

Newsletter

Edition 45 | Summer - Autumn 2021

Toni's 'selfish' reason for raising funds

When Toni Rissman decided to take on our 3 Course Challenge, she admits it was for 'selfish' reasons. Diagnosed in March last year with triple negative breast cancer caused by a hereditary gene mutation, she knows that our clinical trials are a vital step in keeping her and her daughter safe.

Sadly, the fear of breast cancer has been hanging over Toni's family for some time and has devastated them before. Toni's husband Jacob lost his beautiful mother Janine to the disease ten years ago. It was just two days before the anniversary of Janine's death that Toni herself was diagnosed.

"It breaks my heart that my children have to grow up without their grandmother and I couldn't bear for them to lose their mum too," says Toni.

Toni is no stranger to a 'challenge' and her last year was tough, to say the least. From March until September, she travelled a five hour round trip every Monday to receive chemotherapy treatment, kissing goodbye to her beautiful children, pictured below.

Fortunately, Toni had some 'angels' in the community



Toni hopes that with research, breast cancer and the debilitating treatments that come with it, will be a thing of the past.

helping her get through the tough times. Whilst receiving treatment, two generous ladies – acquaintances of Toni's at the time – delivered meals for her family. One of them was Toni's neighbour and the other travelled from her home some 27 kms away. They soon became firm friends.

When Toni learned about the 3 Course Challenge, she saw it as the perfect opportunity to 'selfishly' raise money for research that could benefit her and change the future for her daughter too.

And because the 'challenge' was to cook a three course French meal for dinner party guests, it meant Toni could cook her French feast for the special 'angels' who fed her when she needed it most.

In the lead-up to her special dinner party, Toni reached out to the ever-generous Goondiwindi community to donate to her fundraising page. Toni was blown away by the support she received and raised close to \$6,000.

Toni's dinner party was a beautiful celebration of life and community and she held it in September, to mark the end of her chemotherapy treatment.

We're so grateful to Toni and all the other amazing 3 Course Challengers who raised over \$138,000 to support our life-saving research.

Everyone had such a great time, that we're going to do it all again! If you're looking for a special way to combine good food, good company and a special cause, please register your interest for the next 3 Course Challenge here: www.3coursechallenge.com.au.

Chairmans Update

I know that like me, you will be hoping to start 2021 on a more positive note than last year when our communities were under threat from fire and flood, and the COVID-19 pandemic took hold.

Which is why I'm delighted to advise that thanks to your generous commitment we have four new clinical trials planned for this year.

Two are international clinical trials, which will see several countries work together to find answers to important questions in the treatment of early stage and metastatic breast cancer. This international collaboration is critical to bring benefits to patients at the earliest opportunity and ensures women and men in Australia and New Zealand can access cutting edge therapies.

The other two trials have been developed by our researchers and will be conducted in Australia and New Zealand. One is building on our knowledge of

immunotherapy and its potential to improve outcomes for breast cancer patients, and the other is looking to improving quality of life, specifically the fatigue and lethargy associated with anaemia induced by chemotherapy treatment.

Clinical trials research is the critical path to determining if new treatments are effective and safe before they are made widely available. People participating in a clinical trial may benefit, and what we learn from the trial will influence how breast cancer is treated and prevented for people in the future.

The rigorous collection of data within clinical trials also ensures that we can continue to learn from them and influence positive change in the treatment and management of breast cancer well into the future. In the Research Update, we report on new research undertaken and published during 2020 which uses data and samples collected within clinical trials conducted many years ago.



Our heartfelt sympathies go to the Lewis family on the death of Tracey. She was a valued contributor to our research program as a member of our Consumer Advisory Panel and will be greatly missed.

Thank you sincerely for your unwavering commitment to our breast cancer research program and for your understanding that, despite advances made, more solutions are urgently needed. It is for Tracey, and all those we miss and who are never forgotten, that we must keep up the momentum.

