

Research Saves Lives

Approximately 10-20 percent of all breast cancers are diagnosed as triple negative breast cancer (TNBC). TNBC gets its name because it lacks the three receptors —estrogen (ER), progesterone (PR), and human epidermal growth factor 2 (HER2)—that are present in a majority of breast tumors. These receptors can be targeted with many current therapies. Because TNBC lacks all three receptors, it does not respond well to these therapies. TNBC can be more aggressive than other subtypes of breast cancer and is more likely to come back after treatment (recur).

TNBC is also more likely to effect young women, African-American women and people with a BRCA1 mutation. With few treatment options and no targeted therapies specifically for TNBC, more research is needed to better understand how this cancer develops and can be treated more effectively.

Read how Komen grantee Dr. Jennifer Pietenpol is working to find targeted therapies for TNBC in our Science Buzz series.



Learn more about triple negative breast cancer
<http://sgk.mn/1o4hJiG>

<http://sgk.mn/1hYpOUv>

Our Research Investment

More than **\$125 million** in over **190 research grants** and more than **30 clinical trials** focused on TNBC

What We're Investigating



Identifying and developing new therapies for TNBC and testing them in clinical trials



Developing strategies for preventing TNBC, including chemoprevention and lifestyle factors such as diet and exercise

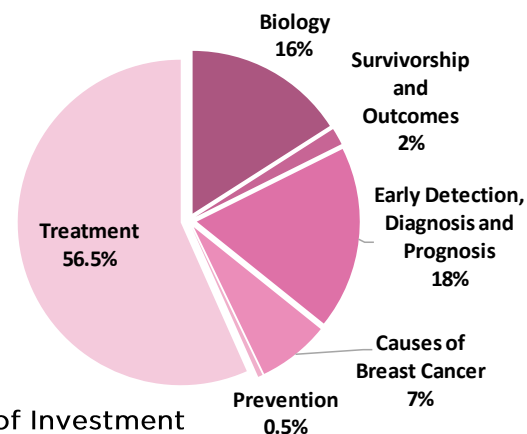


Understanding why African-Americans, young women and women with a BRCA mutation appear to be at higher risk for TNBC



Read about Komen grantee, Dr. Lisa Newman's work at the University of Michigan and in sub-Saharan Africa to uncover the factors that contribute to breast cancer disparities related to TNBC and African ancestry.

<http://sgk.mn/2vMoEgg>

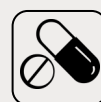


Topic Area of Investment

What We've Learned from Komen-funded research



There are at least six different subtypes of TNBC, each with different abnormalities, which may be treated using drugs that target these abnormalities.



A combination of various standard chemotherapies and a PARP inhibitor drug may be more effective at treating TNBC than chemotherapy alone.



A blood test that detects specific genetic biomarkers may be used to identify TNBC patients with BRCA mutations, resulting in earlier intervention and improved treatment strategies.



Learn more about breast cancer



More Komen-funded Research Stories



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