

50 IN 10:

Susan G. Komen's Bold Goal for
Shaping History and Saving Lives



OUR NEW STAKE IN THE GROUND

Dear Komen Friends and Supporters:

On the eve of Susan G. Komen's 35th anniversary, we are more impatient than ever to end breast cancer. Despite tremendous progress against this disease, more than 40,000 women and men still die of breast cancer every year in the United States.

We can do better.

We can reduce the current number of breast cancer deaths by 50 percent in the U.S.

We can do it within one decade.

And we will do so, by drawing on our unparalleled leadership in research and advocacy, and by working to ensure that every person has access to, and receives, timely high-quality breast cancer care.

This is Susan G. Komen's new direction.

This is our **Bold Goal.**

Our Bold Goal builds on the tenets for progress that I outlined in *A Promise Renewed* in 2014, shortly after I joined Komen as president and CEO. I said then that we would move with more determination than ever to find cures for aggressive and metastatic breast cancers, and to improve outcomes for low-income and uninsured women, women of color, and other underserved populations that face barriers to breast cancer care.

With our Bold Goal, we are bringing a heightened focus to our strategic objectives, so that we will more quickly achieve our vision of a world without breast cancer.



Judith A. Salerno, M.D., M.S.

President and CEO, Susan G. Komen



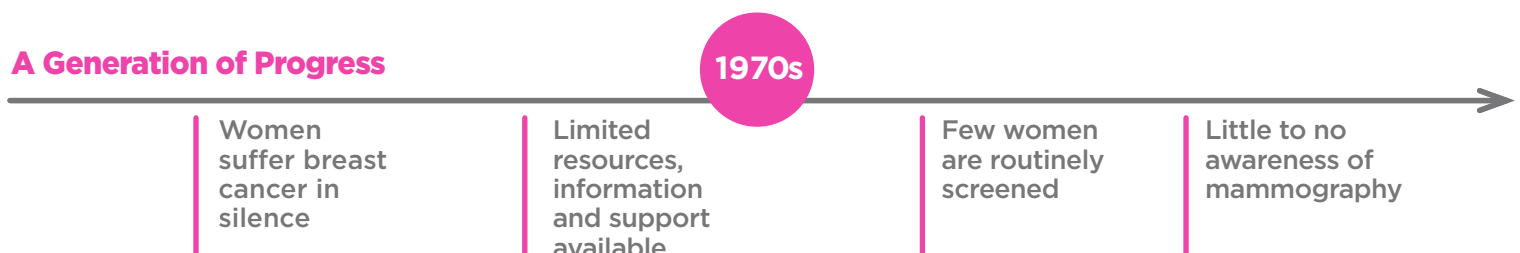
BUILDING A MOVEMENT OUT OF SILENCE...

There is much to be grateful for in the decades-long breast cancer movement. The medical community has made substantial and lifesaving discoveries. Among the most important of these was learning that breast cancer was not a single disease, but a family of diseases, some more easily treated than others.

This led to more discoveries: new surgical approaches; new medical treatments; the importance of early detection and timely treatment; and new findings about lifestyle, genetics, and a greater understanding of risk. As a result of all these developments:

- Breast cancer death rates declined by **37 percent** from 1990 to 2013.
- New therapies and targeted treatments improved survivability and replaced the one-size-fits-all treatments of three decades ago.
- Education has helped millions learn about the importance of early detection, timely diagnosis and effective treatments proven to save lives.
- Thousands of community-based programs funded by Komen provided financial, medical and psychosocial support for women, men and families, from screening through treatment and into survivorship.
- Millions of people are now able to talk openly about breast cancer – a significant change from a time when women suffered breast cancer in silence and even shame.

A Generation of Progress



WITH KOMEN LEADING THE WAY

Komen contributed to many of these advances, and led the way through our research programs, our community outreach and advocacy, and our global work.

- We have invested in more breast cancer research than any other nonprofit organization outside the U.S. government – from a single \$28,000 grant in 1982 to more than \$920 million to date.
- We were the first to understand the power of communities and advocacy in breaking down barriers to breast cancer care. We are the only breast cancer organization with a network of 100-plus community Affiliates. We have invested in thousands of community health, advocacy and global programs to deliver support where it is needed in the U.S. and in 30 countries.
 - These include programs that provide free or low-cost screening diagnosis, treatment and patient navigation for breast health and cancer care; help with medical and emergency living expenses, and transportation and other assistance to help overcome the barriers people face when trying to access the care they need.
- Komen advocacy helped increase federal breast cancer research funding, and helped establish government programs like the Breast and Cervical Cancer Early Detection Program to assist low-income and underserved women.
- Komen fought for passage of the Mammography Quality Standards Act.
- We continue the fight today for more breast cancer research funding and high-quality care for all.
- And because breast cancer knows no borders, Komen expanded its work to more than 30 countries around the world where breast cancer still carries a stigma, and where there are few resources to detect or treat the disease.

