recipient honorary membership in the Sisterhood.

Recipients can make an optional donation for postage, and many checks have come in tucked into handwritten thank-you cards. What Anderson doesn't use for postage, she saves and donates to Sharp's breast cancer program.

Anderson said she plans to use the rest of her retirement years making Busters and hopes on day to pass along the project to other master knitters or members of the Sisterhood.

"This whole experience has been the most fun I've had yet," she said. "It's so fulfilling talking to these women who all appreciate that I'm a survivor. I know what they're going through because I've been where they're been."

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# SURVIVING 'THE WEEKEND THE WORLD SHUT DOWN'

## Kattie Hendrix battles breast cancer with courage and love of life

BY EJ VERNON

Special to The Daily Home

Kattie Hendrix studied the reflection in the mirror. Her blond hair lay scattered on the grass.

The side effects of her first chemotherapy treatment caused significant hair loss, so Kattie decided to take matters into her own hands and shave her head during a photo shoot. She called her hairdresser and good friend Brandi Harris to take the photos.

"When Kattie sent me a text with a photo of her holding a handful of hair saying, 'I think it's time,' I think that is when it became a reality for me," Harris said "There is something real when you talk about shaving your head."

Kattie hoped to be an example of strength to her four daughters. Her daughters enjoyed doing their hair and playing with makeup, but Kattie wanted to show them that inner beauty matters more than outer beauty.

"I wanted to show them that your hair is not what makes you who you are," Kattie said.

Tears flooded Harris' eyes as she shot the photos.

"Kattie is the type of person who always freely gives advice," Harris said. "I was heartbroken because there was nothing I could do to fix it, nothing I could do to take her pain away."

"So much of photography is joy, but when you shoot something challenging, it makes the experience special. I knew it was going to be hard to capture what I thought was a dark day, but I also know I was documenting part of her journey."

Kattie was only 33 when she discovered a lump on her right breast.

"It was just another Saturday in February," Kattie said. "I was hanging out with family at the farm like we always do. When I came inside to take a shower, I was startled because the lump was not there the day before."

She thought about her options and wanted to call her gynecologist but chose to postpone the phone call. A gifted specialist for third-, fourth-, fifth- and sixth-graders at Talladega County Schools, she was scheduled to travel with her sixth-graders to Disney World.

"I couldn't let my students down, so I called the following Monday," she said.

Doctors diagnosed Kattie with triple positive breast cancer on Friday, March 13.

"My family and I always refer to that time as the weekend the world shut down, because not only was I diagnosed with cancer, that was also when COVID happened," she said.

Zane Hendrix, Kattie's husband, attempted to hide his fear when he heard the diagnosis.

Please see HENDRIX | Page 2B



Photos courtesy of Brandi Harris

Kattie Hendrix (top) was diagnosed with triple positive breast cancer in March, around the same time the COVID-19 pandemic hit Alabama.



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Photos courtesy of Brandi Harris

The side effects of Hendrix's first chemotherapy treatment caused significant hair loss, so she decided to take matters into her own hands and shave her head during a photo shoot with her family.

## HENDRIX

Continued from Page 1B

"When I first found out, I was scared, but I didn't want her to know because I needed to be strong for her," he said. "Kattie is the love of my life. She is the love of my life. I don't know what I would do without her. I am a natural

planner, and at that moment, I was planning what I would ever do if I lost her."

Kattie began chemotherapy treatment on April 6. Doctors decided to start treating Kattie's cancer with chemotherapy to shrink three tumors before removing them during surgery.

"I felt better once treatment started because I trusted the doctor's plan, and thankfully it worked and I still have her,"

Zane said.

Like most cancer patients, Kattie experienced physical pain and feelings of defeat, but Kattie continued to live life.

"I always call her Super Woman," Harris said. "Even though Kattie was sick, she was there for me in ways I never could be for her. She taught me how to make cornbread. She was the one who was sick, and she was mak-

ing videos and teaching me how to do something. I think she changes the lives of everybody around her."

Kattie is now in remission.

"There were so many days I wish I had a fast-forward button, but I kept telling myself this is temporary," she said. "I've tried so hard to be positive throughout this process. Everything happens for a reason."

## Coosa Valley Medical Center supports Breast Cancer Awareness Month

BY MICHELLE LOVE

Special to The Daily Home

Physicians and patients at Coosa Valley Medical Center in Sylacauga firmly believe in celebrating Breast Cancer Awareness Month.

