

# What's News

WELCOME TO THE 2025 AUTUMN EDITION

Welcome to the Autumn 2025 edition of What's News, where we bring you the latest updates, stories, and achievement from Breast Cancer Research Centre-WA.

On [Page 2](#), hear from our CEO, Sarah Fordham, elaborates on our great start to the 2025 and BCRC-WA updates. Alongside this, we're thrilled to share that BCRC-WA has a new staff member, Alison, clinical psychologist.

[Page 3](#), This article highlights iPrevent, a tool for assessing breast cancer risk and prevention, and the Age Gap Tool, which helps clinicians tailor treatment for older patients. Both enhance informed decision-making in prevention and care.

On [Pages 4-5](#), we bring you Alix's Story of Hope. She opens up about the challenges of treatment, the difficult decisions she has faced, and the impact of multiple surgeries on her life. All while, managing motherhood.

On [Page 6](#), we share targeted therapies updates of 2025 and how advances in clinical trials can shape the breast cancer treatment landscape.

Multi-disciplinary meetings are Global best practice, [Page 7](#), where we explain the power of teamwork and unique advantage of BCRC-WA weekly meetings.

On [Page 8](#), we introduce our will-writing partnership with Safewill, offering discounted wills and special offers to make planning for the future more accessible and affordable for our community.

On [Page 9](#), we invite metastatic women to join our PYNKS support group for connection, support, and fun events. We also introduce our new Ambassador Program, welcoming volunteers, advocates, and supporters to help make a difference.

We celebrate our fundraising events so far on [Page 10](#), highlighting the incredible community whose dedication and efforts continue to support our cause. From morning teas to ocean swims, their commitment to our cause is always inspiring.

For those who followed our South32 Rottneest Swim journey, [Page 11](#) features a recap of this inspiring event and highlights the incredible fundraisers who made a difference.



**SARAH'S**

# Note

**We are proud of our strong start to the year, with clinical trial drugs being added to the PBS, record-breaking fundraising from the Rottneest swim, and the opportunity to offer even greater support to our patients.**

At the Breast Cancer Research Centre WA, we are incredibly fortunate to have a dedicated, multidisciplinary team of specialists committed to providing the best possible care for our patients. Each week, our clinicians come together for what we call multidisciplinary meetings (MDMs), where they discuss individual cases, ensuring every patient benefits from collective expertise and collaboration. This clinician-led, best-practice approach is a cornerstone of our comprehensive breast cancer centre, allowing us to provide the highest standard of care to our community. In this edition of our newsletter you will learn more about the MDMs.

This month, we are also addressing an important question we often hear from our patients: "How can I update or create my will?" Many patients express a desire to plan for their future and leave a meaningful legacy.

To make this process easier, we are proud to announce our new partnership with Safewill, an Australian organisation that provides access to qualified lawyers for creating or updating wills at a discounted rate of 50% off for our patients and their families.

Including a bequest in your will is a wonderful way to leave a lasting impact. Bequests are generous gifts left to charities, they help organisations like ours continue to advance research, provide essential services, and support patients on their breast cancer journey. We encourage you to learn more about Safewill and consider leaving a gift that will help us continue our vital work for years to come.

Thank you for being part of our community and supporting our mission to provide world-class care and research in the fight against breast cancer.

**Warm regards,**  
**Sarah Fordham**  
CEO, Breast Cancer Research Centre WA

## NEW CLINICAL PSYCHOLOGIST

# Alison Dougall

CLINICAL PSYCHOLOGIST  
DipHlthSci (Nursing) BA(Hons) MPsych



**Welcome, Alison! We're beyond grateful to have Alison, our new clinical psychologist, join the BCRC-WA team. With her expertise, we can continue providing bulk-billed psychological support for patients and families facing breast cancer.**

Alison has 20 years of experience as a psychologist, largely in private practice, with extensive experience in women's health. She also has a background as a Registered Nurse (with qualifications and experience in Sexual and Reproductive Health). Alison works collaboratively with clients, utilising a range of evidence-based therapies to support women through breast cancer. This includes helping them manage the ripple effects or "fall-out" that are often associated with serious health challenges. Areas of special interest include working with menopausal changes, anxiety (including the fear of cancer recurrence or spread), mortality issues, and the impact of past trauma and adversity on current health issues. Alison has taught an evidence-based mindfulness program for many years, and loves sharing these skills when it's a good fit for clients.