A Generation of Progress

1970s

Total mastectomy is standard surgical procedure

Tamoxifen is approved to treat patients with advanced breast cancer

Chemotherapy and radiation are only non-surgical treatments

Breast-conserving surgery (lumpectomies) adopted in late 1970s

THE CHALLENGE

Despite advances in medicine and the work of determined advocates, and despite declining breast cancer death rates, a stubborn truth remains:

More than 40,000 women and men are still dying of breast cancer every year in the U.S.

This is a number we have never been willing to accept, and one that we will change with our

BOLD GOAL.

OUR BOLD GOAL

**Reduce the current number
of breast cancer deaths by**

50%

in the U.S. within the next decade.

GETTING TO HALF: The Research Imperative

Most breast cancer deaths occur because we lack the effective treatments for the disease. We will get these treatments by improving our understanding of the biology of breast cancer through basic research, and by applying this biology to develop treatments for lethal forms of breast cancer.

Our **Bold Goal** sets an enhanced emphasis on finding new treatments for aggressive and incurable forms of breast cancer by leveraging Komen's expertise in identifying and funding the best and most innovative breast cancer research and researchers.

We count as our advisors the world's most influential cancer scientists, clinicians and advocates. We will continue to draw on their expertise as we focus on areas such as:

- Finding more-effective treatments for metastatic disease (cancer that has spread to other parts of the body – also known as stage IV).
- Developing better therapies for aggressive forms of breast cancer resistant to standard treatments such as triple negative, Luminal B (HR+/HER2+) and inflammatory breast cancer.
- Leveraging the use of transformative, next-generation technology to detect and treat breast cancer at the very earliest stage, before it has spread or returned, and when treatment is most effective.

As we enhance our focus in these areas, we remain committed to innovation and continuity in breast cancer research. **We will continue to invest in early-career researchers who are the next generation of breast cancer science.**



Dr. Nikhil Wagle

Many people don't think Facebook and Twitter when they think about breast cancer research. Dr. Nikhil Wagle does.

Wagle, of the Broad Institute and Dana-Farber Cancer Institute, is tapping the power of social media in his bid to discover new ways to save the lives of younger women with metastatic breast cancer (breast cancer that has spread to other organs). With a \$375,000 grant from Susan G. Komen, and collaboration among the Broad Institute of MIT and Harvard, and Dana-Farber, Wagle's Metastatic Breast Cancer Project reaches out through social media and partnerships to younger women with metastatic breast cancer. They are being asked to share their medical records, saliva and tumor samples to help discover the molecular and genetic features unique to younger patients with breast cancer.

It is an example of patient-driven, collaborative and innovative research designed to get answers, and augments \$450,000 in funding that Komen has already invested in Wagle's research.

To learn more, visit mbcproject.org.

A Generation of Progress

1980s

Susan G. Komen® is founded, launching the breast cancer movement

Komen launches its Race for the Cure® series to engage community and raise funds

30% of women 40+ undergo mammograms

Komen Affiliates are founded to support local women and raise funds

GETTING TO HALF: The Research Imperative

This work has already begun: more than 60 percent of our 2016 research grant portfolio is invested in these areas, including

- Metastatic breast cancer research
- New treatments for aggressive types of breast cancer
- New technologies to detect new or recurrent breast cancer
- Understanding factors in disparities

We also will continue to leverage the potential of emerging areas, such as “big data,” to harness the voluminous amounts of data that exists in medical records and genetic databases to aid in breast cancer research and treatment. Komen was the first breast cancer organization to bring technology and health leaders together, in 2015, specifically to explore the opportunities and challenges of applying big data applications to breast cancer. Komen will continue to direct progress in this area by funding projects that encourage data sharing among researchers and institutions, and by serving as a convener to ensure this collaboration.

“Our commitment to the most promising, innovative and meaningful research will never waver. We will not stop until every woman and man with breast cancer can be told: “There is hope – and help – for you.”

Since our founding in 1982, Komen has funded breakthrough breast cancer scientists and institutions around the world. Komen has touched many advances in breast cancer research, including discoveries such as tilmanocept, molecular breast imaging, ultrasound tomography and a new breast cancer predisposition gene, RECQL.



Yibin Kang, Ph.D.
Princeton University

- First Komen grant in 2005
- Komen Scholar 2015
- Pioneer in breast cancer bone metastasis
- 3 Komen Fellows; 1 CCR mentored



Alana Welm, Ph.D.
University of Utah

- Komen Fellow in 2002
- Komen Scholar 2016
- Leader in metastasis models and immunotherapy
- 5 Komen postdocs mentored

A Generation of Progress

1990s

Identification of a genetic link to some breast and ovarian cancers

Less-invasive surgical techniques are introduced

Treatments improve: trastuzumab (Herceptin), taxanes

Tamoxifen approved to reduce risk of developing breast cancer.

GETTING TO HALF: Quality Care for All

We know that research is critical to ending breast cancer. But we have also learned over three-and-a-half decades that all the research in the world won't help if its benefits don't reach the women and men who need it.

Today, even with the Affordable Care Act and other programs, too many people die because of financial, socioeconomic, geographic and cultural barriers to high-quality breast cancer care.