Last October, for example, patients and doctors alike pulled out their best pumpkin painting skills during the medical center's "For the Girls" event. The day involves painting pumpkins in various creative ways (such as decorating the seasonal squashes with the Breast Cancer Awareness ribbon and the likeness of Miss Piggy) to bring a splash of color to the hospital and remind people how breast cancer patients and survivors deserve recognition.

Terri Vaughan, director of hematology and oncology at CVMC, has announced that "For the Girls" will be held again in 2020, although the exact date has not yet been determined.

"Last October, the CVMC hematology and oncology staff held a pumpkin-decorating contest, allowing patients to be the judges. Prizes were given to patients, and our staff had a wonderful time celebrating them throughout the month," Vaughan said. "There were pig pumpkins, ghost pumpkins, pumpkins with tutus and pumpkins full of bling. Much fun was had, and a new tradition was born that promotes awareness for what the cherished pink ribbon stands for."

Making sure all patients feel includ-

ed and appreciated is a top priority for the medical center's staff, and Vaughan said the event gives the patients a fun activity to highlight their creativity. The various designs also give insight into their immense spirit which continues to fight to overcome the obstacles each faces.

According to Vaughan, staying on top of your physical health is important, and she advises women to perform self-exams to make sure everything is normal.

"According to breastcancer.org, over 300,000 women will be diagnosed with breast cancer by the end of 2020," she said. "Early detection is critical in diagnosing and treatment. This is why we are so passionate in encouraging women to stay current with their mammograms as well

as performing routine self-exams, even during these difficult and trying times."

Vaughan said since "For the Girls" was such a success last year, the staff has been abuzz with excitement about this year's festivities. While the staff of CVMC's Hematology and Oncology department honor and respect breast cancer patients and survivors all year round, Breast Cancer Awareness month gives everyone the ability to see the strength and vitality in each person afflicted with the disease.

"In the month of October, we honor our breast cancer patients who are currently battling, our survivors who have overcome and the memory of those who have lost the battle," she said. "This one is for the girls."

