Nicole and Catrina Armstrong, Philadelphia, PA

At age 30, Catrina was diagnosed with bilateral breast cancer, which metastasized to her brain 18 months later. While she remained a true ray of sunshine through all of her surgeries and treatments, Catrina lost her battle to cancer in February 2012 at the age of 32. In the early stages of her cancer, when Catrina tested positive for a BRCA1 mutation, physicians urged her sister Nicole to be tested as well.

Nicole was only 24 at the time, an age when most young women are just beginning their adult lives. Nicole took nine months to prepare herself for what would be a positive test result. Although it was difficult to swallow, Nicole knew that she was armed with something her sister did not have: knowledge and information. Nicole became active with FORCE, attending seminars and conferences, and learning as much as she could about her options. Owing a debt of thanks - and her life - to her sister, Nicole has bravely scheduled her surgery for May 2012 and knows that Catrina will be with her in spirit and safely guide her through her surgery and recovery.

Annette Ramke, Philadelphia, PA

Before she was diagnosed at age 36, doctors told Annette her risk of breast cancer was so low as to be nearly negligible. Concerned, however, that something wasn’t quite right, she luckily listened to her body, sought out answers and found physicians who took her concerns seriously. Due to her young age at diagnosis, the pathology of her cancer, and a maternal aunt who had died of ovarian cancer, her oncologist recommended genetic counseling and testing which proved Annette had inherited a BRCA1 mutation. After completing chemotherapy and a bilateral mastectomy, Annette scheduled the recommended surgery to remove her ovaries. She was just 38 years old. To everyone’s shock, there were already tumors in her ovaries and Fallopian tubes. Another round of surgeries and chemotherapy treatments followed. It was an intense and challenging time but Annette emerged strong and vibrant, feeling immensely grateful to have the information she received via genetic counseling. Annette, now a holistic health coach, wanted to share and pay forward all she had learned about taking an integrative approach to cancer treatment and using food as medicine in cancer prevention and recovery and has co-authored the book, Kicking Cancer in the Kitchen: The Girlfriend’s Cookbook and Guide to Using Real Food to Fight Cancer, which is being published October 2012.

Raychel Adler, Sacramento, CA

No red flags were raised when Raychel’s mother was diagnosed with breast cancer at the age of 62. Nine months later, everything changed when Raychel’s sister, then 36, was also diagnosed with breast cancer. It wasn’t until eight years later when her sister’s cancer returned in the other breast that she tested positive for a BRCA gene mutation and began what would be a lifelong campaign to convince Raychel to be tested. Raychel lost both her mother and her sister to breast cancer.

After her two daughters were born, Raychel was ready. Three years ago she tested positive for a BRCA2 mutation. Having lost her mother and sister to this disease, she was ready to do things differently. Two years ago, she underwent a prophylactic mastectomy with reconstruction and five follow-up surgeries. Now she must make some hard decisions about her ovaries and future surgeries to continue to reduce her risk.

Grateful for the support she received from FORCE, Raychel co-founded the FORCE outreach group in Sacramento to help others who face similar choices and life-saving decisions.
Carey Fitzmaurice, Washington, DC

Carey inherited her BRCA mutation from her father, who was one of 12 children. His younger sister survived cancer at an early age and both of her daughters, Carey’s cousins, were diagnosed with breast cancer in their 30s. They were tested for a BRCA mutation but none was found. While they were enrolled in a medical study at Oxford University, a previously unrecognized mutation was detected in them.

When Carey learned about her family history in January 2006, she underwent genetic testing. By February, she had her first ovarian cancer symptom and by March, at age 37, she was diagnosed with stage III ovarian cancer. She had the same new mutation as her cousins.

Carey met FORCE executive director Sue Friedman at an Ovarian Cancer National Alliance Conference. Until Carey discovered the FORCE website, information about breast cancer risk after ovarian cancer had been scarce. Based on what she learned, Carey decided to have a prophylactic mastectomy. Unfortunately, at age 39, she was diagnosed with stage IIb breast cancer before her surgeries. After being told that her mutation had been found only in her family and was still not recognized, Carey enlisted her aunt to be tested as well—she also tested positive for the same mutation. Then the data were changed to include this specific mutation.

Today, Carey is taking oral chemotherapy for her ovarian cancer and dealing with a recurrence of breast cancer. She is a FORCE member and the president of Teal Toes, an organization that strives to raise awareness of ovarian cancer and its symptoms.

Carlette Knox, Philadelphia, PA

Carlette knew she was at risk for cancer before she ever felt a lump in 2009. Cancer was a topic that she and her four sisters had discussed because their mother survived breast cancer twice, and at the time was being treated for pancreatic cancer. When Carlette was diagnosed with breast cancer, genetic testing confirmed she had a BRCA mutation. She had a double mastectomy with reconstruction, chemotherapy, and then chose to have a prophylactic oophorectomy to reduce her risk of ovarian cancer.

