



## **PREGNANCY AFTER BREAST CANCER TREATMENT**

Breast cancer survivors who want to become pregnant often question whether their cancer history may stimulate recurrence of their disease, and worry that their children may have a higher risk of birth defects and are at higher risk of developing cancer. You may have these same questions, concerns, and/or worry. The following discussion provides some evidence to help address your concerns. Please write down your questions and comments that you would like to discuss with your oncology team.

### **Effects of Pregnancy After Breast Cancer on Recurrence**

Research studies, to date, do not show an increased risk of recurrence based only on becoming pregnant.

Here is a summary of the study findings:

- Women that have a full term pregnancy after treatment had a slightly *reduced* risk of death compared with women who had no full term pregnancy.
- Miscarriage or induced abortion after breast cancer treatment had no effect on health.
- There may be a “healthy mother effect” of treatment showing that women who become pregnant after breast cancer are more likely free of disease than women who do not have a pregnancy after treatment.
- Hormonal changes that come with pregnancy after breast cancer have little effect on health.
- The rate of miscarriage among women with breast cancer was slightly higher than women who had never had breast cancer. The difference may be the result of a different hormone levels after treatment.
- Pregnancy after breast cancer does not have a bad effect on women with early-stage breast cancer. This may be due to being a “healthy patient”, but the pregnancy may also have a protective effect.
- Infants born to mothers with breast cancer do not have an increased risk of low-birth weight or birth defects compared with women who have never had breast cancer.



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- In summary, the clinical evidence shows that women with breast cancer do not have bad clinical outcomes with pregnancy after breast cancer treatment.

### **Having Children After Breast Cancer**

You may be wondering what the experience is like for other women who became pregnant and had children after treatment for breast cancer. One study showed:

- Women were eager to resume their life goals that were temporarily put on hold by breast cancer.
- Becoming pregnant, starting, or completing a family were very important at the time of their diagnosis.
- Having children held many meanings. These include:
  - Becoming pregnant and having children meant that they were “cured” and that they felt well enough to look forward to a future
  - Having children meant reconnecting with their peers, friends, and family.
  - Having children made women want to “get well” again.
  - Young women with pregnancy after breast cancer believed that having a family had the greatest impact on their quality of life. Children gave them a reason to start their day and helped them return to a “normal” life.

### **Concerns about Becoming Pregnant:**

- They were concerned about their breast cancer possibly coming back. Even if you have a good prognosis, it might be helpful to have a talk about the “what ifs” – that breast cancer may come back in the future, and how you feel about having a history of breast cancer in your overall family planning and decision-making.
- Women were very concerned over the need to be followed up and seen by their oncology team for breast exams and mammograms before pregnancy and about not having mammography during their pregnancy.

### **Helpful Behaviors with Subsequent Pregnancy:**



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- Having a realistic view about having a normal pregnancy
- Learning to live with and manage uncertainty over the future
- Having love and support from a spouse or significant other
- Knowing the difference between a personal and medical decision-making. Personal decisions that they made for their lives may not be the same as the oncology team's decision about their future.
- Accepting that family members may express concerns about their decision to become pregnant. Family members may not agree with your decisions, but be ready to answer their questions and let them know that you have made the best decision for you.

### Concerns about the Health of the Child

- You may be concerned that your child may have an increased risk of developing birth defects or cancer because of your cancer history.
- Studies do not show that children born to either male or female cancer survivors have any more birth defects than normal.
- Studies do show that women who received *abdominal* (stomach area, not breast) radiation at a young age have a higher risk of birth defects, complicated pregnancy, and low-birth weight infants.
- Unless there is a known inherited cancer risk (such as BRCA gene mutation), children born to cancer survivors do *not* have a higher risk of developing cancer themselves.

### Concerns about breastfeeding

- Breastfeeding may be difficult or not possible on the affected side if you received radiation after a lumpectomy.
- The breast that received radiation may not produce much milk, but your other breast should be able to produce enough milk for your baby.
- Be sure to breastfeed when your baby is hungry to encourage a good milk supply.
- You may wish to talk to a breastfeeding expert (lactation consultant) if you choose to breastfeed. Most hospitals have these on staff.



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- Women who have undergone mastectomy and/or reconstruction will not be able to breastfeed on the affected side/s.

### **Useful websites:**

- <http://ww5.komen.org/BreastCancer/PregnancyAfterBreastCancer.html>
- <http://www.birthwiseinbirmingham.com/>