

Death Rate For Male Breast Cancer Higher Than Testicular and Prostate Cancers Combined

-One Man's Story Exposes Barriers To Breast Cancer Diagnosis-

(NAPSA)—Forty-nine-year-old Marshall Anderson is on a mission. The west Texas cowboy, husband and father of three is daring other men to pay attention to their breasts. As a breast cancer survivor, he knows firsthand how important it is for men to be aware of their risk for what is commonly considered a woman's disease.

Anderson's story began two years ago when—while working as a medical technologist at the Texas Cancer Center in Abilene, Texas—he mistook an annoying red bump on his chest for a bug bite and then an infection. After topical creams and antibiotics did not resolve his symptoms, a visit to his primary care physician for a biopsy revealed the unfathomable—the bump was, in fact, inflammatory breast cancer.

"You might think that, working at a cancer center, I would have recognized my own symptoms right away, but as a man I never considered the possibility," said Anderson. "I was shocked and outraged when my doctor told me I had breast cancer."

Although breast cancer is less common in men than in women, it is currently more deadly: Twenty-seven percent of men with breast cancer will die from the disease in 2006, compared to 19 percent of women. Breast cancer also has a higher death rate than more common male cancers such as prostate cancer (9 percent) and testicular cancer (4 percent). Lack of awareness, embarrassment and social stigma contribute to later diagnosis of male breast cancer, and cancer found at a later stage may be less likely to be effectively treated.

Inspired by Anderson's story of survival, Men's Health Network, the leading online men's health authority, has joined with him to launch an educational campaign urging men to be aware of their



risk for breast cancer. *Dare to Be Aware: Men and Breast Cancer* helps break through the often fatal barriers that can prevent men from getting early diagnosis and treatment.

"Most men don't think they have even the remotest risk of breast cancer, so they may easily mistake suspicious symptoms for other problems, or ignore them entirely until it's too late," said Jean Bonhomme, M.D., M.P.H., Board of Directors, Men's Health Network. "We're urging men to acknowledge their risk for the disease and take action when they see the signs—it could save their lives."

An estimated 1,720 men will be diagnosed with breast cancer this year, according to the American Cancer Society. While the death rate for breast cancer is higher in men than in women, ironically, the disease may be more detectable in men due to a smaller amount of breast tissue. Symptoms are often visible and include a painless lump; redness, swelling or dimpling in the breast area; nipple discharge or changes in its shape or appearance; and swollen lymph nodes or glands near the underarm.

The good news is, as with female breast cancer, if screening reveals the presence of cancer, there are treatment options available. "We are living in the golden

age of biomedical research, and now have treatments for breast cancer that are more effective, easily administered and better tolerated. There's oral chemotherapy, like *Xeloda*®, and newer targeted treatments. Some of these treatments can help patients stay at home and spend more time with their family," said Anton Melnyk, M.D., Texas Cancer Center, U.S. Oncology, who is Anderson's colleague and oncologist.

Immediately following his diagnosis, Anderson began an aggressive treatment regimen with Dr. Melnyk; today, he is cancer-free and back at work as a medical technologist. His experience with breast cancer has forever changed his outlook on life. Always passionate about family, his ranch and jazz music, Anderson now has another passion—advocating for breast cancer awareness for both women and men. *Dare to Be Aware* has given him a voice.

"Men have to understand that breast cancer can happen to them—I'm living proof," said Anderson. "I want other men to learn from my experience and understand that there's no shame in having this disease; breast cancer can be both treatable and beatable."

The *Dare to Be Aware: Men and Breast Cancer* campaign features an online portal to educate men about breast cancer screening, early diagnosis and treatment options. The Web site, www.menshealthnetwork.org, houses resources tailored especially for men, including downloadable instructions for a breast self-exam, a fact sheet on male breast cancer, and a testimonial from Anderson about his personal story of surviving breast cancer. For more information on oral chemotherapy treatment, please visit Oralchemoadvisor.com.

Dare to Be Aware is made possible by Roche.

Note to Editors: *Xeloda* is the only FDA-approved oral chemotherapy for both metastatic breast cancer and adjuvant and metastatic colorectal cancer. Inactive in pill form, *Xeloda* is enzymatically activated within the body; when it comes into contact with a naturally occurring protein called thymidine phosphorylase, or TP, *Xeloda* is transformed into 5-FU, a cytotoxic (cell-killing) drug. Because many cancers have higher levels of TP than does normal tissue, more 5-FU is delivered to the tumor than to other tissue.

A clinically important drug interaction between *Xeloda* and warfarin has been demonstrated; altered coagulation parameters and/or bleeding and death have been reported. Clinically significant increases in prothrombin time (PT) and INR have been observed within days to months after starting *Xeloda*, and infrequently within one month of stopping *Xeloda*. For patients receiving both drugs concomitantly, frequent monitoring of INR or PT is recommended. Age greater than 60 and a diagnosis of cancer independently predispose patients to an increased risk of coagulopathy.

Xeloda is contraindicated in patients who have a known hypersensitivity to 5-fluorouracil, and in patients with known dihydropyrimidine dehydrogenase (DPD) deficiency. *Xeloda* is contraindicated in patients with severe renal impairment. For patients with moderate renal impairment, dose reduction is required.

The most common adverse events (> 20 percent) of *Xeloda* monotherapy were diarrhea, nausea, stomatitis and hand-foot syndrome. As with any cancer therapy, there is a risk of side effects, and these are usually manageable and reversible with dose modification or interruption.