After Carlette’s positive test result, three of her four sisters opted to be tested; her younger sister, just 25, tested positive. While there are many ways to look at the situation, Carlette focuses on the empowerment that results from being armed with information, saying, “One of the things you learn right away is that if you test positive, you can’t let the disease consume your life. You have to be on top of preventative care, but the focus needs to be on living your life.”

Heather Fineman, Chicago, IL

Heather’s grandmother lost her battle with breast cancer at 44 and her great-grandmother succumbed to the disease at 54. Both Heather and her mother tested positive for a BRCA genetic mutation. Within six months, Heather had a preventive hysterectomy, later followed by a double mastectomy and reconstructive surgery.

“At that time, there was no local organization to support women and their families dealing with hereditary breast and ovarian cancer,” says Heather. Research led her to FORCE, and she started a local group in Chicago that now has more than 300 members. Her experience led her to make a major career change, from marketing video games and software to working in patient support for a surgeon who specializes in breast reconstruction. “I really wanted to do something more,” she says. “Because I’ve been through it, I can really understand what the patient is experiencing.”

Shannon Marsh, Seattle, WA

When Shannon was 12, her parents noticed that her abdomen was abnormally swollen. She was diagnosed with a rare form of ovarian cancer leading to the removal of a grapefruit-sized tumor and her right ovary. In 1999, at the age of 33, Shannon learned that she carried a BRCA mutation after her father paid for her genetic testing because there were no living women on his side of the family - all died from breast or ovarian cancer by the age of 42.

In 2000, Shannon quit practicing law, became one of the first outreach coordinators for FORCE, and began full-time cancer research advocacy. After her father passed away from esophageal cancer, she became even more committed. “The questions that follow a positive result can feel overwhelming without the support of people who are going through the same thing. I felt it was crucial to assist others.” In 2003, Shannon had an oophorectomy to remove her remaining ovary, and in 2011, she underwent a prophylactic bilateral mastectomy.
Melissa Meighen, Chicago, IL and Jane Meighen, Akron, OH

Melissa was diagnosed with breast cancer in April 2006, the same weekend a van arrived to move her family from New York to Chicago. She had a lumpectomy and then decided that while she had chemotherapy treatment, she and her four-year-old son would stay with her mom, Jane, in Akron, Ohio for support. At the end of the summer, Melissa moved to her new home in Chicago and started her radiation treatments. She then also tested positive for a BRCA mutation.

Melissa immediately called her family and urged that they be tested. Thankfully, her younger sister tested negative, but Jane’s result was positive. At Melissa’s insistence, Jane researched and prepared for risk-reducing surgeries, but it took six months for her insurance company to approve the procedures. Jane finally had her bilateral mastectomy, reconstruction and hysterectomy/oophorectomy in May 2007. She was in disbelief when she learned during her post-operative appointment that early-stage breast cancer had been found in the pathology of both breasts. Her life had been saved by Melissa’s genetic testing and urging that her mother act upon her positive test results.

Initially, because Melissa only had a lumpectomy, she decided to undergo a double mastectomy and hysterectomy/oophorectomy to reduce her chances of another cancer diagnosis.

During this time, Melissa and Jane learned about FORCE. Jane shared this information with her twin (Melissa’s aunt), who was also a cancer survivor but never knew about a possible genetic mutation in the family. Looking back at their family medical history, they realized the connection - their father lost his mother to cancer when he was only 12, and lost an aunt at an early age to cancer as well.

On the evening of December 25, 2009, Melissa was rushed to the hospital with a pain in her side and was diagnosed with a rare form of ovarian cancer called primary peritoneal cancer. Once again, this incredible family rallied and supported each other. Today, Melissa has completed two courses of chemotherapy for her ovarian cancer. She is concentrating on “living her life” and giving back to FORCE and the women who helped her, and helping her mother make informed decisions during an overwhelming time.

Sue Friedman, Tampa, FL

In 1996, at age 33, Sue Friedman, D.V.M., practiced small animal medicine in south Florida when she was diagnosed “out of the blue” with breast cancer. At the time, she was unaware of familial risk factors for hereditary cancer. Reading an article about that topic after completing her treatment, Sue realized that she had several indications for a mutation. She pursued genetic counseling and in 1997 tested positive for a BRCA2 mutation.