**Bruce Mann,
Chair Board, Breast Cancer Trials**

IN MEMORIAM

We gratefully acknowledge gifts received in memory of:

Mrs Faye Adams
Mrs Val Antonio
Mrs Margaret Armitage
Mrs Lisa Bailey
Mrs Gillian Barton
Mrs Deb Bennington
Mrs Beverley Beshara
Mrs Mary Bevan
Mrs Jane Briggs
Mrs Elizabeth Emanuel
Ms Janette Britnell
Mrs Bronwyn Brooks
Mrs Shirley Buckle
Mrs Marie Burke
Mrs Yvette Butland
Mrs Carmen Rose Caruana
Mrs Julie Chai
Mrs Girlie Chen
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Mrs Karen Cofield
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Mrs Marie Vellupillay
Ms Susan Mary Vivian
Dr Avery Walker
Mrs Patricia Walsh
Mrs Mary-Anne Warner
Dr Hannah Wing-Han Yiu
Mrs Ourania Zakris

BEQUESTS

We gratefully acknowledge the following people who left a bequest in their will:

Mrs Mavis Brest
Mrs Betty Caddey
Ms Patricia Clark

Miss Kathleen Cotes
Estate of the Late
James O Fairfax AC

Mr Leslie R Graydon
Dr Geraldine Hill
Mrs Marion D Knapp

Mr Ernest R Richards
Mr Allan Rowling
Ms Anneke Van Kammen

Miss Sheila W Woodcock

The gift of giving

At Christmas we shared Tracey's story, a very strong and inspiring woman who had metastatic breast cancer. Sadly, as Christmas approached, Tracey passed away leaving her young family devastated.

Tracey was only 47 and her greatest love was her family. She fought so hard to stay with them for as long as she could. Our thoughts and prayers are with her family. She will be greatly missed.

Thank you to those who gave so generously at Christmas time. Your gifts fund vital research to save lives from breast cancer, and to spare families from heartbreak and loss.

Before her death, Tracey told us how moved she was by the kindness of people in our community who did not know her but who reached out to help and send her messages of support. Here are just a few of these messages.



Dear Tracey...

Thank you for sharing your story with the BCT community. You inspired me to donate. My daughter is in exactly the same position as you – 46 years, married 19 years, three children and metastatic breast cancer. I support breast cancer research as it's the best hope we have to improve the future for our children and grandchildren. – **Mardi**

Keep looking for those wonderful pineapples wherever you go. Have one every day. – **Mara**

Keep strong. People like me care and want you to get well and enjoy life with your family and friends, especially at Christmas. – **Heather**

Like you, I inherited my breast cancer but after my second mastectomy, 17 years ago, I've been well. Breast cancer clinical trials saved my life. Sending love, strength, peace and courage. – **Pam**

You are one very brave wife and mum. Please keep up your fight. Everyone sends you extra strength to cope. – **Sue**



The Christmas Appeal raised over \$280,000 to fund new and current clinical trials research which aims to save and improve the lives of every person affected by breast cancer.

Brenda pictured below was eligible to participate in our PATINA clinical trial which aims to identify if adding a new treatment to standard treatment for women and men with hormone receptor positive, HER2 positive metastatic breast cancer can prolong their lives.

Not long after joining the trial she gradually regained her strength and energy and was able to get back to the things she enjoyed.

"It's given me a future and I'm hoping that they find it's going to help a lot of other people too. The results of these trials can give such hope and a life back to people who maybe didn't have a future."

Brenda and her husband Terry are looking forward to celebrating their 50th wedding anniversary this April, a milestone she wasn't sure she would reach.

Research update

Long term results confirm preventative effects

The IBIS II (prevention and DCIS) international clinical trial was conducted by Breast Cancer Trials from 2005-2012. Worldwide, 2,980 women were recruited, including 178 women from Australia and New Zealand.

Women diagnosed with DCIS are at higher risk than the average woman of being diagnosed with breast cancer in the future. DCIS is a pre-cancerous change where abnormal cells are present in milk ducts but have not yet spread to the surrounding breast tissue or elsewhere in the body. Whilst DCIS is not cancer, it may turn into cancer if left long enough, so the mainstay of treatment is surgery to remove it. Some patients may also receive radiotherapy and hormone blocking treatment.

The IBIS-II DCIS component of the trial recruited postmenopausal women who had been diagnosed with DCIS which had been surgically removed. It aimed to find out if Tamoxifen or Anastrozole was better at preventing breast cancer or future DCIS developing in these women. These two hormone-blocking medications are effective in preventing breast cancer from returning in people at high risk of breast cancer or who have been treated for breast cancer, but their role in prevention after a diagnosis of DCIS has been less clear. Tamoxifen is now available on the Pharmaceutical Benefits Scheme (PBS) as a preventative medication, but Anastrozole is not.