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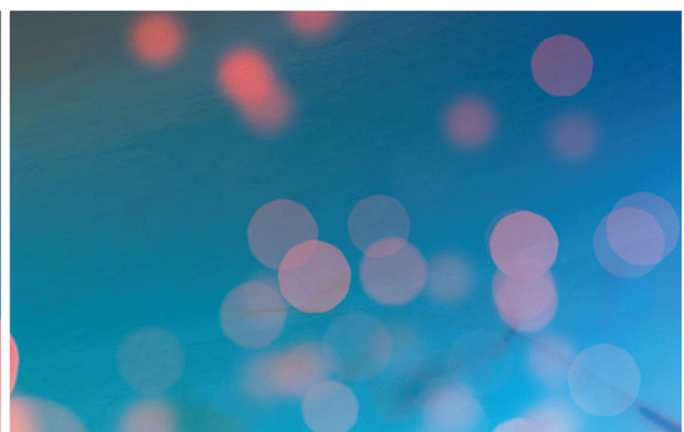
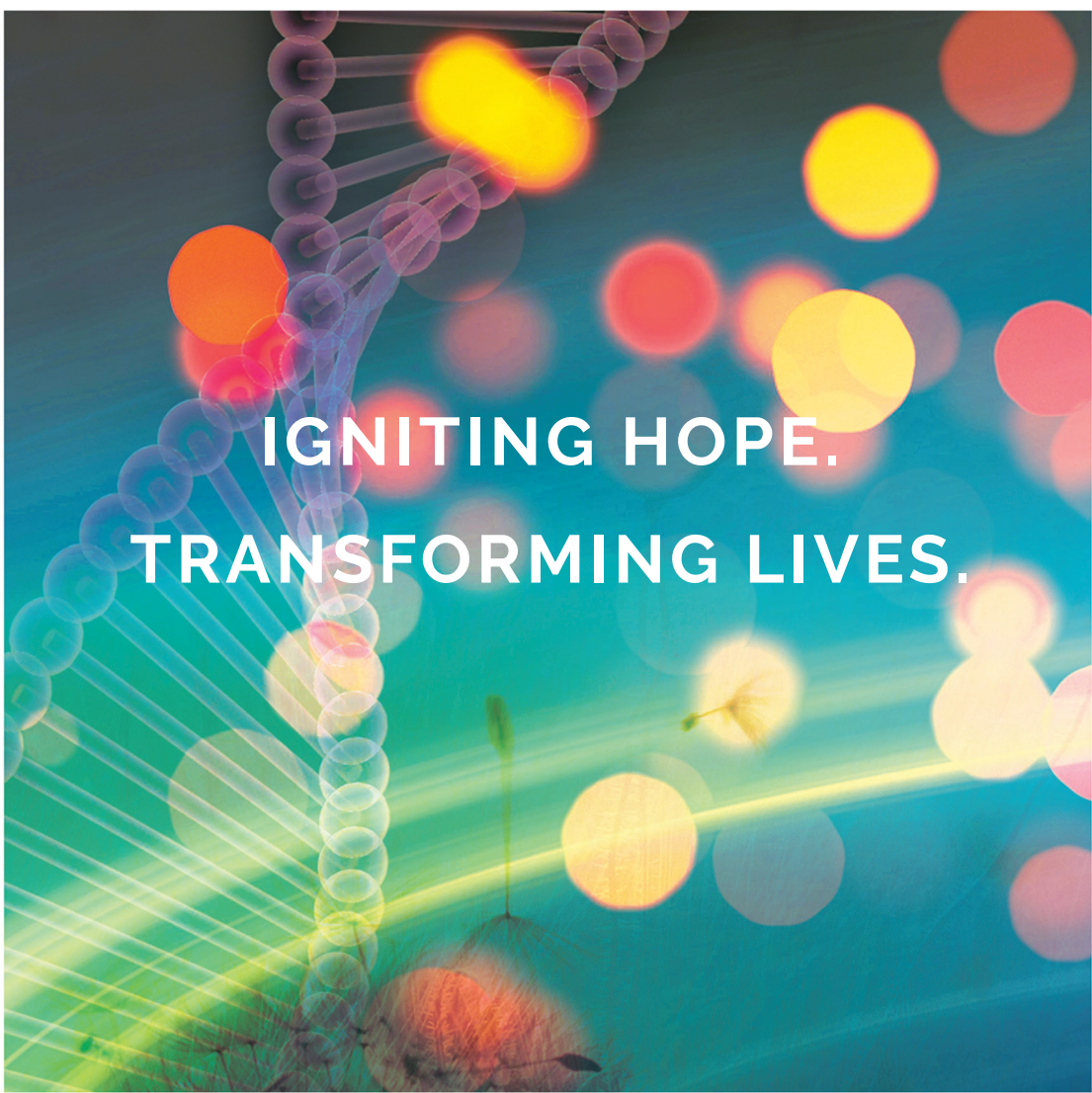
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# POSING FOR A PURPOSE

**BY RACHEL BURT**  
Watertown Daily Times, N.Y.

## New York ‘previvor’ shares story of preventive mastectomy, raising awareness of hereditary cancers

**CLAYTON** — If there’s one lesson Lawrence “Larry” P. Phinney instilled in his daughter, Jessica M. Phinney, through his years of battling prostate cancer and various other health issues, it’s to be proud of the scars and what you’ve been through. They show how tough you are.

Although she’s never had cancer, she learned years ago that she carries the BRCA gene mutation, which resulted in her decision to get a double mastectomy — giving her the scars her father always told her to wear with pride.

Mr. Phinney lost his decades-long battle with prostate cancer in April at the age of 71. Due to COVID-19 restrictions on gatherings, his family was not able to give him the funeral he deserved. Ms. Phinney, 36, feels with everything going on, she wasn’t able to grieve properly.



Kara Dry/Watertown Daily Times

**Jessica M. Phinney stands for a portrait on near the River Day Spa and Salon after getting her hair and makeup done for a photoshoot in Clayton.**

As a way of coping with her grief, as well as honoring the memory of her beloved father and raising awareness of hereditary cancers like breast and ovarian, Ms. Phinney has embarked on a journey to share her story, scars and perspectives with as many people as she can reach.

Along with creating a new Instagram account, @jessicaphinn, and a blog centered around her journey and what she enjoys doing, like baking, which can be found at jessicaphinney.com, Ms. Phinney is currently competing in the 2020 Maxim Australia Cover Girl Competition.

“I feel like we’re at a point in history as a society where we’re starting to be a lot more accepting of a lot more body types — be it weight, different diseases of the skin,” Ms. Phinney said. “I just want people to be more accepting of scars and to wear them proudly because my father, he was so proud.”

