

GIRL, INTERRUPTED

AN UNSETTLING NEW REPORT SHATTERS THE MYTH THAT YOUTH IS A DEFENSE AGAINST BREAST CANCER. BY **JANCEE DUNN**.

few years ago, Kate McGough, an elegant speech therapist in New York City, visited her gynecologist to renew her prescription for birth control pills. When her doctor discovered a lump in her right breast during the routine exam, McGough, with no family history of breast cancer, was unconcerned. "I didn't think it was anything," she says, sitting on a chair in her school

office, her long blonde hair loosely tied in a ponytail, "and I'm the sort of person who thinks a common cold is MRSA." She figured the chances of someone at her age-29-having breast cancer were slim, and she wasn't wrong: The National Cancer Institute puts the average age of diagnosis at 61. McGough grew slightly more apprehensive when a needle biopsy was ordered. It was benign, but her doctor advised her to have the lump removed just in case.

"I went under," she says, "and woke up hearing that I needed a mastectomy." In a terrible fluke, the cells in the needle biopsy happened to

be nonmalignant, while those in the rest of the breast were riddled with cancer. She chose to have both breasts removed. "I didn't want to spend the rest of my life worrying, What if it comes to the left?"

McGough did not accept her diagnosis with equanimity; she was not one of those patients who called it "a gift." She was livid. In her apartment, she had pictures displayed of a recent trip to Paris, where her boyfriend, Damien, had proposed. She furiously swept them off the shelf. "That was the life I was going to have: get married, start a family, travel. I felt like I didn't recognize the happy person in the pictures." She did

not know anyone even remotely her age who had faced a similar diagnosis. At a support group she joined, she was the youngest person by decades. "The other women were concerned about how to tell their grandchildren they were sick," she says. "I was worried about whether Damien would still want to marry me, and if I could have babies."

McGough is among the growing ranks of young women stunned to be afflicted by this disease. According to a

STATE OF SHOCK
AS MORE YOUNG WOMEN ARE
LEARNING, BREAST CANCER CAN
STRIKE WHEN LEAST EXPECTED.

surprising new report, more women aged 25 to 39 are being diagnosed with advanced breast cancer than in the past, despite a lower incidence in general during that period. The study, published earlier this year in the *Journal of the American Medical Association (JAMA)*, found that advanced cases edged up from 1.53 per 100,000 younger women in 1976 to 2.9 per 100,000 in 2009. While it's a fairly minor increase, it's noteworthy because the disease, for reasons still unknown, is more aggressive in younger patients,

who are more likely to need a mastectomy and to have lower survival rates.

This study, coupled with Angelina Jolie's disclosure in May of her preventative double mastectomy at age 37, has put a spotlight on young women with breast cancer—the most common cancer for women under 40, according to the American Cancer Society (ACS). The study didn't address potential causes, which have flummoxed some of the country's preeminent experts. "I

don't think it's birth control pills, because the pills young women are taking are so much lower in estrogen than the ones older women would have been taking," says Rache M. Simmons, M.D., chief of breast surgery at New York Presbyterian Hospital/ Weill Cornell Medical Center. "Is it something that's giving us more radiation or some other toxin in our environment? Could it be something in our diet-all the hormones in chicken, in milk? I honestly don't know."

The new development has doctors and patients alike grappling with how to

deal with a serious disease at a time when women are still laying the foundation for their adult lives. Mikala Edwards, a manager for a young-survivorship program in Phoenix, was diagnosed two years ago at 25 and had a double mastectomy. The medication Edwards was on made her sex drive plummet: Chemoprevention drugs not only sap energy but can also plunge women into temporary menopause, complete with hot flashes. After Edwards's breasts were reconstructed, she was so weary from procedures that she has put off having nipples tattooed on. "How and when do you explain to someone you're dating health >282

CURLED UP BLUE NUDE, 2001. TOM WESSELMANN, OIL ON CANVAS, 49" X 55" / ® ESTATE OF TOM WESSELMANN/LICENSED BY VAGA, NEW YORK, NY.

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that you don't have nipples, let alone that you have no sensation in your breasts?" She nonetheless hopes to get married someday. "I have to find a man who's willing to take on my medical baggage," she says. "I've lost the innocence of being young, the feeling of being carefree."

Women with small children, meanwhile, struggle to make time for operations. Carrie Handler, a mother of three from suburban San Diego, had her double mastectomy, reconstruction, and hysterectomy done at California's City of Hope—in one day. "With three young kids, I just couldn't be laid up," she says. "After that, I still had four more surgeries to go." For months afterward, she was continually reminded of her physical limitations. "I couldn't lift a gallon of milk, or push my girls on the swings."

