Breast cancer can happen to anyone, regardless of whether they are old or young, male or female, or whether or not they have high or low risk factors. Breast cancer is considered Metastatic, or Stage 4, when there is evidence cancer cells have spread to areas outside the breast or nearby lymph nodes. Metastatic breast cancer patients are likely to have symptoms that affect other organs of the body, including the bones, lungs, liver or brain, where the cancer cells grow and multiply.

Metastatic breast cancer patients along with their caregivers face complex medical situations with accompanying financial challenges, intricate treatment decisions, long-term workplace and employment concerns and many other unique issues. While metastatic breast cancer cannot be cured, it can be treated and managed allowing the patient many quality years of life ahead. This guide is designed to provide practical advice to patients and their loved ones as they live with a metastatic breast cancer diagnosis.

This guide delivers expert advice specifically for Metastatic Breast Cancer patients to help avoid common insurance and care barriers.

Engaging With Your Medical Team

When faced with a metastatic breast cancer diagnosis or a recurrence of breast cancer, there are many aspects to consider such as available treatment options and utilizing a proactive strategy to reduce insurance barriers.

As a metastatic patient, you will likely start to hear numerous new medical and technical clinical terms. To help make sense of your situation, consider these tips when discussing your treatment:

- Write down your questions before your visit. List the most important ones first to ensure they are answered, and write down the answers in case you forget.
- If you don’t understand what the healthcare team is recommending, ask to speak with an oncology nurse to discuss your concerns.
- Consider electronically recording the visit so you or a family member can refer to it later.
- Bring someone with you to your appointment. They can ask questions you may not think of and help you take notes.
- Ask your provider to show you diagrams or drawings that may help increase your understanding.

Learn more about your treatment team by asking the following questions:

- How long have you been treating people with breast cancer?
- How many metastatic breast cancer patients do you treat each year?
- What has been your experience with the results of this treatment?
- How will my treatment affect my daily activities?
- How do you stay up to date on the latest treatment options and medical advances?
- Do you enroll patients into clinical trials should I want to participate in one?
- Who do you recommend I see for a second opinion?
- Would you consider having genomic testing done on my tumor?
Potential Insurance Complications with Chemotherapy

Many new medications are available orally offering the patient the option for home-centered treatment. However, for treatment such as chemotherapy, which is offered both with intravenous infusion and oral pills, each form may be categorized differently by the insurance company. For example, intravenous chemotherapy is normally covered under the medical benefit of your insurance plan, while oral medications are covered through the prescription benefit of your insurance plan. If you are prescribed the oral form, this means you are responsible for your drug pharmacy co-pay before you can pick up your prescription.

If you and your oncologist determine that oral chemotherapy is your best treatment option, you may find it challenging to afford the high out-of-pocket expenses. Explore co-payment assistance programs or other financial assistance options.

Understanding Treatment Options

Most treatment for metastatic breast cancer works to prevent or slow the disease progression while easing symptoms and managing treatment side effects. There are several forms of treatment for metastatic breast cancer patients. Your treatment history and response to therapy will determine the type of treatment your doctor may recommend.

Hormone Therapy – prevents cancer cells from receiving estrogen, thus halting their growth. This is usually the first treatment option for hormone receptor-positive patients.

Targeted Therapy – designed to attack a certain molecular agent or pathway responsible for cancer development.

Radiation Therapy – targets the tumor to kill the cancer cells and can provide relief from the pain associated with the cancer.

Chemotherapy – treatment that attacks all cells indiscriminately in the hope of reducing the growth of rapidly dividing cancer cells. Available intravenously or via pill form, this treatment can be prescribed alone or in combination with other treatment.

Surgery – a provider manually removes the tumor and its surrounding tissue from your body. Two types of common breast cancer surgery are called “lumpectomy” and “mastectomy.” Surgery is frequently no longer a viable treatment option alone during the metastatic stage because the cancer has spread beyond the confines of the breast.
Options to Access Alternative and Emerging Treatment Options

Researchers today are discovering new treatment options that target specific genetic changes in cancer cells. These new protocols can provide you and your physician the ability to customize treatment based on your unique tumor type and genetic mutations. This method has also been found to reduce exposure to ineffective or less effective treatment protocols.

Clinical Trials – Clinical trials offer the ability to access an emerging treatment option otherwise unavailable outside of the trial. Clinical trials are conducted in a series of steps, called phases and many times contain medication that has shown promising results in research.

A clinical trial may require travel so it is important to consider transportation, lodging, and food expenses. Some clinical trials will cover those expenses but only if requested by the patient. If you are working while accessing treatment via clinical trials, consider activating any workplace protections you may be eligible for, including protected leave under the Family Medical & Leave Act and applying for short- and long-term Disability benefits to protect your income during extended absences from work.

Accessing Investigational Drugs - If you do not qualify for a clinical trial, you may consider requesting treatment through an “Expanded Access” program (also known as “compassionate use”).

This option allows patients access to effective investigational drugs that are in Phase 3 or beyond of the clinical trial stage. Although these treatment options may not yet have been approved by the Food and Drug Administration, to access, there must be reasonable evidence that the risk of the drug is not greater than the risk from the disease and that the drug will prolong survival or improve your quality of life.

In this situation, your insurance may not cover the cost of the treatment or drugs to address any side effects. You may find it helpful to discuss treatment options and financial obligations with your insurance company or case manager if considering an Expanded Access program.