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## TOOL FOR BREAST CANCER RISK ASSESSMENT

iPrevent™ is a breast cancer risk assessment and risk management decision support tool designed to facilitate prevention and screening discussions between women and their doctors

It will take approximately 30 minutes to complete iPrevent. You will be able to download a personalised report that you can discuss with your doctor.

iPrevent will ask about:

- Your own medical history, including your height and weight and the result of any breast biopsy you have had
- Details about your family history of cancer (including your parents, grandparents, children, brothers, sisters, aunts, uncles, nieces and nephews). This includes the approximate ages at diagnosis and year of birth for each of those relatives who have had breast, ovarian, pancreatic or prostate cancer

# iPrevent



Scan Me  
for iPrevent Tool questionnaire

## iPrevent



## THE AGE GAP DECISION TOOL

The Age Gap Online Tool is a valuable resource designed to help guide treatment decisions for women over 70 diagnosed with early hormone positive breast cancer.

Developed using a robust mathematical model, the tool is based on data collected from thousands of women diagnosed between 2002 and 2012 through the UK cancer registration service.

By analyzing real-world patient outcomes, the tool predicts likely treatment results, providing estimates tailored to individual cases. However, like all predictive models, the Age Gap tool offers estimates rather than absolute predictions, as individual patient outcomes may vary. It is designed to be used alongside expert clinical guidance, incorporating a patient's medical details, treatment options, and personal preferences to support informed decision-making.

By fostering shared decision-making between patients and healthcare professionals, the Age Gap Online Tool empowers older women with breast cancer to explore personalised treatment pathways that align with their health needs and quality of life priorities.



*For some elderly patients, endocrine treatment for hormone positive early breast cancer may be a suitable alternative to surgery. The Age Gap decision tool provides a useful guide which may aid in patient counselling and decision making.*

**Dr Ran Li**  
ONCOPLASTIC BREAST SURGEON



ALIX'S

# Story

In the days leading up to NYE 2021 I booked an appointment to see my GP. For the past few months I hadn't been feeling right, it was something I couldn't figure out until I felt a pea size lump in my underarm whilst having a shower. I wasn't too concerned as I put it down to an issue with my 10 year old implants, perhaps a rupture. My GP, Dr Dhammika Perera agreed and I was sent for an ultrasound. This showed that a lesion had developed. At the ultrasound I was then rebooked a couple of days later for a biopsy. Given the time of year I didn't think I'd hear back until early Jan. I was mid workout at the gym when I got the phone call from my very serious sounding GP to come in and see her today. The biopsy confirmed a positive result of cancer.

She has been a wonderful guide and source of comfort from the outset in what proved to be the beginning of a very difficult journey.

It was definitely not what a 34 year old mother of three young children wanted to hear but it strangely bought relief as I knew my body had been trying to tell me something. My GP had managed to get me an appointment with eminent surgeon Dr Diana (Di) Hastrich and oncologist Dr Hilary Martin to discuss treatment. After a secondary biopsy result proved I had Inflammatory invasive ductal carcinoma ERPR+ HER2- node positive. This biopsy was preceded by multiple scans and testing to both confirm and elicit an accurate diagnosis for a roadmap moving forward to treatment.

After further discussions with Di, I decided to irrevocably commit to a double mastectomy to ensure I was only ever going to go down this pathway once. With three children in mind, I wanted to be certain this life event would not steal anything further from me in the future.

## Treatment

My treatment began with 8 rounds of chemotherapy in January 2022, followed by a double mastectomy and node clearance in June. I also undertook genetic testing which came back with a positive BRCA 2 gene mutation diagnosis.

As a result my entire family enjoyed the opportunity to be tested for the same genetic disorder and take appropriate action in accordance with any results that generated. A course of action I am pleased to have been able to make known to them. In a negative environment I am happy to have been able to make this generational change available.