Komen has always believed that where you live should not determine whether you live. For decades, Komen and its network of 100 local Affiliates has worked to level the playing field for medically underserved populations.

“Our commitment to these women and men continues and will never change. We will always fight for health equity for every woman, man and family we serve.”

Community grantees funded by Komen and its Affiliates provide breast cancer screenings, diagnostic tests, medical supplies, out-of-pocket medical costs, surgeries and other therapies, transportation to treatment, culturally sensitive education, patient navigation programs – even emergency living expenses. All told, we have invested more than \$2 billion to help women where they live.

We have led and continue to lead programs to ensure that all women and men – African-American, Caucasian, Latino, Asian, LGBTQ and rural – are served.

We do so because these programs are critical and because some, such as patient navigation programs, are proven to improve five-year survival rates of breast cancer patients who were navigated from screening through resolution.



Dr. Olufunmilayo Olopade

A prominent expert on hereditary cancers, breast cancer risk assessment and prevention, Dr. Olufunmilayo Olopade of the University of Chicago is leading the breast cancer field in the use of genomics research to impact public health and overcome disparities on a global scale. Her work—which many consider the most influential research into breast cancer in African-American women—has shifted the dialogue around the breast cancer mortality gap affecting African-American women (once assumed to be solely caused by socioeconomic or cultural factors). With the publication of “A Perfect Storm” in 2015, Dr. Olopade and University of Chicago colleague Dr. Robert Daly chronicled the genetic, medical, societal and other factors that contribute to significantly higher breast cancer death rates in African-American women in the U.S. Komen is fortunate that Dr. Olopade serves on the Susan G. Komen Board of Directors, has been a Komen Scholar and is a Komen research grantee.

A Generation of Progress

1990s

Breast cancer patients advocate for more federal funding of breast cancer research

Federal Mammography Quality Safety Act is passed in 1992

Advocates help establish the National Breast and Cervical Cancer Early Detection Program for low-income and uninsured women

KOMEN'S AFRICAN-AMERICAN HEALTH EQUITY INITIATIVE

Achieving health equity requires an intense focus on areas of greatest need, and nowhere is the need for health equity more critical than in the African-American community where women are about 40 percent more likely to die of breast cancer than white women in the U.S.

In some cities, the mortality gap between African-American and white women is as high as 74 percent.

“Our goal is to reduce the mortality gap between African-American and white women in these cities by 25 percent, within five years of beginning our work in each city.”

This must change.

Komen is taking on this issue directly. Armed with a \$27 million gift from the Fund II Foundation, Komen is launching the African-American Health Equity Initiative (AA/HEI) to end disparities in breast cancer outcomes in the African-American community. The AA/HEI's initial focus will be in the 10 metropolitan areas in the U.S. where the disparities are greatest.

Ours is a collaborative effort with the civic, health, government and faith leaders who are the experts in these cities. In the past year and in each city, Komen has been convening roundtable discussions with these leaders. Working side-by-side with them to identify and implement the interventions they know to be the most relevant to their communities. Over time, we will take what we learn in the Health Equity Initiative to more cities and towns across the U.S.

We know that locally led programs work. In Chicago, with \$2.6 million in funding from Komen, the [Metropolitan Chicago Breast Cancer Task Force](#) was able to reduce the mortality gap between African-American and white women by **one third** in five years – proof that a collaborative, systems-oriented approach, and a determined community, can and will save lives.



“Where you live dictates what you have access to in terms of care. And it can, and has, dictated your breast health outcome. So it’s really important to have [Roundtables] like this so we can have conversations and really begin to move in a direction of understanding where there are gaps and poor quality and how we can best support improvements in those areas.”

- Teena François-Blue, MPH

“For us to change anything it takes a village, and that’s what you guys [Komen] are bringing together: the village experts from different fields, community leaders, activists, advocates, health care professionals and social service – and it’ll take all of us together to truly make the change.”

- Rep. Robin Kelly, Ph.D., M.A. D-Illinois

A Generation of Progress

2000s

Researchers discover breast cancer subtypes based on discrete sets of genetic changes

Genetic tests are developed to help determine which patients need more aggressive treatment

COME JOIN US

In our first 35 years, Komen's work has saved lives and changed the culture.

We brought breast cancer out of the shadows.

We gave women a voice.

With our Susan G. Komen Race for the Cure, we built a global community of women and men, millions strong, running and walking on four continents to end breast cancer, forever.

Our community made it possible for Komen to invest almost \$3 billion in research, community, global and advocacy programs that have helped millions.

Our journey today will be faster and deeper.

We will reduce the current number of breast cancer deaths by 50 percent in the next 10 years.

This is our **Bold Goal**.

Please join us.

A Generation of Progress

2010s

New treatment for HER2+ breast cancer: pertuzumab, trastuzumab, emtansine (T-DM1)

Congress passes the EARLY Act, requiring breast cancer education for women under 40

Affordable Care Act requires coverage for screening mammography

Advocacy for equal access to oral anti-cancer drugs result in oral parity laws being passed in 42 States

END
BREAST
CANCER
FOREVER