Genetic and Genomic Testing

Incorporating knowledge specific to the individual genetic makeup in your body as well as your exact cancer as part of your treatment plan can be highly beneficial and lend itself to more informed and targeted decisions on care. This concept, called “personalized medicine” is a rapidly developing field of treatment within the cancer community. The “Genetic” and “Genomic” terms are very similar but actually refer to different types of information.

Your risk for developing a particular disease or type of cancer. This analysis of your individual DNA can detect inheritable genes and chromosones that have been found to be linked to a higher risk for hereditary disorders. For example, a defective BRCA (breast cancer) gene increases the odds that you will be susceptible to breast or ovarian cancer over the course of your life. Genetic testing can be done on patients of all ages or who do not show any signs of illness. If a gene mutation is positively identified, it does not mean that the patient will definitely be affected by the condition.

Biomarker Testing may be completed with genetic testing. Biomarkers refer to the molecules found in all blood or tissues and that can be measured to indicate an abnormal condition or disease. Depending on the specific biomarker, this genetic testing can be used to identify risk of a disease, early detection through screening or even help diagnosis a specific cancer type.

Genomic Testing is done on cancer tumor itself and looks for specific mutations that are present within the cancer cells. Results can provide valuable information on how your specific cancer cell is behaving, and this information can be used to match treatment found effective against reducing or killing that cellular behavior. Many times genomic testing also identifies ineffective treatment options that can be avoided by your doctor. Talk to your insurance company for coverage details about whether your plan will cover genomic testing related to your breast cancer. If your insurance company will not cover the testing, reach out to the manufacturer of the test to inquire about the availability of financial assistance to help cover the cost.
Qualifying for Government Benefits

**Social Security Disability Insurance (SSDI)**

Immediately upon diagnosis of metastatic breast cancer (stage IV), you are eligible to apply for disability benefits under the Compassionate Allowances program. The program is intended to expedite the processing of Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) claims for applicants whose medical conditions are so severe that their conditions are known to meet the Social Security’s definition of disability. Decisions are usually expedited depending on how quickly you submit the requested information and medical documentation arrives from your doctor.

In most cases, after 24 months of receiving SSDI benefits, you are eligible for Medicare insurance benefits regardless of age.

**Compassionate Allowance speeds the application and disability designation; however, even when found disabled by SSDI, you will not begin to receive your disability checks until the beginning of the sixth month after your disability date.**

**Supplemental Security Income (SSI)**

SSI is a separate governmental program that provides benefits to people who are disabled and have very little income and assets. SSI provides monthly payments to low-income individuals who do not qualify for SSDI because they have either never worked or who have insufficient credits on their earnings record. If you qualify for SSI benefits in most states, you are also eligible for Medicaid benefits.

Federal Workplace Protections Critical to Employed Metastatic Breast Cancer Patients

The **Family and Medical Leave Act (FMLA)** exists to help patients maintain employment and employer-based health insurance benefits while being treated for serious illness. This protection allows you to take up to 12 weeks of unpaid leave from work related to your diagnosis and be eligible to return to work. You must provide documentation from a physician that supports the request for leave and provide this to your employer. Once approved, leave can be taken in one large block, or a few hours at a time. FMLA is calculated and recorded annually and can be renewed the following year if a qualifying medical condition continues.

It is important to know that not all employers are required by law to offer FMLA leave. Consult with your human resources department about your company policy.

Employers have the right to require that you use any available paid vacation and sick time before you are allowed to take unpaid FMLA leave. When you return to work, your employer must return you to your original position or an equivalent job with the same pay, benefits and other employment terms.

FMLA also protects caregivers and family members who assist you during your journey, and provides them the option for protected leave to support you during your medical journey.

The **Americans with Disabilities Act (ADA)** protects the privacy of metastatic breast cancer patients and provides an avenue to request accommodations that support your ability to remain in the workforce.

Under the ADA law, employers cannot inquire whether you have cancer or any other medical condition upon interview or during the hiring process. ADA also protects your privacy if you do share your medical information at a later point to your employer, as your employer may not share this information with unauthorized colleagues.

Once employed, the ADA also allows patients the right to request an accommodation related to your treatment. Examples of reasonable accommodations include the ability to take periodic breaks or have access to a private area to take medication, the ability to have a modified work schedule or shift change, the ability to leave for doctors appointments, permission to work from home, modified work environment temperature or permission to use work telephone to call doctors and coordinate care.

If you have exhausted the 12 weeks of leave allowed under FMLA, and you are not yet ready to return to work, ADA provides another avenue to request extended leave as an accommodation.


Request the PAF guide on Maintaining Eligibility for Insurance for more information on benefits and protections.
Addressing Areas of Your Care that May be Hard to Face

Maintaining comfort and trust in your medical team

It is important to be comfortable when speaking with your healthcare team. If you are not getting the information you need, you dislike the doctor, your doctor is in an inconvenient location or you are not satisfied with what you are being told, you may want to consider finding a new physician. The doctor-patient relationship has been shown to be critical to overall patient outcomes, so do not feel awkward or embarrassed if you want to seek another provider.

Discussing costs with your doctor

If you find it challenging to pay for your treatment, discuss financial concerns with your treatment team. Being honest about any anxiety related to cost with your doctor may open up a dialogue that ultimately allows you to connect with additional options.

There are financial assistance programs available to assist with your medication and treatment co-payments through nonprofit organizations or through your medication’s manufacturer. If you are employed, you may be able to recover some costs through a flexible savings or health savings account that can accompany your health insurance plan. You may also find a list of grant or financial assistance programs on breast cancer support websites that can help.

