

REFERENCE GUIDE FOR PHYSICIANS

INFLAMMATORY BREAST CANCER

The Inflammatory Breast Cancer Program – part of the Breast Oncology Center at Dana-Farber/Brigham and Women's Cancer Center – offers highly specialized evaluation and care for patients with inflammatory breast cancer (IBC), a rare and aggressive form of breast cancer that is frequently difficult to detect and often presents at a very advanced stage.

Multidisciplinary Clinic

Our medical, surgical, and radiation oncologists work together in treating patients with IBC, most often with chemotherapy followed by surgery and state-of-the-art radiation therapy. By employing a coordinated, multidisciplinary approach, patients are able to begin treatment quickly, which is essential given the aggressive nature of the disease.

Patients also have access to multiple clinical trials, designed specifically to improve therapies for IBC. A range of trials are available including studies for newly-diagnosed patients, patients who present with metastatic disease or local-regional disease recurrence, and patients who did not achieve a complete pathologic response at mastectomy following initial chemotherapy.

Indications for Referral

Unlike other forms of breast cancer which can be identified by a mass, IBC is more diffuse, with more lymphatic involvement that causes the breast to feel thick or heavy, and makes diagnosis more difficult. IBC patients also tend to be younger, with a median age of 59, compared with patients with other forms of breast cancer.

Patients who present with redness, swelling, pain or itchiness of the breast or thickening of the skin on the breast with ridging or dimpling (peau d'orange) should be referred to a specialist for evaluation, a clinical examination, and a biopsy to confirm diagnosis.

While IBC shares clinical similarities to breast infection (mastitis), if a patient does not respond to antibiotic treatment for mastitis, a specialist should be consulted about inflammatory breast cancer.

Clinical Research

Our researchers and clinicians are involved in clinical and basic science research to enhance our understanding of IBC, develop more effective diagnostic and treatment options for patients, improve the current five-year 25 to 50 percent survival rate for patients with IBC, and expand prevention strategies for women at risk for the disease. In addition through the acquisition of tissue samples from IBC patients, our team is investigating the epidemiology of the disease, including its genetic associations.

IBC Program Team

A multidisciplinary team of medical and radiation oncologists, surgeons, radiologists, pathologists, researchers and nurses within our Breast Oncology Center provide expert care for patients with IBC. IBC Program Coordinators consult with clinical staff on treatment of the disease and facilitate development and participation in clinical research programs. This multidisciplinary team includes:

- Beth Overmoyer, MD
IBC Program Director, Medical Oncology
- Mehra Golshan, MD, Director of Breast Surgical Services
- Jennifer Bellon, MD, Radiation Oncology
- Lynn Colicchio, RN, BSN
IBC Program Clinical Nurse Coordinator
- Kornelia Polyak, MD, PhD
Medical Oncology/Molecular and Cellular Research
- Eren Yeh, MD, Diagnostic Radiology
- Susan Lester, MD, PhD, Chief, Breast Pathology

Additional clinical staff in the Breast Oncology Center also actively see IBC patients.

Referral and Contact Information

To refer a patient for diagnosis and treatment for IBC, call **877-332-4294**. We look forward to working with you in the care of your patients and to advancing the understanding and treatment of inflammatory breast cancer.