

## Summer 2017 Newsletter



Welcome to the first issue of the Inflammatory Breast Cancer Program's Newsletter. This bulletin will provide information focusing on our mission of education, research and the care of IBC. These three core goals are represented by our green braided rope, showing each element braided with the others to give strength and support in the pursuit of understanding and curing inflammatory breast cancer (IBC). The color green symbolizes growth and success - again, perfect for our goal of eliminating IBC. We hope the emblem of our program inspires you through treatment and beyond.

We were thrilled with the turn-out for our first annual patient forum in May. We will be participating in the Jimmy Fund Walk on September 24 to raise funds that support basic science and clinical research devoted to IBC. We hope to see you all there!

Our goal is to ensure that people with IBC feel supported and secure in the knowledge that our program strives to provide the best care possible, and will work diligently on research optimizing the treatment and understanding of this disease.

***Beth Overmoyer MD, FACP, Director, Inflammatory Breast Cancer Program***

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## Team IBC at the Boston Marathon Jimmy Fund Walk

### Walk with Us!

**Sunday September 24, 2017**

Team IBC, made up of our IBC Program clinicians, staff, patients, advocates, and loved ones, will be walking this September to raise funds for the DFCI Inflammatory Breast Cancer Research Fund.

#### How to participate:

- **Join the walk!** Walk 5k, 10k, Half Marathon (13.1 miles) or Full Marathon (26.2 miles) along the Boston Marathon route. All walks end in Copley Square to celebrate with music and refreshments.
- **Can't make it? Join as a Virtual Walker!** An option for fundraisers who want to be on the team, but can't walk at the event.
- **Spread the word and support Team IBC!** Share <http://www.jimmyfundwalk.org/2017/teamibc> with your friends, family, social media networks, and anyone who wants to help us defeat IBC.

For more information on the Boston Marathon Jimmy Fund Walk, including fundraising tips, walker stories, FAQs, and walk day logistics, check out [jimmyfundwalk.org](http://jimmyfundwalk.org). Or feel free to contact team captains at [DFCI\\_IBC@dfci.harvard.edu](mailto:DFCI_IBC@dfci.harvard.edu).

*1<sup>st</sup> Annual*

## Inflammatory Breast Cancer Patient Forum



Over 60 patients and their loved ones attended the 1<sup>st</sup> Annual DFCI IBC Patient Forum held at Dana-Farber this past May. The program was a blend of educational talks, provider/patient dialogue, and community networking. “We need to separate, understand, treat, and cure inflammatory breast cancer,” stated Dr. Overmoyer in her opening remarks. “We need to focus our research on IBC, not just incorporate IBC patients into trials.” Dr. Jennifer Bellon discussed the details of radiation therapy and Dr. Faina Nakhli spoke on applications of surgery for IBC, including reconstruction. The day culminated in a Q&A session with a panel of experts from the IBC Program. Thank you to all who attended for making this a wonderful day of education and community support.

For those who are new to DFCI or could not attend, you can watch the presentations on the [IBC Forum web page](#). Please note, links to videos work best in Internet Explorer.

Planning has already begun for next year's spring forum! We hope to see you there.

## IBC FAQ

### **Is it safe to eat soy?**

Many patients are concerned about eating soy products. A quick internet search will turn up a lot of conflicting information – some say it can protect against breast cancer and others say it can be harmful.



**Why the concern?** Soy products contain a plant-based nutrient that has a weak estrogen-like effect on the body. These are called isoflavones and are a type of phytoestrogen. Because estrogen affects some breast cancers, some people are concerned that isoflavones may affect the disease as well.

**What is safe?** First, it is important to understand the different types of edible soy products.

**Whole soy foods:** Examples include edamame, soy nuts, soy milk, and tofu. Current evidence suggests that it is safe to eat 1-2 servings per day of whole soy foods, even after a breast cancer diagnosis. These foods can also be rich in other nutrients and are a good source of protein. Although some claim these soy foods can protect against cancer, there is not enough evidence to support soy as a preventative measure.

**Soy supplements:** Examples include isoflavone supplements, soy protein powder, some brands of nutrition bars, some veggie burgers and soy hot dogs. These foods are not necessarily dangerous, but not much is known about their impact on breast cancer. Because these products can have high levels of isoflavones and have not been well studied, it is recommended to avoid these foods and supplements. Look for “isolated soy protein” on the ingredients lists to help identify these foods.