Legal paperwork relevant to patients

Advanced Directives, also known as living wills, are a set of written instructions that communicates your treatment preferences to your healthcare team and family members in a situation where you are incapable of making the decision. This assures that your wishes are carried out and relieves some of the decision-making burden from your loved ones. You do not need to have an advanced directive to authorize a “do not resuscitate” (DNR) order in your medical record, but you will need to make this known to your medical providers in order for it to be documented.

Power of Attorney is a document that gives someone the authority to handle all financial, legal and/or health affairs if you are unable to do it for yourself. You need to trust the person you select is both able and willing to perform these duties during these critical and emotional times. Be sure that you discuss your wishes with them in detail and alert them of this documentation so that they are prepared to execute your choices.

You can also designate a Medical Power of Attorney to someone to make medical decisions for you without giving them the authority to handle your financial or legal affairs.

These distinctions are relevant during the period you are receiving medical care. Unless otherwise documented, these powers will expire at the time of your death and will not carry over to allow decisions related to your estate and burial.

Beyond active treatment

The goal of Palliative Care is to focus on quality of life during long-term medical care. Palliative care can be given alongside any other forms of active treatment you are receiving to treat your cancer, and be relevant at any point in your treatment journey. The palliative care team helps manage symptoms or side effects you may encounter during treatment.

Palliative care may be covered under the hospice benefit, standard medical benefits of your insurance plan, or contained within long-term care insurance plans.
Vocabulary to Know

Adjuvant Therapy:
Treatment given after removing the cancer with surgery.

BRCA:
Breast Cancer susceptibility genes make proteins that help control cell growth. If you have a family history of breast or ovarian cancer genetic testing can identify your chances of developing those cancers.

Estrogen Receptor:
A protein found inside some cancer cells that is stimulated by the hormone estrogen and is dependent upon estrogen to grow. Also called ER.

Expanded Access:
A program started by the FDA that allows certain promising investigational therapies to be made available to people with serious or life-threatening illnesses without other treatment options before being formally approved for use.

Food and Drug Administration (FDA):
An agency in the federal government responsible for ensuring drugs, medical devices, and equipment are safe for use in the United States.

Gene Therapies:
Therapies that alter the genetic structure of a tumor cell, making them more susceptible to either the immune system or chemotherapy.

Hormonal Therapy:
Treatment that adds, blocks, or removes hormones. To slow or stop the growth of breast cancer, synthetic hormones or other drugs may be given to interfere with the body's ability to stimulate the growth of breast cancer cells.

Human Epidermal Growth Factor Receptor 2 (HER2):
A protein that controls how cancer cells grow, divide and repair themselves. HER2 positive indicates that your cancer may respond to targeted hormonal therapies.

(Continued)
Monoclonal Antibody:
A type of protein made in a laboratory to bind to a particular substance in the body, including cancer cells. They can be used alone or to carry drugs, toxins or radioactive materials directly to cancer cells.

Mutation:
Any change in the DNA sequence of a cell. Mutations can be harmful, beneficial or have no effect. Certain mutations may lead to cancer or other diseases.

Progesterone Receptor:
A protein found inside some cancer cells that are dependent on progesterone to grow. Also called PR.

Relapse or Recurrence:
A return of cancer after treatment or after a period of time during which the cancer cannot be detected.

Targeted Therapy:
A type of treatment that uses drugs and antibodies to attack specific types of cancer cells with less harm to normal cells. Some targeted therapy blocks the action of certain enzymes, proteins or other molecules involved in the growth and spread of cancer cells. These treatments can be given alone or in combination with chemotherapy.

Triple Negative:
This cancer tests negative for estrogen, progesterone and the HER2 protein. These tumors are not responsive to current targeted therapies, although they usually respond well to chemotherapy.

Tumor Response:
The shrinking of a tumor following treatment.
Caring for Your Emotional Side

Learning that you have metastatic breast cancer can be an overwhelming experience—one that leaves you feeling numb, frightened, vulnerable, and alone even when you are surrounded by family and friends.

This is a time where you need to put yourself first. Metastatic breast cancer is treatable even if not curable. Become informed about all of your treatment options, and have a clear head when you are making decisions regarding how you want to proceed.

It’s important to know that feeling stressed and anxious is normal. Talking to someone may be the first step in helping you live well with metastatic breast cancer. You may feel like you should stay strong but it is also important for you to find people who have experience in what you are facing, can comfort you and are available to share their story. Trying to carry this burden alone while pretending everything is fine is not a good idea and can impact your overall health.

Be honest with your treatment team about any emotional strains and how you are feeling, as there may be support services directly provided by your cancer treatment center and available to help you and your family members. Another option is to take advantage of counseling benefits available through your insurance plan, as this may be a way to express yourself without feeling a burden of sharing with those affected personally by your diagnosis. And lastly, there are many cancer organizations that offer emotional support, including in-person support groups, one-on-one 24/7 phone support, connection to a mentor or fellow survivor, or online disease-specific forums to guide you through the process.
Questions to Ask

• What are my options for taking part in a clinical trial?
• What is the eligibility requirement?
• How long will the trial last?
• What is the trial studying and how does this relate to me?
• Who will be in charge of my care? Will I be able to see my own doctor or a doctor in my network?
• How often will I need to visit a physician’s office?
• What tests and procedures are involved in the trial?
• What are the likely side effects from the treatment? How will these possible side effects affect my daily life?
• Are these treatments to manage any existing costs?
• Will I need to be in a specific facility to receive the care if so, how often, and how far from home?
• Which costs will my insurance cover? What costs are paid by the trial?
• Are there reimbursement options for the non-medical parts of the cancer care? What is required of my caregiver or family member?
• When does the trial start? How long will the trial last?
• How often and for how long will I have to take the treatment or doctor visits?