Shocked that her health care team didn’t alert her to the possibility of being at high risk, and disappointed at having to make critical treatment decisions without knowing about the mutation, Sue acted so others could learn from her experience. She founded FORCE in 1999 to fill the information void for individuals and families with hereditary cancer, and to help them advocate for themselves. After five years as the organization’s executive director while maintaining her busy practice, Sue left veterinary medicine to direct FORCE full time. Since then, the organization has become an unequaled source of research, advocacy, support and information on risk management, prevention and awareness.

Amy Byer Shainman, West Palm Beach, FL

Amy’s grandmother and great-grandmother died young from breast cancer. Several of her father’s female cousins also had breast cancer. It wasn’t until Amy’s sister, Jan, was diagnosed and treated for both ovarian and uterine cancer in 2008 that the family learned of their BRCA1 genetic mutation, inherited from the father’s Ashkenazi Jewish descent.

Amy’s sister underwent chemotherapy for ovarian cancer at the same time that her dear friend, Kristin, was battling hereditary triple-negative breast cancer. Two BRCA cancer battles happening simultaneously altered Amy’s perspective on everything. Armed with knowledge, she opted for preventive surgeries to reduce her cancer risk. She credits Jan, Kristin and FORCE for saving her life.

In March 2010, Amy had a complete hysterectomy followed by a prophylactic mastectomy with reconstruction. After attending the 2010 FORCE conference, Jan also opted for a prophylactic mastectomy; breast cancer was found. She was treated and is doing well today.

Amy’s decision to become a FORCE outreach coordinator was a natural progression from her family’s experience and allows her to share her story combined with all of FORCE’s resources, to make a difference for others.
Annmarie Pickering, Shiloh, IL

Annmarie was adopted and raised by a wonderful family. They loved her as their own but could not answer the question her doctor asked: “Is there any cancer in your family?” When Annmarie was in college, she met her birth family but they did not discuss family medical history. Years later, after scheduling a procedure to have a suspicious cyst removed from her breast, Annmarie received a letter from her biological cousin saying she carried a BRCA2 mutation and that hereditary breast and ovarian cancer was “in the family.”

Annmarie’s cousin - whom she calls her “angel” - introduced her to FORCE. Today they are both members and are very close. A talented singer and songwriter, Annmarie also wrote “We are a FORCE,” a song especially for the hereditary breast and ovarian cancer community. Through her music, she gives a voice to everyone who has been touched by cancer.

Chelli Fishman and Stefanie Penner, Chicago, IL

Chelli and Stefanie’s mom was diagnosed with breast cancer at the age of 59. She was proactive and went for genetic testing, but was found to be BRCA negative. During that same summer of 2006, 36-year-old Chelli had her baseline mammogram, which was clear. Even though her mother was BRCA negative, Chelli worried about her paternal grandmother, who was diagnosed with breast cancer in her 40s and died at 54. Unaware that a BRCA mutation could be inherited from the father’s side, Chelli’s doctor told her not to worry.

Three years later, Chelli was diagnosed with bilateral breast cancer. While recovering from her double mastectomy, Chelli and Stefanie went for genetic counseling and testing. A month later, and before they received what would be a positive result for the BRCA2 mutation, Stefanie, then 35, was diagnosed with breast cancer after a routine mammogram. The family medical facts then became clear: of Ashkenazi Jewish descent, the sisters’ grandmother had died young of breast cancer, their father had prostate cancer, and many other relatives had breast or ovarian cancer.

The day after Chelli’s first chemotherapy appointment, Stefanie underwent her double mastectomy. Both then decided to have prophylactic oophorectomies to reduce their risk of ovarian cancer.

Today, Chelli and Stefanie strive to create awareness for hereditary breast and ovarian cancer, the importance of early detection and knowing one’s family medical history on both sides of the family.

Liza Talusan, Boston, MA

Liza first learned the term “BRCA” when her older sister, Mary, was diagnosed with breast cancer at the age of 36. Mary was healthy, vibrant and a new mother when she discovered the lump in her breast that turned out to be cancerous. Because of her age, her doctor recommended genetic counseling and testing. When Mary tested BRCA positive, her doctor strongly encouraged the rest of the family to be tested as well. Mary’s sisters Liza and Grace both tested positive for the mutation.

When Liza learned that she was BRCA positive, she had just finished watching her two-year-old daughter endure cancer treatment for a rare pediatric eye cancer. While she was in disbelief that there could be yet another cancer in the family, she knew she could take advantage of options to reduce her risk and hopefully avoid another cancer diagnosis. In January 2010, after a few years of surveillance, she decided to undergo a bilateral prophylactic mastectomy. Her sister Grace opted for prophylactic procedures as well and today both are “previvors” - survivors of a predisposition to cancer.

In the same way that her daughter taught her emotional strength through her own struggle with cancer, Liza believes that FORCE taught her to be empowered, knowledgeable and informed. Liza is a grateful previvor and an active FORCE volunteer.