Twelve-year follow-up of trial participants showed that both drugs are similarly effective in preventing future DCIS or breast cancer. Interestingly, Anastrozole was more effective whilst taking the medication for five years, but after stopping at five years, there was no longer a difference compared with Tamoxifen. After 12 years, 9.7% of patients on Tamoxifen and 8.5% of patients on Anastrozole were diagnosed with DCIS or breast cancer. There was no difference in survival between the two drugs.

"This trial shows that both drugs are safe to take for prevention, with notable differences in the side effects. With Tamoxifen, fewer fractures and strokes were seen. With Anastrozole, there was a lower rate of endometrial and ovarian cancer. This knowledge can assist with guiding patients towards which drug is more suitable for their personal circumstances. It's hoped that Anastrozole will be listed on the PBS for prevention purposes, given the favourable safety and effectiveness profile," says Breast Cancer Trials' Medical Advisor and BCT Study Chair of IBIS-II Dr Nicholas Zdenkowski.



Dr Nicholas Zdenkowski
BCT Researcher and Medical Oncologist

Legacy of DNA key to improving treatments

Researchers are improving and refining breast cancer treatments by delving into the DNA of patients who have previously volunteered for breast cancer clinical trials.

"We already have the ability to distinguish between different levels of 'severity' of breast cancer, but we need to develop this further," says Dr Nicholas Zdenkowski, Breast Cancer Trials' Medical Advisor.

While breast cancer treatments can already be targeted and personalised, Dr Zdenkowski says new and highly accurate tools could help determine which triple negative breast cancer patients can be cured with surgery alone.

"The standard approach is to offer women with the triple negative subtype of early-stage breast cancer a fairly intensive treatment with chemotherapy, because there are no sufficiently accurate tests to determine which patients definitely don't need any further treatment beyond surgery," he says.

"Many patients worry that triple negative breast cancer has a worse prognosis than other breast cancer types, however, this is not always the case."

Breast Cancer Trials provided data which was collected from international clinical trials IBCSG VIII and IX towards the development of molecular tools to predict the recurrence of breast cancer after chemotherapy treatment. These clinical trials were conducted from 1988 – 1999 and enrolled 228 and 330 patients respectively from Australia and New Zealand.

The lab-based analysis looked at specific DNA methylation markers, or profiles, in the genes of breast cancers that had been surgically removed from patients. The study was centred around blood and tumour specimens held from patients who participated in breast cancer clinical trials between 1985 and 2009.

The methylation markers helped categorise the early-stage triple negative patients into three groups: those who were cured with surgery to remove the cancer and so didn't need further treatment; those who needed chemotherapy to prevent the cancer from returning after treatment; and those for whom chemotherapy was not effective, where the cancer came back elsewhere in their body despite that treatment.

However, Dr Zdenkowski says this test method needs further research before it can be considered for routine use in the clinic.

"As with any new test or treatment, the method requires rigorous evaluation to ensure it does what it promises to," he says.

This analysis illustrates the value of continuing to study and learn from the clinical trial data collected from patients who volunteer to participate in our clinical trials, some many years ago as in this case.

"Ultimately, from this research, we hope to be able to reassure some patients that they can be cured with surgery alone," Dr Zdenkowski says.

"We can also reassure others they will be cured with chemotherapy. And those whose cancer will return even with surgery and chemotherapy, is the group in need of better treatments that we hope to find through ongoing research so we can give them the best chance of being cured of cancer."

Weighing up chemotherapy risks and benefits according to body mass index

The role of obesity as a risk factor is a common theme in breast cancer research.

"In Western society there are more and more women who are overweight and being overweight increases your risk of getting breast cancer after menopause," says Associate Professor Prue Francis, Chair of our Scientific Advisory Committee.



Associate Professor Prue Francis
Chair of our Scientific Advisory Committee

Some lipophilic, or fat-soluble, drugs are known to act differently in someone who has a high versus a low body mass index (BMI). What hasn't been studied systematically is the relationship between the efficacy of anticancer drugs and BMI.

To learn more, researchers reanalysed data from the BIG 2-98 international clinical trial which Breast Cancer Trials conducted from 1999-2001 enrolling about 600 women, some of whom were randomised to receive the lipophilic chemotherapy drug docetaxel as part of treatment.