The Practical Side of Trial Participation

Be aware of making the decision to participate in a clinical trial is based on the medical issues of each cancer, patient, and the potential benefit of participating in the trial to fit their lifestyle. While every treatment and medical care provider practices in their special, financial, and ethical challenge, it is important to learn as much as you can under that you have to decide whether the benefits outweigh the risks.

Before you are able to finalize your enrollment into a trial, the organizer will provide you with a list of requirements that you are expected to fulfill to ensure the clinical trial are completed the same way for everyone. Be sure to read this closely and ask questions.

Some of the largest challenges patients report when it comes to participating in clinical trials relate to the financial cost. Expenses may come from affecting the assurance of your trial or doctor visits, covering any trial-related care that is not covered by your current insurance, which is separate from the care you receive, or spending time to ensure your records are integrated to ensure the trial results are captured the same way for everyone. Be sure to read this closely and ask questions.

Additionally, trials are required more frequently than you would think, so you may need to adjust your lifestyle, including large time commitments, to ensure you are able to participate in a trial or treatment of doctors. Asking questions will help you understand what to expect.

Most Patients (And Doctors) Forget That It’s Just Not For Treatment.

There are lots of different types of research studies being conducted around the world, from the clinical trial to the observational study. For example, research may be looking to identify actions that can help slow disease progression, develop strategies that can help you and diagnose disease faster, investigate whether there are additional things that can add to the improvement in disease outcomes, or aid in the better outcomes for those who receive treatment and many other advances.

Some trials are simply observational in nature and are recording trends or looking for basic biological connections between patients. Some might be adding non-medication treatments to improve the effectiveness of medications, like stem cell therapy, better sleep, emotional health or complimentary techniques. Some trials also are looking at various educational tools or open processes to improve health outcomes and reduce patient burden.

Some trials include people that are not sick, or have not been diagnosed, but have family history or are looking at various educational tools or open processes to improve health outcomes and reduce patient burden.

Some treatments may simply be testing whether an additional treatment or dose of the current medication would lower your chances of the cancer returning, or if drug approved for a similar disease would work for you. Trials are diverse in how they are being evaluated.

Clinical trials are not right or practical for every patient. It encourages you and research-participant options that match your specific medical disease, treatment history and medical situation and encourages you to discuss your care with the assistance of trained medical personnel.

Clinical Trials: What Patient Advocates Want You To Know

Clinical Trials: Are Definitely Worth a Second Look For Any Patient

Patient advocates help patients, family members, and caregivers to ensure timely and accessible access to personalized treatment and medication as part of their care plan.

When working with patients, no matter what the problem is, the key is to ensure informed treatment decisions. This may mean that you research options carefully before you agree to or recommend any additional treatment or care options and want to consider further whether the benefits of clinical trials fit into the context of the care you are receiving.

Although there is no single source, there are screening tools that can help patients find clinical trials that might be right for them. For example, researchers may be looking to develop new ways to detect diseases earlier, or to improve outcomes by monitoring data over time. Clinical trials are not just for treatment.

Trials are Not Just For Treatment

Some people only think of clinical trials for the rare or advanced disease, but current research is exploring other ways of improving outcomes that are improving other aspects of our healthcare. There are many opportunities of clinical trials with designed with specific groups in mind.

Treatment trials study new drugs, techniques, or combinations of treatments for those in any stage of cancer.

Prevention trials discover ways to keep from getting a particular disease or condition, to identify specific genetic or inherited risk factors.

Screening trials explore new ways to detect diseases or conditions.

Diagnostic trials explore better testing procedures for an illness or condition.

Quality-of-life studies evaluate ways to improve patient comfort, including addressing ways to reduce or eliminate side-effect of treatment.

Observational studies describe long term health outcomes by monitoring data over time.

Always check with your insurance company regarding your benefits on any clinical trials.
Understanding the Differences in Study Phases

There are 3 ways that clinical trial research is structured. So before you select a trial, you need to determine what phase trial you are interested in. A Phase 1 trial is designed to determine the side effects and preliminary effectiveness of a new treatment. A Phase 2 trial is designed to determine if the drug or treatment has potential worth. A Phase 3 trial is designed to fine tune the answers to the questions that are asked in the Phase 1 and Phase 2 trials. After a Phase 3 trial, the research team can apply for approval from the Food and Drug Administration to sell the new drug or treatment.

It May Be Good for Your Wallet

Ensuring that you receive a clinical trial study pay for trial items reduces their own cost and provides a way to task official sponsors to trial procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or care. However, be aware that there might be elements that neither the study sponsor nor the patient can control.

Participating in a clinical trial involves a formal commitment to prevent any surprises down the road. The study team can make a recommendation on if you should proceed with a clinical trial. The total number of registered studies has grown 400% since the year 2000. With over 280,000 medical studies active in 2017, millions of patients are being studied to test new treatments.
What Does Participation Mean Exactly? Is it Right For You?

You may be curious about learning more about clinical trials to explore whether volunteering to participate makes sense for you. Each trial is designed and monitored to ensure patient safety and is usually a step in the path to treat disease, however every trial is different. Learning about the role of a specific trial in your care, other differences than a total new treatment, drug or process being investigated that is otherwise not available outside of the trial.

