

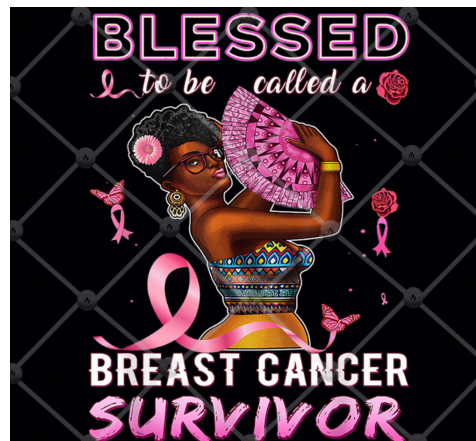
OCTOBER IS BREAST CANCER AWARENESS MONTH

Breast Cancer Death Rates Are Highest for Black Women—Again

October 3, 2022, American Cancer society

ACS researchers report and explain statistics about breast cancer in a new article in *CA: A Cancer Journal for Clinicians* and in *Breast Cancer Facts & Figures 2022-2024*.

Another study shows breast cancer kills more black women...



A new American Cancer Society (ACS) report finds that the death rate for [breast cancer](#) in the United States among women dropped 43% between 1989 when it peaked and 2020. During the last decade, [death rates](#) declined similarly for women of all racial/ethnic groups across

the US except for American Indians/Alaska Natives (AIANs), who had stable rates. However, Black women are still more likely to die from breast cancer than White women across the US, even though Black women have lower breast cancer incidence rates.

“We have been reporting this same disparity year after year for a decade. The differences in death rates are not explained by Black women having more aggressive cancers.

“It is time for health systems to take a hard look at how they are caring differently for Black women.”

—Rebecca Siegel, MPH, senior scientific director of ACS Cancer Surveillance and co-author of the study

These findings are published in “Breast Cancer Statistics, 2022” in [CA: A Cancer Journal for Clinicians](#), led by ACS cancer surveillance researcher [Angela Giaquinto, MSPH](#). Giaquinto and [Rebecca Siegel, MPH](#), as well as their department lead [Ahmedin Jemal, DVM, PhD](#), also produced the consumer-friendly companion, [Breast Cancer Facts & Figures 2022-2024](#). These reports provide detailed analyses of breast cancer occurrence and current information on known risk factors, early detection, and treatment.

Here's an overview of some key statistics from both reports.

New diagnoses of breast cancer continue slow increase in 2022.

Breast cancer is the most commonly diagnosed cancer among women in the US, after nonmelanoma skin cancer. It mostly affects women age 50 and older, who develop about 83% of new breast cancer cases and represent 91% of deaths from breast cancer. Half of the women who die from breast cancer in the US are age 70 or older.

[Men can get breast cancer, too](#), but this is much less common. In 2022, an estimated 287,850 women and 2,710 men will be diagnosed with breast cancer. An estimated 43,250 women and 530 men will die from the disease.

Breast cancer incidence rates have risen slowly in most of the past 40 years. During the most decade of data, 2010 through 2019, the rate increased by 0.5% a year. The increase is likely due at least in part to more [women having excess body weight](#) and the declining fertility rate of women in the US.

BUILD YOUR KNOWLEDGE

See [Understanding Cancer Research Terms](#). Get more out of ACS studies on epidemiology, statistics, genetics, and other complex topics with this glossary of research terms, explained in plain language for nonscientists.

The total fertility rate of a population is the average number of children born to a woman over her lifetime, and it's been found to be related to the [risk of developing breast cancer](#). Women who have not given birth to children or who gave birth to their first child after age 30 have a slightly higher overall risk for developing breast cancer later in life. Having many pregnancies and becoming pregnant before age 30 reduces a woman's risk of developing breast cancer.

The effect of weight and fertility rates seem to be limited to an increased risk of hormone receptor-positive breast cancer (HR+)—the most common type of breast cancer and the largest driver of increasing incidence rates. HR+ tumors are more likely to be detected early through mammography compared to HR- tumors, and they have higher survival.

Most new breast cancer cases are diagnosed at a localized stage, meaning they have not spread outside of the breast. These early-stage cancers are most often found during breast cancer screening and typically have a high rate of survival because treatment is more effective at this stage.

Black women still have a 4% lower incidence rate of breast cancer than White women but a 40% higher breast cancer death rate.

In this graphic, the breast cancer incidence rate (light pink bars) is highest in White women and lowest in Hispanic women. The breast cancer death-rate (dark pink bars) is highest in Black women, followed by American Indian/Alaska Native (AIAN) women, and lowest in Asian/Pacific Islander women. It's notable that Black and AIAN women both have a higher death rate than White women even though they both have a lower incidence rate for breast cancer than White women.

Breast cancer is the second leading cause of cancer death after lung cancer in women in the US overall, but it's the leading cause of cancer death in Black and Hispanic women.

