

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/breaking-boundaries-breast-cancer/anticipated-highlights-from-the-2020-sabcs-breast-cancer-care-amid-a-pandemic/11599/>

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Anticipated Highlights from the 2020 SABCS: Breast Cancer Care Amid a Pandemic

Announcer:

Welcome to *Breaking Boundaries in Breast Cancer* on ReachMD, sponsored by Lilly. Ahead of the 2020 San Antonio Breast Cancer Symposium, we caught up with Dr. Lola Fayanju, Associate Professor of Surgery and Population Health Sciences at Duke University School of Medicine, who shared with us some of the updates in breast cancer that she is most excited to learn about at the conference. Let's hear from Dr. Fayanju now.

Dr. Fayanju:

One of the things I am most looking forward to learning about at the 2020 San Antonio Breast Cancer Symposium is how our colleagues across various disciplines within breast oncology have responded to the COVID-19 pandemic, what the implications have been for the type of care we've provided, and our patient's experience with breast cancer, and what we need to plan for in a future that remains highly uncertain. I was really excited to see that so much of the agenda is devoted to addressing disparities and the promotion of equity in breast cancer care and research, not only within the United States, but looking across the globe.

I really think that one of the potential silver linings of the COVID-19 pandemic has been bringing a greater awareness of the extent to which social determinants of health contribute to wellness or detract from wellness, and how vulnerable people can be when an additional challenge such as a pandemic can affect their response and their treatment to breast cancer therapy. So, really excited to see the focus on how breast cancer is treated in a changed world, and what we can do to make care equitable for our patients going forward.

I very much hope they'll allow us to have a more coordinated approach to managing systemic therapy, both in the neoadjuvant and adjuvant setting. Back in the spring when our various professional societies recommended pausing screening mammography, as well as minimizing contact with the healthcare system through the deferral of surgery for early stage cancers that might otherwise be managed with endocrine or chemotherapy. That happened quite variably throughout the country despite these recommendations. And we are still learning the way in which patients complied with those recommendations, the extent to which providers encouraged those recommendations, and also how patients are re-engaging with standard of care in the wake of the COVID-19's initial pandemic peak waning, but as we face a new peak potentially this winter.

I think it's really important, and I'm really glad they're thinking so thoughtfully about what COVID-19's impact has been and what the implications can be for disparities in care, because I think there's a real possibility of patients who are already at risk for disparities and care to be even more vulnerable, given the huge societal changes that have been brought about as a result of the pandemic.

Announcer:

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