Clinical trials are carefully designed science-driven studies that test the benefits and risks of specific medical treatments or interventions to prevent, treat or cure disease, including tests of new drugs or new treatment approaches. Clinical trials help us learn which treatments are safer and more effective than others.

Randomized Clinical Trials

1. Random means random - Cancer trials rarely involve a placebo, (and you must be notified if your study involves the placebo). The ultimate goal of clinical trials is to determine if the new treatment, drug or process being studied is effective against cancer. Every standard treatment and medicine available today was proven to be effective as a result going through the clinical trial process. Not all clinical trials are successful, however in randomized trials you will not get to choose which treatment you will receive. If you are interested, your doctor will encourage you to learn more about clinical trials.

2. Location vary - Some locations are online, nearly or even conducted by your current doctor. But sometimes the places that are best for you will be located too far for you to travel to in person. Contact your provider to see if your travel needs or ideas to change doses.

3. You may be more involved - trial participants tend to be more engaged with your care decisions. Members of the healthcare community can help do this. The study sponsor pays for these procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or other study specific materials you will receive. When participating in a trial, there may be other study specific materials you will receive, including the medications, interventions or other specific information. But you are not alone. Members of the healthcare community can help do this. They will help ensure your treatment path is not necessarily the same as others with your same cancer type, until a large number of patients have shown how your treatment results. This can vary a lot, however in randomized trials you will not get to choose which treatment you will receive. If you are interested, your doctor will encourage you to learn more about clinical trials.

Understanding the Differences in Study Phases

There are 3 ways that clinical trial research is structured known as “phases”.

Phase 1: The initial phase of a clinical trial before a medical care option can be sold or otherwise marketed. Its purpose is to determine how safely human volunteers can be exposed to your disease and work with patients just like you everyday. The goal of Phase 1 is to determine if the treatment is well tolerated and has any potential health benefits for the study group.

Phase 2: 30-400 volunteers are used and the study data are used to refine the answers to questions from phase 1, through phase 3, the data are analyzed and for the best ways to give the treatment more safely. Early phase trials will have less information for your diagnosis. If you are insured, your health plan may pay for trial items reduces their own cost and provides a kickback to your insurance. Your treatment path is not necessarily the same as others with your same cancer type, because your doctor decided to use in people with your same type of cancer.

Phase 3: 2000-3000 people are used and the data from the first 2 phases are used to see if the new and potentially new drug or treatment is effective against cancer. The total number of registered studies has doubled in the last 2 years. The good news is that you may not see any charges for the care you receive while participating in a trial at any point you choose. Remember that even if you decide to start a trial, if you feel the need to withdraw at any point, you can do so. More than 105,000 people are enrolling in clinical trials based on their diagnosis and treatment history. Patients in standard paths may not have this choice. The study sponsor pays for these procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or other specific information. But you are not alone. Members of the healthcare community can help do this. They will help ensure your treatment path is not necessarily the same as others with your same cancer type, because your doctor decided to use in people with your same type of cancer.

Choosing the right clinical trial for your cancer diagnosis can be overwhelming. The Affordable Care Act (ACA) requires most insurance plans to cover clinical trials. When participating in a trial, there may be other study specific materials you will receive, including the medications, interventions or other specific information. But you are not alone. Members of the healthcare community can help do this. They will help ensure your treatment path is not necessarily the same as others with your same cancer type, because your doctor decided to use in people with your same type of cancer.

Finding a Trial Doesn’t Have To Be an Individual Task

Not all kinds of medical research can be overwhelming many patients and family members. Finding trial options can be a daunting experience. If you are at a new doctor's office, patient advocates, healthcare social workers and diverse specific organizations. With many reasons, you or your family members can learn the facts from, and discuss possible options with the trial, your doctor and family members.

In order to find a clinical trial for treatment you should be made aware of your treatment options. Depending on your diagnosis, including your medical history, what is the best time for you to consider clinical trials? You can also talk to your doctor that you give him options with fresh eyes and share the good news with family and friends.

One Size Doesn’t Always Fit All

We have known for a long time that this phrase isn’t always true when it comes to wearing clothing. A “one-size fits all” mindset for your treatment path is not necessarily the same as others with the same cancer type. For example, let’s take a look at some of the key factors determined by how your specific body works today. Today’s research is designed to fine tune the answers to questions from phase 1, through phase 3, the data are analyzed and for the best ways to give the treatment more safely. Early phase trials will have less information for your diagnosis. If you are insured, your health plan may pay for trial items reduces their own cost and provides a kickback to your insurance.

The Decisions is Yours to Make

When participating in a trial, there may be other study specific materials you will receive, including the medications, interventions or other specific information. But you are not alone. Members of the healthcare community can help do this. They will help ensure your treatment path is not necessarily the same as others with your same cancer type, because your doctor decided to use in people with your same type of cancer.

It May Be Good for Your Wallet

Is it Right For You?

You have been encouraged to look at a variety of settings including your doctor's office, patient advocates, healthcare social workers and diverse specific organizations. With many reasons, you or your family members can learn the facts from, and discuss possible options with the trial, your doctor and family members.

When making your decision, its ok to take time to talk to others about your treatment options with your oncologist and the doctor. It might be helpful to talk to a nurse that you give him options with fresh eyes and share the good news with family and friends.

Clinical trials are conducted in a variety of settings including your doctor's office, patient advocates, healthcare social workers and diverse specific organizations. With many reasons, you or your family members can learn the facts from, and discuss possible options with the trial, your doctor and family members.

