The National Breast Cancer Coalition (NBCC) is a grassroots organization dedicated to ending breast cancer through action and advocacy. NBCC members are committed to reaching this goal by 2020. Following are a few statistics that speak to the need to end this deadly disease:

- The National Cancer Institute estimates that a woman in the United States has a 1 in 8 chance of developing invasive breast cancer during her lifetime. This risk was about 1 in 11 in 1975. (Siegel, 2013)

- On January 1, 2010, in the United States there were approximately 2,829,041 women alive who had a history of breast cancer. (SEER, 2013)

- Breast cancer is the second leading cause of cancer death for women in the United States, after lung cancer. Approximately 40,000 women and 430 men in the U.S. will die from the disease in 2014. (ACS, 2014)

- Excluding skin cancer, breast cancer is the most commonly diagnosed cancer among women in the United States. It is estimated that 232,670 new cases of invasive breast cancer will be diagnosed among women in the U.S. in 2014. In addition to invasive cancers, 62,570 new cases of in situ breast cancer will be diagnosed; approximately 51,933 of which will be ductal carcinoma in situ (DCIS). Approximately 2,360 new cases of invasive breast cancer will be diagnosed among U.S. men. (ACS, 2014)

- The incidence of breast cancer declined from 1999 to 2005, with the greatest decline among white women. Incidence rates have remained relatively stable since 2005. (SEER, 2012) However, incidence of in situ breast cancer increased 2.8% from 2005 to 2008.

- According to the SEER data from 2002 to 2008, approximately 90.3% of women diagnosed with invasive breast cancer were still living five years after getting the disease; among black women, approximately 79.1% were still living five years after getting the disease. (SEER, 2012)

- Older women are much more likely to get breast cancer than younger women. From 2006 to 2010, the median age for a breast cancer diagnosis was 61 years of age. Approximately 0.0% were diagnosed under age 20; 1.8% between 20 and 34; 9.6% between 35 and 44; 22.2% between 45 and 54; 25.2% between 55 and 64; 20.7% between 65 and 74; 14.8% between 75 and 84; and 5.7% 85+ years of age. (SEER, 2013)

- Combining all age groups, white (non-Hispanic) women are more likely to develop breast cancer than black women. However, black women are more likely to die of breast cancer than white women. (ACS, 2012-2013)

- Between 1990 and 2010, the cancer mortality rate for women of all races combined declined by 1.9% annually. (ACS, 2013-2014)

- Mortality from breast cancer has declined faster for women under the age of 50 (by 3.1% annually from 1990 to 2010), regardless of race/ethnicity. (ACS, 2014)

- The current methods of treatment in use in the United States are surgery (mastectomy and lumpectomy), radiation, chemotherapy, hormonal therapy and targeted therapy. (ACS, 2013)

- Mammography screening does not prevent or cure breast cancer. It may detect the disease before symptoms occur. It has not led to a significant decline in the incidence of late stage disease. It may also lead to over diagnosis and over treatment. (Bleyer and Welch, 2012) (Nelson et al, 2009)
• Mammography screening has led to a dramatic increase in the incidence of ductal carcinoma in situ (DCIS). The diagnosis was relatively rare before the early 1980s and the widespread use of mammography. Today, approximately one woman is diagnosed with DCIS for every four women diagnosed with invasive breast cancer. (Allegra et al, 2010)

• All women are at risk for breast cancer. Only 5-10% of those with breast cancer have inherited a mutation in the known breast cancer genes (BRCA1 and BRCA2) and 90-95% of breast cancer cases do not involve these inherited mutations. (ACS 2013-2014; NCI 2006)

• Factors that increase a woman’s risk of breast cancer include older age, genetic factors, family history of breast or ovarian cancer, long menstrual history, nulliparity (having no children), older than 30 years of age at first full-term pregnancy, alcohol consumption, use of combined postmenopausal hormone replacement therapy (HRT), postmenopausal obesity, breast density, and ionizing radiation. Factors that decrease a woman’s risk of breast cancer include breast-feeding and physical activity (exercise). (ACS, 2013)

• There is some new data to suggest that these risk factors have less influence among Hispanic women. According to results of the 4-Corners Breast Cancer Study, Hispanic women with breast cancer were more likely than white women with breast cancer to have characteristics associated with a lower risk of breast cancer, such as younger age at first birth, having more children, less hormone use, and less alcohol consumption. (Hines et al, 2010)

• Studies on chemo preventive agents tamoxifen and raloxifene were not adequately designed to determine their impact on the prevention of breast cancer for healthy women, nor are the studies long enough to assess long term side effects and impact on mortality. (Vogel et al, 2010)

References


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