During 2016 through 2020, the breast cancer incidence rate was higher in Black women compared to White women in only 4 states: Alabama, Louisiana, Mississippi, and Virginia. In contrast, the breast cancer death rate was higher for Black women than White women in every state except Washington.

“Geographical disparities in breast cancer incidence and mortality are due to the differences in the prevalence of risk factors and access to screening and treatment. All of these are influenced by a woman’s socioeconomic status and her

distance to medical services, as well as government policies in the state where she lives, such as whether it expanded Medicaid.”

—Rebecca Siegel, MPH

Overall, the pace of the reduction in female breast cancer death rates is slower than it was during the 1990s and 2000s. Still, the 43% overall decline in mortality translates to 460,000 deaths avoided between 1989 and 2020. This decline is attributed to earlier detection through [breast cancer screening](#) and increased awareness of the disease as well as improvements in treatment.

The racial disparity in deaths from breast cancer has remained at 40% or higher for a decade.

- Black women younger than age 50 had a death rate that was twice as high as White women that age. Plus, Black women are more likely than White women to die of breast cancer at any age.
- AIAN women were 17% less likely to be diagnosed with breast cancer than White women but 4% more likely to die from the disease.

Part of the reason the breast cancer death rate is not dropping as fast as it has in previous years is because screening rates aren't increasing and too few women are

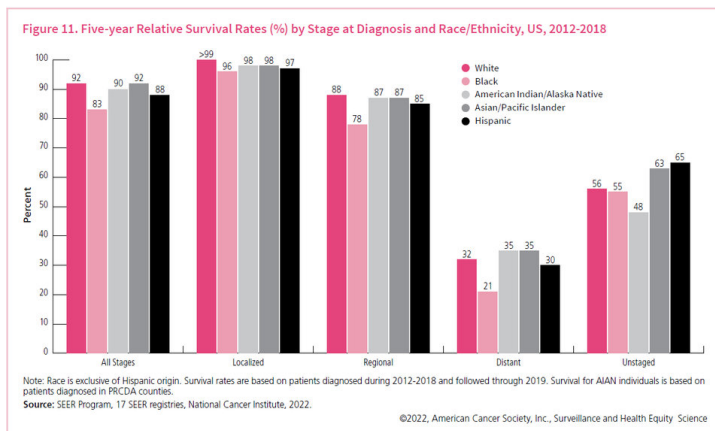
receiving timely and high-quality treatment after they're diagnosed with breast cancer.

The study authors point out that “progress against breast cancer mortality could be accelerated by mitigating racial disparities through increased access to high-quality screening and treatment via nationwide Medicaid expansion and partnerships between community stakeholders, advocacy organizations, and health systems.”

“Coordinated and concerted efforts by policy makers, healthcare systems, and providers are needed to provide optimal breast cancer care to all populations and reduce breast health disparity and accelerate progress against the disease. These efforts include expansion of Medicaid in the 12 non-expansion states and increased investment for new early detection methods and treatments.”

—Ahmedin Jemal, DVM, PhD, ACS senior vice president of Surveillance & Health Equity Science

Black women have the lowest survival for all subtypes of breast cancer.



In this graphic, the bars show the percentage of women who are still alive 5 years after a cancer diagnosis based on the cancer's stage when they were diagnosed (listed along the bottom) and their ethnicity (shown by color). At each stage, Black women, who are represented by the light pink bars, have the lowest survival. **Black women who develop breast cancer are less likely than any other race to be alive 5 years after their diagnosis, regardless of when their cancer's when discovered or what type it is.**

On January 1, 2022, more than 4 million women were living in the US with a history of invasive breast cancer. Some of them were cancer-free, while others still had evidence of cancer and may have been undergoing treatment.

- Black women have the lowest 5-year relative breast cancer survival rate compared to all other racial/ethnic groups for every stage of diagnosis and every breast cancer subtype.
- The largest disparities in 5-year relative survival are for regional and distant stage breast cancer. Only 78% of Black women are living at least 5 years after their diagnosis of regional stage breast cancer compared to 88% of White women. For distant stage, the gap is slightly larger – 21% versus 32%

- There is a 6% to 8% gap in 5-year survival between Black and White women for every breast cancer subtype.

Up to about 30% of breast cancers may be preventable with changes in lifestyle.

About 30% of breast cancer diagnoses are linked to risk factors that women may be able to change—such as [excess body weight](#), [physical inactivity](#), and [alcohol intake](#).

Women can help lower their risk for developing breast cancer by being active, maintaining a healthy body weight, and limiting alcohol. They can also help lower their risk of death from breast cancer by talking with their doctor about how often to get a mammogram, sticking with that schedule, and promptly following up on any abnormal results. Following [American Cancer Society guidelines for breast cancer screening](#) can help women find breast cancer earlier, when treatments are more likely to be effective.

The advocate affiliate of the ACS, the American Cancer Society Cancer Action Network (ACS CAN) continues to make efforts to close this persistent gap in screening.