You have been encouraged to look at a variety of settings including your doctor's office, patient advocates, healthcare social workers and diverse specific organizations. With many reasons, you or your family members can learn the facts from, and discuss possible options with the trial, your doctor and family members.

As with any medical care you receive, you are responsible for payment for all costs. Average charges you may incur may include things like the cost of an appointment visit to network providers, lab tests, and imaging studies that are part of your standard treatment that are now part of your clinical trial. The study sponsor pays for these procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or other study specific materials you will receive. It’s important to check their coverage of items you know you’ll need during the trial. Check your policy limits. For example, look closely at the list to make sure you receive the care you need. As with any medical care you receive, you are responsible for payment for all costs. Average charges you may incur may include things like the cost of an appointment visit to network providers, lab tests, and imaging studies that are part of your standard treatment that are now part of your clinical trial. The study sponsor pays for these procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or other study specific materials you will receive. It’s important to check their coverage of items you know you’ll need during the trial. Check your policy limits. For example, look closely at the list to make sure you receive the care you need. As with any medical care you receive, you are responsible for payment for all costs. Average charges you may incur may include things like the cost of an appointment visit to network providers, lab tests, and imaging studies that are part of your standard treatment that are now part of your clinical trial. The study sponsor pays for these procedures that are being tested. The study sponsor pays for these items you receive, including the medications, interventions or other study specific materials you will receive. It’s important to check their coverage of items you know you’ll need during the trial. Check your policy limits. For example, look closely at the list to make sure you receive the care you need.
What Does Participation Mean Exactly? Is it Right For You?

You may be curious about learning more about clinical trials to explore whether volunteering to participate makes sense for you. Each trial is designed and monitored to ensure patient safety and is usually a step in the path to test or treat disease, however every trial is different. Each clinical trial may have specific inclusion and exclusion criteria, other benefits, other side effects or another element as a concern, so it is important to weigh each as it relates to your situation.

What Is the Purpose of a Clinical Trial?

Clinical trials are carefully designed scientific studies that test the benefits and risks of specific medical treatments or interventions to prevent, treat or cure disease, including those related to a new drug or treatment change in the disease. Clinical trials are designed to find out whether a new treatment, drug or process being tested will be effective and safe.

Understanding the Differences in Study Phases

There are 3 ways that clinical trial research is structured known as phases. Each phase of a clinical trial helps to determine whether a new treatment, drug or process being studied is effective and safe.

Phase 1: The primary goal of Phase 1 clinical trials is to study the safety of a new treatment, drug or process. The study includes a small group of people and the first steps done in the research process (random). phase 1 includes rule for your disease that will help you in the future.

Phase 2: The largest group of people in the studies are expected to respond significantly new drug or treatment strategy. The second phase can last from several weeks to several years depending on the disease being studied and the number of patients required to study.

Phase 3: The final phase of research generally has a large group of people and is used to confirm the results of a smaller group of people. This is the phase when a new treatment, drug or process is compared to the standard treatment. The results of the Phase 3 study allow for the development of a new treatment, drug or process to be added to the standard treatment for the treatment of patients.

One Size Doesn’t Always Fit All

We have been here for a long time that phrase always isn’t true when it comes to clothing or shoes, and this is also true with a clinical trial. Your participation is not necessary the same in every other patient with the same cancer. A patient might get better because of the reasons for your specific health background. Today’s research is focused on identifying biomarkers or regions of the body. Clinical trials are conducted in a variety of settings including hospitals, cancer research centers, medical schools, and community clinics.

Not Always Better - Sometimes the new treatment or new option is safe, identifying possible side effects for that the product or procedure will benefit meaningfull. But this does not mean that the new treatment or new option is safe.

Moving into this targeted and individualized medicine. Known as personalized medicine.


Learning To Be Your Own Best Advocate

Just like in your doctor’s office, every clinical trial must meet a minimum set of standards and guidelines that are set in place to protect you as a patient. To ensure you are fully informed and comfortable, the research team is responsible for providing all necessary information, including clear guidelines that must be followed, to ensure you understand the risks associated with the care that you will receive. Some of these guidelines include:

- You should have a clear understanding of the risks and benefits of the study and what to expect during the study.
- You should have a clear understanding of the costs associated with the study, including any potential reimbursement or compensation.
- You should have a clear understanding of the responsibilities and obligations of the research team and study staff.

The trial will not feel daunting that you are responsible for and plan for, and you can expect help and support from the research team.

In order to learn more about your rights and responsibilities as a participant in a clinical trial, you are given more information about the care you are about to receive. In addition, you may have access to the following resources:

- Information about the study and the research team.
- Access to the research team and study staff.
- Access to the study protocol and any changes to the protocol.
- Access to any additional resources that may be available to you.

The Decisions Is Yours To Make

When participating in a trial, there may be other study specific questions that can also help you understand the trial. These questions and answers will be provided to you by the research team. The study may also have additional resources that can be provided to you. These resources may include:

- Information about the study and the research team.
- Access to the research team and study staff.
- Access to the study protocol and any changes to the protocol.
- Access to any additional resources that may be available to you.