Hereditary cancer is caused from inherited genetic mutations. The two inherited genetic mutations most commonly responsible for breast and ovarian cancer are BRCA1 and BRCA2, short for Breast Cancer 1 and 2. Mutations in these genes can increase the risk for other cancers including male breast cancer, pancreatic cancer, prostate cancer and melanoma.

Looking for another way to raise awareness about BRCA and the fact that it affects both men and women, and knowing the male demographic would be harder to reach, Ms. Phinney came across Maxim Australia’s competition.

“It was just like BAM, this is the demographic that I really want to be able to reach out to — young men kind of think they’re invincible,” she said. “They also maybe have misconceptions about what breast surgery

is and what mastectomy is and that a woman after a mastectomy looks awful. So I thought this is a great opportunity to change a lot of minds and to raise a lot of awareness.”

Ms. Phinney is currently number one in her group in the competition.

To view the Maxim competition and cast votes for Ms. Phinney, visit [au.maximcovergirl.com/2020/jessica-phinney](http://au.maximcovergirl.com/2020/jessica-phinney). One free vote may be made daily, while additional votes may be purchased at no limit. The grand prize of the Maxim Cover Girl Competition includes not only a cover on Maxim Australia, but also a \$10,000 grand prize, which Ms. Phinney would use to make donations to both FORCE, national nonprofit organization devoted to improving the lives of people and families affected by hereditary breast and ovarian cancer, and the Jimmy Fund, which supports the fight against cancer at Boston’s Dana-Farber Cancer Institute.

“What’s super important to me to get across is that (showing my scars) came from my father and his wearing his huge open heart surgery scars for everybody to see,” Ms. Phinney said. “To feel like we need to hide or be ashamed of these things as a society, I just think that’s wrong and that’s something that I feel passionate about changing.”

Due to family history of cancer on her father’s side, Ms. Phinney knew she was at risk for the BRCA gene mutation as well. Seeing her father dealing with cancer for years, she did not want her own daughter, 6-year-old Magdalene, a first-grader at Guardino Elementary School, to go through the same thing, so she decided to get tested in 2015 at Elizabeth Wende Breast Care in Rochester.

The test was a simple

swab in the mouth and results were expected six to eight weeks later.

Working as a museum curator, Ms. Phinney, who was 31 at the time, was preparing for the night of her first opening exhibit at the Thousand Islands Art Center in Clayton when she received the call that she tested positive for the BRCA gene mutation.

“I could let it go to voice-mail, but that’s one of those things where I just kind of wanted to know,” she said. “My specific risk of breast cancer was 84 percent. It was overwhelming and I cried a little, but I got it together because I was kind of prepared knowing a lot of similarities between my dad and I. It’s overwhelming because it is a heavy thing, but at the same time, I can’t say I was surprised.”

While everyone has the BRCA gene, problems only arise if there is a mutation within the gene. Even before she was tested, Ms. Phinney made up her mind that if she were to test positive for the BRCA gene mutation, she would undergo a preventative mastectomy to greatly reduce her risk of breast cancer.

Known as a BRCA2 previvor, Ms. Phinney underwent a bilateral mastectomy in February 2016, had a reconstructive surgery nearly four months later and another reconstructive surgery in August 2018. She will likely need to have more surgeries in the future, including a preventative oophorectomy, a surgical procedure to remove one or both of the ovaries. She expects she will also need another breast surgery in her lifetime due to the lifespan of breast implants, but she said she would rather do that than chemotherapy.

“What is interesting is that it comes from my father’s side of the family. A lot of people, I think, asso-

ciate breast cancer with that it would come from your mother, but it can really come from either side of your family,” she said.

Ms. Phinney lives in Clayton with her fiancé Stephen M. Hanna, a physician’s assistant at North Country Orthopedic Group in Watertown, and her daughter. In the summer and over some holidays, they’re joined by Mr. Hanna’s two children. Though Ms. Phinney worries that Magdalene, also known as Maggie, may carry the BRCA gene mutation, she doesn’t let the worry overtake her, knowing that the choice to be tested must be Maggie’s own when she turns 18. In the meantime, the family is focusing as much as they can on healthy diet and exercise.

