What is TNBC?

Triple-negative breast cancer (TNBC) is a breast cancer subtype that may be aggressive. Unlike other breast cancers, TNBC cells lack estrogen receptors and progesterone receptors, and do not have an excess of HER2 receptors. That is what makes it “triple negative.” Due to the absence or low number of these receptors, treatments that work for other types of breast cancer may not be an option for people with TNBC.

Who can get TNBC?

Anyone can get TNBC. But it is more common in women who are younger than 40, African-American, or have BRCA1 or BRCA2 mutations. It is not clear why TNBC is so common in the African-American community.

10%–15% of people with breast cancer have TNBC

Non-Hispanic Black women are about 2 times more likely than non-Hispanic white women to have TNBC

What are the stages of breast cancer?

There are 4 stages of invasive breast cancer. The word “stage” describes the size of the tumor in your breast and if it has spread to your lymph nodes and other parts of your body. Lymph nodes are tiny organs throughout your body that help fight infection and disease as part of your immune system. The group of lymph nodes in your neck, underarms, and chest are common places where breast cancer may spread.

Your health care team may recommend different treatments depending on the stage of your cancer.

Stage 1

- The earliest stage of invasive breast cancer, meaning the cancer has grown or spread into nearby or surrounding breast tissue
- The tumor is 2 cm or smaller (about the size of a peanut)
- Cancer either has not spread to lymph nodes or may show microscopic spread to lymph nodes

Stage 2

- The tumor may have started to grow up to 5 cm (about the size of a lime) and sometimes larger
- Cancer may or may not start to appear in the lymph nodes

Stage 3

- Cancer has usually spread to lymph nodes

Stage 4

- This stage means the cancer has spread beyond the breast and nearby lymph nodes to other parts of the body
- Also referred to as “metastatic” cancer
Uncovering TNBC

Every treatment comes with possible benefits and possible risks. To help you remember some questions to ask, use your TNBC discussion guide—found on UncoverTNBC.com—and try to take a friend or family member to your doctor visit.

Surgery

When you have breast cancer, you will most likely have surgery to remove the tumor. You and your care team should work together to decide which surgery is right for you based on: your preferences, your overall health and the type and stage of cancer you have.

**Types of breast cancer surgery include:**

- **Lumpectomy** | A surgery to remove the tumor and some nearby tissue while leaving the healthy parts of the breast. A lumpectomy may be an option if the cancer has not spread. Most women may also need radiation therapy after getting a lumpectomy.

- **Mastectomy** | A surgery to remove one or both of your breasts, which may include removing some lymph nodes, some lining over the chest muscle and part of the chest muscle. A mastectomy may be an option if the cancer is too large or spread out to have a lumpectomy or if you had a lumpectomy that did not remove all of the cancer.

- **Sentinel Lymph Node Biopsy (SLNB) or Axillary Lymph Node Dissection (ALND)** | A surgeon removes a small sample of nearby lymph nodes usually during a lumpectomy or mastectomy. The lymph nodes will be tested for cancer because lymph nodes are usually the first place where breast cancer spreads beyond the breast.

- **Breast Reconstruction** | A surgery to restore the breast’s shape after the cancer has been removed. In a cancer surgery, one or both of your breasts may have changed in shape or size, or may have been completely removed. You can decide to have reconstructive surgery to rebuild your breast at the time of cancer surgery or at a later time.

If maintaining your breast shape and size is important to you, talk to your surgeon about reconstruction options before you have cancer surgery. It can be part of your treatment plan.

Treatment after surgery

You might hear your care team talk about postoperative or adjuvant (a-juh-vnt) treatment, which happens after cancer surgery. This type of treatment may include radiation therapy in the area of the cancer or different forms of systemic (whole-body) treatment.

Other treatment options

Your treatment options for breast cancer may include radiation or systemic (whole body) therapies.

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**What are some treatment options for TNBC?**

**Treatment before surgery**

You might hear your care team talk about *preoperative or neoadjuvant (nee-ow-a-juh-vnt) treatment*, which means treatment before surgery. This type of treatment may be started soon after you are diagnosed with breast cancer, depending on the stage at the time of diagnosis. Talk to your doctor right away to understand this choice and the various options you may have.

**Treatment after surgery**

You might hear your care team talk about *postoperative or adjuvant (a-juh-vnt) treatment*, which happens after cancer surgery. This type of treatment may include radiation therapy in the area of the cancer or different forms of systemic (whole-body) treatment.

**Other treatment options**

Your treatment options for breast cancer may include radiation or systemic (whole body) therapies.