

Triple Negative Breast Cancer

What is triple negative breast cancer?

Triple negative breast cancer is a subtype of breast cancer. Although breast cancer is often referred to as a single disease, there are many types of breast cancer tumors. In fact, breast cancer can be described as a family of diseases. All breast cancers start in the breast. So, they are alike in some ways, but also can be quite different from each other.

There are many ways to describe breast cancers, such as:

- where in the breast they start (ducts or lobules).
- how advanced they are (non-invasive, invasive, metastatic).
- how they look in the lab according to the pathologist (i.e. inflammatory, mucinous).
- the presence or absence of three biomarkers.

These biomarkers are proteins that control cell functions, such as cell growth or death. They are estrogen receptors (ER), progesterone receptors (PR) and HER2/neu. Triple negative breast cancers do not have these biomarkers. It is referred to as estrogen receptor-negative (ER-), progesterone receptor-negative (PR-) and HER2/neu-negative.

The type of breast cancer a person has often affects prognosis (chance of recovery) and treatment options.



Who gets triple negative breast cancer?

About 13-25 percent of all breast cancers in the U.S. are triple negative. Anyone can get triple negative breast cancer. But, research has shown that it occurs more often in:

- Younger women
- African American women
- Hispanic/Latina women
- Women who have BRCA1 mutations

What makes triple negative cancer unique?

Triple negative breast cancer is often an aggressive tumor. Compared to other breast cancers, it tends to grow faster and it is less likely to be seen on an annual mammogram. And, it is more likely to spread to other parts of the body early. Also, it seems to recur (come back) more often than other subtypes of breast cancer. It usually has a poorer prognosis than those breast cancers that are hormone receptor-positive. Part of the reason for this is the lack of specific, targeted treatment for this type of breast cancer.

Treatment options

Treatment options for triple negative breast cancer are limited. Because these tumors lack hormone receptors, hormone therapy (i.e. tamoxifen, aromatase inhibitors) cannot be used. Also, since the tumor is HER2/neu-negative, the targeted therapies Herceptin or Tykerb are not used. And, other targeted therapies do not yet exist for this type of breast cancer.

Despite not having a targeted therapy, many women with triple negative breast cancer can be successfully treated if it is caught early. Chemotherapy is an effective treatment. Research shows that triple negative breast cancer may even respond better to chemotherapy than other types of breast cancer. Surgery and radiation therapy are also usually used.

Research

Now, clinical trials are looking at new treatments. One new class of drugs, called PARP inhibitors, appears to be very promising. In women with metastatic triple negative breast cancer, early results show that PARP inhibitors used with chemotherapy may prolong survival. These early results give us hope that a new treatment may soon be available. Research is ongoing, as more studies are needed to confirm the results.

Resources

Living Beyond Breast Cancer
1-888-753-5222, www.lbbc.org

National Cancer Institute
1-800-4-CANCER, www.cancer.gov/clinicaltrials

Triple Negative Breast Cancer Foundation
1-877-880-TNBC(8622), www.tnbcfoundation.org



Related fact sheets in this series:

- Clinical Trials
- Current Research on Drugs and Treatments
- Genetics and Breast Cancer
- How Hormones Affect Breast Cancer
- Prognostic Factors
- Racial and Ethnic Differences
- Young Women and Breast Cancer

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