They found that among the women who received docetaxel, those in the overweight or obese BMI categories had a lower chance of remaining disease-free or surviving compared to women with a lean BMI, despite receiving the same treatment.

Docetaxel and other drugs of the same family (taxanes) can cause nerve damage, and occasionally permanent hair loss. The risk of experiencing such side effects must be balanced with the benefit an individual patient might receive.

Associate Professor Francis says that chemotherapy for obese patients should not change based on these results, but more research is needed. If the results of this study are confirmed in other studies, this could lead to a rethinking of treatment risks and benefits for these patients.

"If the taxane drugs were thought not to be working or distributed properly in the body of obese patients, we could consider whether a modification of the dose would be appropriate or whether you could give a different drug, or stop it earlier, if nerve damage symptoms are developing," she explains.

The perfect diary for every woman

Thank you to everyone who purchased the 2021 edition of our Australian Women's Health Diary. We welcomed Interflora Australia as a new sponsor of this edition.

For over 65 years Interflora has been trusted to play a unique part in our lives, delivering not just flowers, but a feeling, a moment and an emotion. And their support for our diary and the research it

supports, truly shows they care about the community.

The diary is still available! If you donate \$40 or more, the diary is just \$5.50 plus free postage, or buy the diary only for just \$11 and receive free postage.

Visit www.breastcancertrials.org.au or call **1800 423 444** to secure your copy today!



Make a profound difference to lives in the future with a gift in your Will

Norm tells us why he decided to leave a gift in his Will to Breast Cancer Trials. When you leave a gift, you'll be supporting research to identify the treatments needed to save every life from breast cancer.

"I first began donating to Breast Cancer Trials in 1999 when my sister, Diana, was diagnosed with breast cancer. She was just 37 years of age at the time, and I'm delighted to say she turned 73 last October.

Diana found a lump in her left breast while in the shower. She was diagnosed with a large cancerous fixed mass in the axilla (armpit). Her initial reaction was shock but as her confidence grew with the Professor who managed her treatment, her hopes for a positive outcome grew also. Diana who is married and has three children, attributes the love and support from her family and friends as part of her healing process.

Since Diana's treatment she has led a breast cancer awareness group and is now helping to educate people who have been touched by breast cancer.

Both Diana and I cannot stress enough the importance of having mammograms, self-examination and not to be afraid to seek help immediately. Together with early detection and advanced treatment options becoming available today and in the future, women and families won't have to go through the anxiety we, as a family have had to go through.

In May 2014 I decided to leave a gift in my Will to Breast Cancer Trials.

I know that the gift in my Will can help all women diagnosed with breast cancer, not just my sister, but my niece Susan who also had breast cancer. She is a nurse and lives in New Zealand with her husband and two sons. And my sister-in-law Kim, who had breast cancer a few years ago too.

To this day they both remain well." – Norm

If you would like to talk to us about leaving a gift in your Will, please tick the box on your donation form or contact Cheryl our Special Gifts Officer for a confidential discussion on 1800 423 444.

To leave a gift in your Will, the following wording should be used:

"I (your name) give to Breast Cancer Trials:

- the residue of my estate, or
- _____% of my estate, or
- the lump sum of \$_____, or
- my property known as _____ [e.g., real estate, art works, shares, units or other securities in listed companies].

to be applied for general purposes by Breast Cancer Trials as determined by its directors. I declare that the receipt of an authorised officer of Breast Cancer Trials will be a sufficient discharge to my executors who will not be bound to see the application of this gift. We understand the careful consideration your client required in making this important decision and it is greatly appreciated."

Supporters in Action

Barton kids run for mum

That's a 10 out of 10 for cuteness! We first met the Barton kids in 2015 when they helped host a highly successful fundraising event for their mum.

Samson, Scarlett and Sophia's mum Michelle was only 35 when she was diagnosed with triple negative breast cancer.

It's now been five years and the Barton kids are still fundraising for us! This year, they took on the Virtual City2Surf. These little troopers walked an impressive 18 kilometres and raised close to \$5,000.

If you're looking for a fitness challenge like the Barton kids, contact us today at functions@bctrials.org.au or by phone on **1800 423 444**.



Scarlett, Sophia and Samson proudly holding certificates thanking them for their fundraising efforts.



The commentators looked the part in pink for the Pink Fundracer Round of the Repco Supercars Pro Eseries.