When deciding whether or not to participate in a trial, you should be aware of the benefits and risks associated with the decision to participate. This includes the potential risks and benefits of both the standard treatment and the new treatment. You should also be aware of the potential costs and benefits of participating in the trial. You should also be aware of the potential benefits and risks associated with the decision to participate. This includes the potential risks and benefits of both the standard treatment and the new treatment. You should also be aware of the potential costs and benefits of participating in the trial. You should also be aware of the potential costs and benefits of participating in the trial.
Questions to Ask

- What are my options for taking part in a clinical trial?
- What is the eligibility requirement?
- What does the trial involve?
- What is the trial studying and how does this relate to me?
- Who will be in charge of my care? Will I be able to see my own doctor or a doctor in my network?
- How often will I need to visit a physician’s office?
- What costs will I be responsible for?
- What are the likely side effects from the treatment? How will these possible side effects affect my daily life?
- Are there treatments to manage any effects?
- Will I need to be in a specific facility to receive the care if so, how often and for how long?
- Which costs will my insurance cover? What costs are paid by the company regarding your benefits?

Most Patients (And Doctors) Forget That It’s Just Not a Treatment.

There are lots of different types of studies that are happening in today’s healthcare and care examples. They range from the “clinical trial” to observational studies, such as those that make up the “translational research” area. For example, researchers may be identifying actions that help against disease, developing tools that help in diagnosing and diagnosing disease faster, investigating whether there are additional things that can add to a patient’s medical care to improve overall quality of life or reduce side effects of medical treatment. Sometimes studies are simply observational in nature and are recording trends or looking at what happens in clinical practice when you receive treatment. Some might be adding non-medical components to medical care to improve someone’s medical situation.

Clinical trials are not a treatment option. Some people think of clinical trials as the last resort or treatment option, but that is not the case. Clinical trials are designed to test new treatments, so they are not a cure. They are an opportunity to learn more about how to treat a disease, to learn more about how it progresses, and how it responds to existing treatments. Some clinical trials are testing new drugs, techniques, or combinations of treatments for those in mind:

- treatment trials: study new drugs, techniques, or combinations of treatments for those in mind:
- prevention trials: study ways to keep from getting a disease or its complications.
- screening trials: look for early signs of a disease or condition.
- diagnostic trials: compare new procedures with existing ones to decide which is best.
- quality-of-life trials: study ways to improve patients’ quality of life.
- supportive care trials: study ways to reduce the side effects of treatment.
- observational studies: describe long term health outcomes by monitoring data over time.

Only 16% of cancer patients report having been aware that possible trials were available. Even fewer were made aware by their doctor or specialist.

Clinical trials are not just for the people with cancer that have been diagnosed. Some trials are testing the effects of new treatments on disease, to learn more about how it progresses, and how it responds to existing treatments. Some clinical trials are testing new drugs, techniques, or combinations of treatments for those in mind:

- treatment trials: study new drugs, techniques, or combinations of treatments for those in mind:
- prevention trials: study ways to keep from getting a disease or its complications.
- screening trials: look for early signs of a disease or condition.
- diagnostic trials: compare new procedures with existing ones to decide which is best.
- quality-of-life trials: study ways to improve patients’ quality of life.
- supportive care trials: study ways to reduce the side effects of treatment.
- observational studies: describe long term health outcomes by monitoring data over time.

Clinical trials are not a treatment option. Some people think of clinical trials as the last resort or treatment option, but that is not the case. Clinical trials are designed to test new treatments, so they are not a cure. They are an opportunity to learn more about how to treat a disease, to learn more about how it progresses, and how it responds to existing treatments. Some clinical trials are testing new drugs, techniques, or combinations of treatments for those in mind:

- treatment trials: study new drugs, techniques, or combinations of treatments for those in mind:
- prevention trials: study ways to keep from getting a disease or its complications.
- screening trials: look for early signs of a disease or condition.
- diagnostic trials: compare new procedures with existing ones to decide which is best.
- quality-of-life trials: study ways to improve patients’ quality of life.
- supportive care trials: study ways to reduce the side effects of treatment.
- observational studies: describe long term health outcomes by monitoring data over time.

Clinical trials are not a treatment option. Some people think of clinical trials as the last resort or treatment option, but that is not the case. Clinical trials are designed to test new treatments, so they are not a cure. They are an opportunity to learn more about how to treat a disease, to learn more about how it progresses, and how it responds to existing treatments. Some clinical trials are testing new drugs, techniques, or combinations of treatments for those in mind:

- treatment trials: study new drugs, techniques, or combinations of treatments for those in mind:
- prevention trials: study ways to keep from getting a disease or its complications.
- screening trials: look for early signs of a disease or condition.
- diagnostic trials: compare new procedures with existing ones to decide which is best.
- quality-of-life trials: study ways to improve patients’ quality of life.
- supportive care trials: study ways to reduce the side effects of treatment.
- observational studies: describe long term health outcomes by monitoring data over time.

Clinical trials are not a treatment option. Some people think of clinical trials as the last resort or treatment option, but that is not the case. Clinical trials are designed to test new treatments, so they are not a cure. They are an opportunity to learn more about how to treat a disease, to learn more about how it progresses, and how it responds to existing treatments. Some clinical trials are testing new drugs, techniques, or combinations of treatments for those in mind:

- treatment trials: study new drugs, techniques, or combinations of treatments for those in mind:
- prevention trials: study ways to keep from getting a disease or its complications.
- screening trials: look for early signs of a disease or condition.
- diagnostic trials: compare new procedures with existing ones to decide which is best.
- quality-of-life trials: study ways to improve patients’ quality of life.
- supportive care trials: study ways to reduce the side effects of treatment.
- observational studies: describe long term health outcomes by monitoring data over time.
Questions to Ask

- What are my options for taking part in a clinical trial?
- What are the eligibility requirements?
- What is a phase I trial? How long will the trial last?
- What is the trial studying and how does this relate to me?
- Who will be in charge of my care? Will I be able to see my own doctor or a nurse in my network?
- How will I receive the therapy or treatment?
- What costs will my insurance cover? What costs are paid by the trial sponsor?