**Other safe soy products:** Examples include soybean oil, soy sauce, and foods with soy lecithin. Although “soy” is in the name, these foods have no phytoestrogen activity and are safe to eat.

For more information, visit Dana-Farber Nutrition Services at <http://www.dana-farber.org/nutrition>

## Research Update

### **#IIBC5**

The 5th International Inflammatory Breast Cancer Conference was held on July 9-10, 2016 in Boston, MA. This program brought together scientists, clinicians, and patient advocates from around the world interested in understanding this unique disease, and fostered significant collaboration in the study of IBC. The agenda featured presentations by IBC specialists and scientists in related fields of medicine and cancer biology. Each session culminated in panel discussion, which included patient advocates.

The program was organized by Dr. Overmoyer and Dr. Massimo Cristofanilli, of the Robert H. Lurie Comprehensive Cancer Center of Northwestern University. "Hosting the international IBC conference was a great opportunity for our program, bringing much-needed attention to this rare but serious form of breast cancer," Overmoyer said. "It brought together researchers who were not investigating IBC and encouraged a re-direction of their research toward IBC. We look forward to seeing the outcome of these collaborations."

## Standard Tests

### **Breast MRI**

Magnetic resonance imaging (MRI) of the breast is an important test for all newly diagnosed IBC patients. MRI uses a magnetic field and radio waves to make pictures of the breast. Most patients will get a mammogram and ultrasound as part of their diagnostic tests, and this is sufficient for many breast cancer patients.



Because IBC does not always have a clear lump and can include other symptoms, such as swelling of the skin and breast, MRI can help doctors see cancer that did not show up on other scans. It can also give a more complete picture of the extent of IBC. Additionally, cancer in the breast can cause changes in normal blood flow and MRI is often done with an injected dye (called contrast) that makes it easier to see these changes.

## Staff Spotlight

### **Faina Nakhlis, MD, FACS**



Dr. Faina Nakhlis has been the surgical liaison for the IBC Program since 2009, overseeing the surgical research and care of IBC. Originally from Ukraine, Dr. Nakhlis received a degree in Biology from the University of Illinois and then received her medical degree from Rush Medical College in Chicago in 1996. While doing her residency in general surgery Northwestern University in Chicago, she had the opportunity to attend the San Antonio Breast Cancer Symposium and was inspired by the fascinating research presented. Dr. Nakhlis has been with Brigham and Women's Hospital and DFCI since completing her fellowship in 2003.

As a breast surgeon at DF/BWCC and an Assistant Professor of Surgery at Harvard Medical School, Dr. Nakhlis is not only a full-time clinician; she also teaches residents and medical students and contributes to many breast cancer research studies. Dr. Nakhlis chose IBC as a research focus because it seems to her to be the most challenging type of breast cancer and there is great need for improving care. She hopes to lead future research projects to better understand how use (or avoid) surgery to effectively treat IBC while minimizing quality of life issues like lymphedema and breast symptoms.

In her limited free time, Dr. Nakhlis enjoys reading, classical music. She will be walking the half marathon with us at the Jimmy Fund Walk this September!

## In the Media

Cancer Mythbusters is a new Dana-Farber podcast series debunking the many myths and misconceptions in the world of cancer with the help of our world-leading clinicians and researchers.

Listen to Dr. Overmoyer on Episode 1: Breast Lumps and Cancer

<http://www.dana-farber.org/Health-Library/Cancer-Mythbusters.aspx>



## IBC Program Members

Beth Overmoyer, MD, FACP (Medical Oncologist, IBC Program Director)

Thanh Barbie, MD (Breast Surgeon)

Jennifer Bellon, MD, FASTRO (Radiation Oncologist)

Laura Dominici, MD (Breast Surgeon)

Beth Harrison, MD (Pathologist)

Heather Jacene, MD (Nuclear Medicine Physician)

Tari King, MD (Breast Surgeon)

Faina Nakhlis, MD, FACS (Breast Surgeon)

Kornelia Polyak, MD, PhD (Cell Biologist)

Julie Salinger, MSW, LICSW (Social Worker)

Emily Schlosnagle, MS (Research Project Manager)

Kelly Smith (Breast Oncology /IBC Program Coordinator)

Laura Warren, MD (Radiation Oncologist)

Eren Yeh, MD (Radiologist)

## **Stay in touch!**

We welcome feedback, questions, or suggestions of topics you would like to learn more about. Contact us at:

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