Perhaps the most pressing issue for women under 40 involves fertility. Chemo can damage a woman's eggs; radiation, even when aimed at the breasts, can harm other parts of the body, such as the ovaries. At worst, both treatments can induce early menopause. Just when a patient's life is upended by a diagnosis, she must make serious decisions about whether to harvest eggs or freeze embryos—and make them quickly, before treatment begins. Jocelyn Binder, a 29-year-old model who lives in Los Angeles, was diagnosed in March with

don't have a family history—and according to the ACS, most women with breast cancer do not. If an abnormality is spotted, as happened with McGough (she caught her cancer in Stage II), they often do not give it a second thought, and the disease progresses, which may help explain why the JAMA study saw a rise specifically in advanced-stage cancer. As breast surgeon Simmons says, women need to be proactive and "should not just be dismissed with 'Oh, I'm sure it's a fibroadenoma or a cyst; go home, it's going to be fine.'"

he good news is that after Jolie's very public action, droves of young women with family histories of breast cancer booked appointments with their doctors to get a clear-eyed evaluation of their odds. Her preventative double mastectomy is part of a larger trend of eliminating risk: According to a 2011 study in the *Journal of Clinical Oncology*, the percentage of women who chose to remove both breasts when only one had cancer jumped from 6.7 percent in 1997 to 24 percent in 2005.

"I've never had a patient regret the decision to do a bilateral mastectomy," says Simmons. "Nothing in medicine is ever 100 percent, but it gives you pretty

their denser breast tissue makes the picture harder to read), frequent ultrasounds, and antihormone drugs such as Tamoxifen, which can cut their relative rise of cancer by nearly 50 percent.

To help lower the odds of developing the disease altogether, doctors hope to empower all their younger patients with preventative tools. Cutting down on drinking is a good start, as too much alcohol increases women's chances of contracting breast cancer by changing the way the body metabolizes estrogen. (An analysis of dozens of studies found that relative risk increases a full 7 percent for each drink per day.) On the flip side, a diet heavy on produce has been shown to have protective effects, according to several large studies published recently. And a 2012 report from the ACS journal Cancer found that women can reduce the threat of breast cancer with exercise. The ACS recommends 45 to 60 minutes of physical activity at least five days a week (serious gymgoers who worked out at least ten hours a week benefited the most in the study, cutting their chances by 30 percent).

Meanwhile, efforts have also been made to combat the isolation that demoralizes younger patients, from specialized hospital programs to support networks. McGough joined the Young Survival Coalition, a nationwide group of more than 25,000 survivors and supporters, which she says was crucial for her healing process. During a meeting in New York, she was deeply relieved to be in a room with people her age. "All I'd have to say is 'I went to the gym, and it was the worst to have to change in front of everyone in the locker room and see perfect breasts everywhere," she recalls, "and everyone would say, 'Oh, I completely get it."

It has been five years since McGough's diagnosis, and so far, there's no sign of the disease's return. During that time she has gotten married to Damien (using extensions under her veil to augment her still-sparse hair), competed in the New York City Triathlon, and traveled to Tokyo and South Africa. She has also undergone seven grueling surgeries, lost a friend in her support group, and takes Percocet for chronic pain in her chest.

"But," she says, "I'm here." □

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cancer in her right breast. Soon afterward, her boyfriend, with whom she had imagined spending her life, left her. "He had trouble adjusting to my hair loss and my wigs," she says with a sigh. "If he were the right guy for me, he would still be here." Binder scrambled to preserve her fertility. "Once tests showed the cancer had spread to my lymph nodes, my doctors wanted to start chemo right away," she says. Binder persuaded them to wait a few weeks so she could inject herself with follicle-stimulating hormone to mature her eggs; she was able to freeze eight of them.

Women often think youth makes them immune to breast cancer, a myth that has slowed detection, especially if they much an assurance that you're going to see your children and grandchildren." And from a cosmetic standpoint, if both breasts are reconstructed at once, doctors are often able to finesse more natural-looking, symmetrical breasts. Fortunately, the techniques for reconstruction—from "gummy bear" implants, which are more realistic in texture and shape, to discreet incisions—have vastly improved in the past few years. As Simmons puts it, "If you were in a bikini, no one would know you had had a mastectomy."

Of course, surgery is not the only option: Early detection is key, and high-risk young women can be vigilant with mammograms (usually not recommended for those under 40 because