Pink Fundracer

In October last year, we teamed up with the Repco Supercars Pro Eseries to launch the 'Pink Fundracer Challenge', a first-of-its-kind fundraising event.

'Simulation' drivers in the 2020 Pro Eseries not only raced each other on the virtual track in Round 1, but also to the top of the Pink Fundracer leaderboard with each driver committed to raising funds for Breast Cancer Trials.

It was Emily Jones, the only female driver in the field, who sped her way to the top of the leaderboard raising \$4,300. It's a cause close to Emily's heart as she lost her mother and aunt to breast cancer, and many other drivers also had family members impacted by breast cancer. The Pink Fundracer Challenge was a meaningful way for them to give back whilst doing something they love.

Thank you to Supercars, the drivers and all those who donated and helped raise close to \$20,000 through the inaugural Pink Fundracer Challenge.

Tee Off because we need you!

Many golf clubs across Australia unfortunately were unable to hold their annual Tee Off event last year. But for those who could, COVID-19 didn't stop them from having fun!

Like the ladies of Nowra Golf Club, showing that it is possible to have COVIDSAFE Tee Off Event that's still full of laughs. There was an array of pink costumes on the green – pink butterflies, pink Flinstones characters and more!

Thank you to Nowra Golf Club's members and friends for raising over \$1,000 to support our research program.

Tee Off is one of our most significant annual fundraising initiatives and represents integral funding that we rely on each year for our research program. We're hoping that 2021 will see our wonderful golfers back on the greens and holding their annual Tee Off events. You can find out more at www.breastcancertrials.org.au.



The Crazy Covid Kids at Nowra Golf Club kept things 'COVIDSAFE' at their recent Tee Off event.

Your monthly gift can make more research possible

By giving a regular, monthly donation you can make a significant difference to the lives of many.

Monthly gifts provide a critical base of accessible, immediate funding which allows our researchers to pursue new research opportunities at the earliest opportunity, without waiting for funding to become available. This generous commitment can help us to respond quickly to emerging new research and results, ensuring that together we're working on the next breakthrough which could save and improve the lives of all those affected by breast cancer.

Tanya joined our regular giving community in 2018 after completing her treatment for triple negative



Tanya and her family pictured at her last chemotherapy treatment.

breast cancer saying, ***"I feel the main way I can make a difference is to donate to research."***

At only 41 years of age, Tanya discovered a lump in her breast. After a series of appointments, a mammogram and a biopsy her doctor confirmed her terrible fear – she had 'triple negative' breast cancer.

This subtype of breast cancer meant that Tanya's tumour didn't have the three key receptors needed for commonly used treatments to work and that it was more likely to spread beyond the affected breast. Unfortunately, triple negative breast cancer remains the breast cancer subtype with the poorest long-term prognosis.

Tanya has three gorgeous children and I'm sure you can imagine how hard it was for her to tell her little ones about her diagnosis. Tanya said, ***"My seven year old daughter just looked up at me and burst into tears and said, 'I don't want you to die mummy'."***



Tanya underwent a six-month program of aggressive chemotherapy followed by radiotherapy. Fortunately, after these treatments, she has no signs of breast cancer. Tanya is relieved to be cancer free but is fearful that her breast cancer will return, and she will not live to see her children grow up. She says, ***"Research is my only candle in the darkness. It is the only way we can find better ways to treat triple negative breast cancer and prevent recurrence."***

You can help stop the fear of breast cancer returning after treatment for Tanya and many others like her with your regular, monthly gift.

To join our regular giving program simply donate online at www.breastcancertrials.org.au/donate, selecting the "Monthly Gift" option, or call our friendly Supporter Care Team on **1800 423 444** – we would love to hear from you!

Mammograms raise money

Thank you to I-MED Radiology Network who donated \$4 for every breast mammogram performed in October 2020 – all 8,500 of them – raising \$34,000 for our breast cancer trials research program.

When asked why they chose to support Breast Cancer Trials, Dr Ron Shnier, Chief Medical Officer at I-MED Radiology said "Clinical trials are an important part of our health system and are necessary to find out if new treatments are more effective than those currently accepted as the best available standard of care. At I-MED Radiology, we have a commitment to innovation, and we are always looking for improved ways of doing things. That's why a research group like Breast Cancer Trials deserves our support – they are also looking to find better treatments and strategies."

We are truly grateful for their support and the vital service they provide to the community.

Thank you!

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