“Lawmakers can and must do more to address the unequal burden of breast cancer among Black women, including increasing funding for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), a program jointly funded by federal and state governments that helps improve access to lifesaving screenings for these cancers.”

—[Lisa A. Lacasse](#), ACS CAN president

- [Helpful resources](#)
- [For researchers](#)

[All Facts & Figures Publications](#)

[Breast Cancer ACS Research Highlights](#)

[Researcher Studies Current Breast Cancer Screening Guidelines for Adult Survivors of Childhood Cancer](#)

[45 Minutes/Day of Physical Activity May Help Prevent Some Cancers](#)

[Expert Panel: Physical Activity Helps Prevent Cancer and May Help Cancer Survivors Live Longer](#)

[US States Vary in How Drinking Alcohol Affects Cancer Diagnoses and Deaths](#)

Potential pay increase for Disable Veterans & Retirees due to inflation in 2023

Article: Military.com

Author: Amy Bushatz 23 Sep 2022

Veterans receiving [disability pay](#) from the [Department of Veterans Affairs](#) and military retirees will likely get record monthly check increases for 2023 thanks to the pace of inflation, according to a new estimate. The annual VA disability pay and [military retirement](#) cost-of-living pay adjustment, known as COLA, is typically tied to the Social Security rate change, which will likely be announced in October. An [early projection](#) based on national inflation data by The Senior Citizens League (TSCL), a nonpartisan senior advocacy nonprofit, estimates rates will rise by 8.7%. That's slightly lower than the 9.6% estimate made by officials at that organization in August. Estimates are based on year-to-date data released by the Department of Labor. Despite the slight estimate dip, the increase would still be the highest veterans and seniors have seen since 1981, when it went up 11.2% in response to inflation at the time, according to a TSCL press release. If the 8.7% materializes for 2023, military retirees would see an average increase of more than \$219 in their monthly retirement checks. Veterans receiving disability compensation from the VA also would see their monthly disability payments increase, with the average monthly amount going up by more than

\$136. The [VA says](#) nearly 5.2 million veterans receive disability compensation, with an annual benefit of \$18,858 as of 2021. According to the [Defense Department](#), there are around 1.87 million military retirees, who had an annual average retirement payment of \$30,265 in 2020, the most recent year for which data was readily available. The annual Social Security COLA increase is based on the Consumer Price Index (CPI), which is measured by the Department of Labor. The department takes a snapshot of the costs of a select group of goods and services and compares those costs to the previous year. If there is an increase, retirees and many others receiving government benefits see a bump in their monthly payments for the upcoming year. If those costs go down, the government payments will remain the same in the upcoming year. TSCL's estimate is based on the CPI through July. But with several months left to go, the ultimate increase could vary slightly from the projection. For example, if inflation continues to increase, the COLA raise could be as high as 10.01%, they said. If inflation falls below the recent average, the increase could dip. The anticipated record increase would be the second year running of such bumps. [For 2022](#), the raise was 5.9%, which followed an average 1.5% increase over the 10 years prior.

Changes in Pharmacy: estimate 15,000 pharmacies leaving Tricare

Thousands of independent and community pharmacies are poised to be dropped from [Tricare](#)'s pharmacy network next month in a move advocates say could leave patients in rural areas with few options to get prescriptions filled.

Effective Oct. 24, 14,963 retail pharmacies will no longer participate in Tricare's pharmacy network, Defense Health Agency spokesperson Peter Graves confirmed in an emailed statement.

"Despite this change, the Tricare retail network will continue to meet or exceed Tricare's standard for pharmacy access," Graves added. "Beneficiaries will continue to have many convenient, local in-network options for filling their medications, including those beneficiaries in rural locations."

23 Sep 2022

Military.com | By [Rebecca Kheel](#)

SB 1209 Signed by Governor Newsome

- [Introduced in Senate](#)
Feb 17, 2022
- [Passed Senate](#)
May 25, 2022
- [Passed Assembly](#)
Aug 25, 2022
- [Became Law](#)
Sep 28, 2022

Sentencing: Members of Military: Trauma.

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ABSTRACT

Existing law requires a court, if it concludes that a defendant convicted of a felony offense is or was a member of the United States military who may be suffering from sexual trauma, traumatic brain injury, post-traumatic stress disorder, substance abuse, or mental health problems as a result of the defendant's military service, to consider that circumstance as a factor in mitigation when imposing a sentence. Existing law allows a defendant who is currently serving a felony sentence and meets these criteria to petition for resentencing if those criteria were not considered at the time of sentencing and the person was sentenced prior to January 1, 2015.

This bill would allow a defendant meeting these criteria to petition for recall of sentence and resentencing, as specified, without regard to whether the defendant was sentenced prior to January 1, 2015. The bill would also exclude from special consideration and from resentencing, any person convicted of, or having a prior conviction for, certain violent and sexual offenses.