As for her mastectomy,

known as a nipple sparing, skin sparing mastectomy, Ms. Phinney was a candidate to keep her nipples, which she said a lot of people aren’t. She chose to get implants, so all in all surgery took about eight hours and she was heading home the next day, but she described the mastectomy as a horrific surgery.

After having the surgery, she would have to travel with her mother to and from Rochester, sometimes in blizzards, to be checked out and have drains removed that were previously placed to drain natural fluid buildup near the breasts.

“My mother had seen my father go through his cancer journey, and that included not just the radiation and the chemo, but also he had a number of health issues alongside of that, he went

through the gamut,” Ms. Phinney said. “My mother (Barbara A. Phinney) will attest that out of everything she has seen, hands down watching the mastectomy and the recovery from that, it’s pretty much the worst thing she’s ever seen in terms of medical healing, it was just awful.”


Unfortunately, after the surgery Ms. Phinney had some complications with one of her nipples, but eventually everything healed and turned out fine. Now, she is developing lymphedema in her left arm, which is swelling that generally occurs in an arm or a leg most commonly caused by the removal of or damage to lymph nodes as a part of cancer treatment. So she is currently looking for a specialist to help with treatment.

“I feel that that’s important to note that, especially for young women considering these surgeries, that things can go wrong that can affect you long-term,” she said. “Not that I would change a thing, and not that I am telling anybody to make a choice one way or another, I’m just trying to put all the information I have from my experience out there.”

Though she underwent multiple surgeries as a preventative measure due to her BRCA gene mutation, Ms. Phinney didn’t have cancer and said she cannot fathom how women go through mastectomies and then go right into chemo or radiation after, noting it knocked the life out of her for months.

“My heart goes out to women that have had breast cancer and that fight they fight, because you really have to put your all into it,” Ms. Phinney said. “I don’t want to equate what I’ve been through to what women that have had breast cancer have been through. I just went to hell, they have to go to hell and then some.”

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# Cancer doctors see medication options improving by ‘leaps and bounds’

**BY RANDY GRIFFITH**  
The Tribune-Democrat

Exponential advances in targeted cancer medications are allowing even those whose breast cancer has metastasized into other organs to live longer with fewer side effects — and with a better quality of life.

“I’ve never seen so many new things jumping out in my career,” said Dr. Michael Voloshin, a medical oncologist at UPMC Hillman Cancer Center at John P. Murtha Pavilion in Johnstown, Pa. Dozens of new cancer drugs and agents have been approved in the past year.

“When I started, if you got 10 things across the whole spectrum of oncology, that was a good year,” he said.

“This year, as with the past few years, we’ve made a lot of leaps and bounds in terms of breast cancer,” medical oncologist Dr. Sheetal Higbee said from Conemaugh Cancer Center at Memorial Medical Center in Johnstown.

“There are a lot of new therapies that are more targeted, with fewer side effects.

“We are also using a lot fewer forms of (intravenous) medications, which is excellent for a patient’s lifestyle.”

Instead of visiting the cancer center for what could be several hours of IV treatment, new oral medication is taken at home, she said.

Cancer drugs target specific structures on the cancer cells, based on the type of cancer identified in lab tests, the doctors say.

Breast cancer is divided into four basic groups, based on how the cancer cells are driven.

Positive cancers have receptors for the hormones estrogen or progesterone or

produce HER2 protein.

The hormones and proteins feed the cancer, and there have been cancer drugs to block the hormone receptors or block the protein production.

Some of the latest advances help patients with the most difficult types of breast cancer, known as triple-negative cancer.

“Positive tumors that we see all the time: these are the ones that respond very well,” UPMC Johnstown oncologist Dr. Rashid Awan said.

“The bad ones are the triple-negative.”

## Immunotherapy

Awan pointed to a study published in February in the New England Journal of Medicine that showed improved outcomes for triple-negative breast cancer patients who received the immunotherapy drug pembrolizumab along with traditional chemotherapy drugs before surgery.

Awan expects the study to lead to pembrolizumab’s approval for use before surgery.

It is currently approved for metastatic cancer, which has spread to other areas.

The study follows last year’s FDA approval of immunotherapy agents atezolizumab and nab-paclitaxel for people with advanced triple-negative breast cancer.

“Immunotherapy, which was kind of behind in the breast cancer world, has finally come out in the triple-negative setting,” Higbee said.

Another new medication is showing improvement for triple-negative patients whose cancer has spread to other areas, Voloshin said, adding that sacituzumab

govitecan (Trodelvy) is a combination therapy.