The Practical Side of Trial Participation

- In a clinical trial based on the medical issues of cancer care, you will participate in either a phase I trial, which involves observation, or a phase II trial, which involves experimental treatment. The role of a phase I trial is to evaluate whether a treatment is well tolerated by patients, whereas a phase II trial is designed to evaluate the effectiveness of a new treatment. If both trials prove promising, a phase III trial will be conducted to confirm these findings in a larger group of patients.

- Always check with your insurance company regarding your benefits before you enter a clinical trial.

Clinical Trials Are Not Just for Treatment

- Some people only think of clinical trials as a last resort treatment option. In fact, only about one-third of cancer patients are eligible for clinical trials. However, many cancer trials are exploring new ways to detect diseases such as breast cancer. Additionally, some trials are exploring new ways to detect diseases such as breast cancer.

- Some of the biggest challenges patients report when participating in clinical trials include:
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate

- The Patient Advocate Foundation brings together experienced advocates who can help guide you through the process of finding a clinical trial that is right for you.

Clinical Trials Are Definitely Worth a Second Look For Any Patient

- Some clinical trials target advanced cancer and require patients to be in good health. However, many patients with advanced cancer are still eligible for clinical trials, especially if they have tried other treatments and are looking for new options.

- Some of the best-known benefits of clinical trials include:
  - Patients have access to new, experimental treatments that are not yet available to the general public.
  - Patients receive higher-quality care than they would receive in a standard hospital setting.

- Patients are encouraged to ask questions and participate in the decision-making process. Ask your doctor or the clinical trial coordinator what you need to know.

- The Patient Advocate Foundation helps patients find clinical trials based on the medical reasons of the disease. Additionally, they can help you find a trial that is right for you and make sure you understand the requirements of participating in the trial.

- Some of the biggest challenges patients report when participating in clinical trials include:
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate
  - Difficulty making the decision to participate

- The Patient Advocate Foundation is a non-profit organization that helps patients find clinical trials based on the medical reasons of the disease. Additionally, they can help you find a trial that is right for you and make sure you understand the requirements of participating in the trial.

- The Practical Side of Trial Participation

- In a clinical trial based on the medical issues of cancer care, you will participate in either a phase I trial, which involves observation, or a phase II trial, which involves experimental treatment. The role of a phase I trial is to evaluate whether a treatment is well tolerated by patients, whereas a phase II trial is designed to evaluate the effectiveness of a new treatment. If both trials prove promising, a phase III trial will be conducted to confirm these findings in a larger group of patients.

- Always check with your insurance company regarding your benefits before you enter a clinical trial.

Clinical Trials: What Patients Want to Know

- Some people only think of clinical trials as a last resort treatment option. In fact, only about one-third of cancer patients are eligible for clinical trials. However, many cancer trials are exploring new ways to detect diseases such as breast cancer. Additionally, some trials are exploring new ways to detect diseases such as breast cancer.

- Some of the best-known benefits of clinical trials include:
  - Patients have access to new, experimental treatments that are not yet available to the general public.
  - Patients receive higher-quality care than they would receive in a standard hospital setting.

- Patients are encouraged to ask questions and participate in the decision-making process. Ask your doctor or the clinical trial coordinator what you need to know.

- The Patient Advocate Foundation helps patients find clinical trials based on the medical reasons of the disease. Additionally, they can help you find a trial that is right for you and make sure you understand the requirements of participating in the trial.

- The Practical Side of Trial Participation

- In a clinical trial based on the medical issues of cancer care, you will participate in either a phase I trial, which involves observation, or a phase II trial, which involves experimental treatment. The role of a phase I trial is to evaluate whether a treatment is well tolerated by patients, whereas a phase II trial is designed to evaluate the effectiveness of a new treatment. If both trials prove promising, a phase III trial will be conducted to confirm these findings in a larger group of patients.

- Always check with your insurance company regarding your benefits before you enter a clinical trial.

Clinical Trials: What Patients Want to Know

- Some people only think of clinical trials as a last resort treatment option. In fact, only about one-third of cancer patients are eligible for clinical trials. However, many cancer trials are exploring new ways to detect diseases such as breast cancer. Additionally, some trials are exploring new ways to detect diseases such as breast cancer.

- Some of the best-known benefits of clinical trials include:
  - Patients have access to new, experimental treatments that are not yet available to the general public.
  - Patients receive higher-quality care than they would receive in a standard hospital setting.

- Patients are encouraged to ask questions and participate in the decision-making process. Ask your doctor or the clinical trial coordinator what you need to know.

- The Patient Advocate Foundation helps patients find clinical trials based on the medical reasons of the disease. Additionally, they can help you find a trial that is right for you and make sure you understand the requirements of participating in the trial.

- The Practical Side of Trial Participation

- In a clinical trial based on the medical issues of cancer care, you will participate in either a phase I trial, which involves observation, or a phase II trial, which involves experimental treatment. The role of a phase I trial is to evaluate whether a treatment is well tolerated by patients, whereas a phase II trial is designed to evaluate the effectiveness of a new treatment. If both trials prove promising, a phase III trial will be conducted to confirm these findings in a larger group of patients.

- Always check with your insurance company regarding your benefits before you enter a clinical trial.