

# 10 Questions to Ask Your Healthcare Provider if You Have Been Recently Diagnosed with Metastatic Breast Cancer



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A metastatic cancer diagnosis can be an overwhelming and emotional experience. The following questions are provided to help guide you as you speak with your healthcare team to better understand your diagnosis and decide on a treatment plan.

## **1. What does a metastatic breast cancer diagnosis mean?**

Breast cancer that has spread to distant organs is called metastatic. Upon hearing this diagnosis, one of your first questions naturally may be around what this means for you especially in terms of quality and length of life. Everyone is unique and your prognosis may be affected by your personal health history, tumour size, site of metastases, and sub-type of cancer.

Your healthcare provider will go over treatment options.

## **2. What is the breast cancer sub-type? ER+, PR+, HER2+ or Triple Negative?**

Your cancer sub-type will affect the type of treatment you receive. Your healthcare provider will test to determine the human epidermal growth factor-2 (HER2) and hormone receptor (HR) statuses (estrogen and progesterone, ER and PR) of the breast tumour cells. HR and HER2 tests are the most common sub-types tests for breast cancer. HR and HER2 can either be present, or positive (HR+, HER2+), or absent or negative (HR-, HER2-), in the tumour. A tumour can in fact be HR+ and HER- or HR- and HER+. The HR status determines if the cancer is driven by the hormones progesterone/estrogen and the HER2 status determines if the cancer has an overexpression of HER2 protein. Triple negative cancers (ER-, PR-, HER2-) are not driven by the hormones progesterone/estrogen nor by the overexpression of HER2. The status of each can be treated differently and will help you and your healthcare team determine your treatment option.

## **3. Where in my body has the cancer spread?**

Metastatic breast cancer most commonly spreads to regional lymph nodes, lymph nodes far from the breast, chest wall, skin of the breast, bones (spine, ribs, bones of the legs), brain, lungs and liver. It is important to know that metastatic cancer has the same type of cancer cells as the primary cancer. For example, when breast cancer spreads to the liver, the cancer cells in the liver are breast cancer cells. It is metastatic breast cancer, not liver cancer, and is treated accordingly.

## **4. What are my treatment options? What treatment plan do you recommend for me and why?**

It is important to understand your treatment options and work with your healthcare team to decide on the best treatment plan for you given your particular sub-type of breast cancer. Treatment plans can include either chemotherapy, radiation, surgery and/or targeted therapy like hormone therapies such as anti-estrogen medications, aromatase inhibitors, or ovarian suppression. As metastatic breast cancer is not yet curable, the goal of treatment is to slow down the growth and spread of breast cancer cells, which in turn may help you maintain your quality of life and/or to remain free of symptoms for as long as possible.

## **5. What are the side effects of these treatments and how long will they last?**

Every treatment plan will have side effects. Ask your doctor about what they are to help you prepare for the type of support you will need once you undergo your treatment and how to manage side effects.

## ***6. Will I be in pain? How can I manage my pain?***

You may experience pain as a result of breast cancer that has metastasized to other locations in the body. There are pain management strategies that can help you cope with your discomfort. A preferred method of pain management is to shrink painful tumour(s). You may also seek additional pain relief from over the counter prescription pain medication or therapies like acupuncture, massage therapy, meditation or yoga. Speak to your doctor about other options to help manage your pain.

## ***7. What happens if I choose to stop treatment or if it stops working?***

Stopping or missing steps in your treatment plan can compromise your health. It is important that you understand what the consequences are and what measures you need to take should you miss or stop your treatment. Always consult with your healthcare team before stopping or switching to any treatment plans.

## ***8. What level of caregiving will I need at this time?***

This question will help you understand what type of support you will need both physically and emotionally as you undergo treatment. You do not have to go through this alone. Your healthcare team can provide information about support services in your community and can provide referrals to other professionals such as social workers, therapists, and psychiatrists. If you have a close friend or family member who is willing to take on the role of caregiver, there are resources for that individual as well. They can access local caregiver support groups and resources.

## ***9. Are there clinical trials I should consider? If so, how can I learn more?***

Clinical trials are done to determine the safety and efficacy of potential new treatments. If eligible, participating in a clinical trial may give you access to a treatment that is not yet publicly available and, if it is found to be more effective than the standard therapy, you may be among the first to benefit. It's important to note that treatments being studied in clinical trials are experimental, not yet been authorized for sale by Health Canada and may pose risks or side effects that are not yet known. It is also possible that the treatment may prove to be ineffective or as effective as current approved treatments. It's important to speak with your healthcare team to assess if this is an avenue you wish to pursue.

## ***10. What services or support are available specifically for people with metastatic breast cancer?***

The Canadian Breast Cancer Network offers several services and support for people with metastatic breast cancer. Ask your doctor about services near you or visit [www.cbcn.ca](http://www.cbcn.ca).