“It’s looking at two different ways in trying to attack the cancer,” Voloshin said.

“Some of these become so aggressive that you start going through treatments quickly so you can find something that can help a patient out.

“It gives us another option to try to stabilize somebody’s condition.”

## ‘Blood-brain barrier’

For HER2 negative patients, a new drug has been shown to help even those whose cancer has invaded the brain.

Tucatinib is important because it has been shown to effectively cross what is known as the blood-brain barrier to reach the cancer.

The barrier is a layer of cells that protect the brain from toxins in the blood.

Using tucatinib in combination with other HER2 agents allows those agents to work, Voloshin said.

“One of the worst complications is when cancer spreads to the brain,” he said.

“We are limited sometimes because the blood-brain barrier really blocks out a lot of our treatment.”

The advances and new agents keep coming and targeted treatments are leading to better outcomes, Conemaugh oncologist Dr. Ibrahim Sbeitan said.

“We have a much better understanding of the causes of forming cancer, the evolution of cancer and the mutations of cancer,” he said.

“We are targeting the initial event that has resulted in cancer. We are activating the immune system to fight the cancer.”

## COMMENTARY

# The danger in postponing cancer screenings during the pandemic

**BY CARYN LERMAN**  
Los Angeles Times

During the COVID-19 pandemic, a distressing downturn has occurred — cancer screenings dramatically decreased across the country. Early detection of cancer can improve the chances of survival. By delaying screening, patients are also delaying treatment and putting their health at risk.

Not surprisingly, with the disruption in routine cancer screenings, new cancer diagnoses have also decreased. Research published in an American Medical Association online journal showed that the average weekly number of new diagnoses of six common cancers — breast, colorectal, lung, gastric, pancreatic and esophageal — fell by more than 45 percent from March to mid-April compared with the previous two months.

In mid-June, weekly screening volumes for breast, colon and cervical cancer were as much as 36 percent lower than their pre-COVID-19 levels, according to a July report by the Epic Health Research Network.

While research suggests that screening rates for some cancers may be on the rebound, the hesitancy to undergo cancer screening is extremely concerning from a public health perspective. Many localized cancers are curable with surgery, radiation, chemotherapy, immunotherapy or a combination of these. But patients need to know they need treatment.

According to the director of the National Cancer Institute, we may see as many as 10,000 additional deaths from breast and colorectal cancer alone over the next decade because people failed to get screened and therefore treated for it during the pandemic. Cancer mortality rates have been falling in recent years. COVID-19 could reverse this trend.

When the pandemic first hit the U.S. early this year, patients were asked to stay home and postpone routine medical care. However, most hospitals have resumed routine business and have procedures in place to protect patient safety, including making face coverings mandatory and stationing health care personnel at entrances to screen for symptoms

of COVID-19.

With such precautions in place, people should feel more comfortable adhering to their recommended cancer-screening schedules. While it is completely understandable that some people may be worried about returning to a health care setting, postponing recommended preventive health measures may be far more dangerous.

For certain visits, patients can use telemedicine, which has grown in use during the pandemic, replacing some in-person office visits. However, for cancer screenings that require the use of specialized equipment, such as mammograms or colonoscopies, remote testing obviously is not an option.

Hospitals and clinics nationwide are reinforcing the message that cancer doesn’t stop for the coronavirus. Keck Medicine of USC is also part of a coalition of six of Los Angeles County’s largest nonprofit health systems that are participating in a public health campaign to urge the public to get the health care they need despite their fears of the coronavirus.

A public relation representative for USC Norris Comprehensive Cancer Center, part of Keck Medicine, said, “We are reaching out to our patients, emphasizing the many precautions we’ve put into place to protect their health, such as mask wearing, social distancing and frequent sanitizing of surfaces. In an attempt to ease patients’ minds, we created videos in four languages — English, Spanish, Mandarin and Korean — and had oncologists address concerns that patients may have about cancer screenings or treatments during the pandemic. The videos were emailed to patients and are available on our website.”

USC Verdugo Hills Hospital, is also offering discounted mammograms through October, Breast Cancer Awareness month, which may help those who have lost their jobs — and, as a result, their health insurance — during the pandemic.

In the age of COVID-19, it’s important for people to make, and keep, their cancer screening appointments. The coronavirus is not going away any time soon — and neither is cancer.

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