Post-surgery, I had expanders put in and unfortunately had three infections in my left side so it wasn't until March 2023 that I was able to have my implants put in place. On referral from Ed, I was extremely fortunate to meet Consultant Infectious Diseases Physician Dr Duncan McLellan who investigated, tracked and prescribed an exact antibiotic to deal precisely with the infections. These were problematic due to allergic reactions to standard prescriptions.

I was very blessed to have Dr Ed Van Beem as my reconstructive surgeon, not only is he an amazing surgeon but also a lovely man. Once the infections were completely resolved Ed was able to successfully complete the reconstructive surgery. Apart from some surgical "tweaks" I have enjoyed a completely satisfactory result and outcome.

## Difficult Decisions

In February 2023, I underwent a preventative total hysterectomy (bilateral salpingo-oophorectomy) due to my BRCA diagnosis. This was again, a decision I took wholeheartedly to ensure that any residual opportunity for a cancerous event to manifest was removed.

I would like to acknowledge the brilliant medical team I had around me throughout this life changing event, their support, wisdom and love they constantly demonstrated when I didn't even know the questions to ask. Additionally, my breast nurse Cath Griffiths and wound specialist Vanessa Morris were both instrumental and an endless source of comfort in their professional and personal expertise.

Further, I would like to confirm the wonderful professional support of Madeleine Stockden (lymphoedema, oncology and scar management) who has been of paramount importance in recovery and management of post-operative issues. She has encouraged and directed me through her experience to a better and healthier lifestyle in the gym and at home through personal involvement in cancer support events. (Pictured page 4. Pink Triathlon).

## Motherhood

Difficult times do make for strange bedfellows, and I raise my hand to salute the many "breasties" I have made along the road through surgery to recovery and I have no doubt they are bonds that this life will not break. Families should never be taken for granted as I discovered on this journey and unconditionally thank my parents and family for their constant love and input.

While progressing through treatment my many friends and the support they gave us in helping to manage my children and keeping their little lives as normal as possible....soccer training, meals, school pickups, sleep overs and the many small things that keeps little lives free from stresses they don't understand.

As a woman who enjoys the thrill of fashion and current trends cancer is not a place of any joy as we lose one of the principal assets we enjoy most. To watch your hair slowly disappear on the shower floor is deeply saddening and brings the reality of what you are facing home with force.

Sam (Winter Grace Hair Artistry) thank you to you and the skillset you bring to cancer patients and helping us to realise the fading beauty we can still enjoy as it gently dissipates. To be able to lose your hair and still have it styled magnificently (mine is a "Penny" cut...with love) is beholden to your talents.

## Today

March 2023 my husband left me and our three children. Despite being a solo parent it has not diminished the joys of being a mother and a parent and raising three healthy children.



*To watch your hair slowly disappear on the shower floor is deeply saddening and brings the reality of what you are facing home with force.*



**Disclaimer: This story/article was written by the patient, sharing their personal experience with breast cancer.**

# What's New?

## TARGETED THERAPIES IN 2025

**Breast cancer remains one of the most common malignancies affecting women worldwide. Advances in molecular biology and precision medicine have significantly shaped the treatment landscape. In 2025, targeted therapies continue to revolutionize breast cancer care, offering improved outcomes and personalised approaches to treatment.**

### Novel Antibody-Drug Conjugates (ADCs)

ADCs have emerged as a powerful weapon against breast cancer. They are designed to target a receptor which is over-expressed on breast cancer cells and deliver chemotherapy directly to the cancer cell. Recent approvals include:

- Datopotamab deruxtecan: an innovative antibody-drug conjugate, the TROPION-Breast01 trial demonstrated its effectiveness in improving outcomes for patients with this subtype of breast cancer
- Sacituzumab govitecan (Trodely): Now a standard for metastatic triple-negative breast cancer (mTNBC), showing significant survival benefits.

### PARP Inhibitors

Poly (ADP-ribose) polymerase (PARP) inhibitors target BRCA-mutated cancers. Recent updates include:

- Olaparib: Expanded use in germline BRCA1/2-mutated early and metastatic breast cancer.
- Combination Strategies: Studies are exploring PARP inhibitors with immune checkpoint inhibitors for synergistic effects.

### HER2-Targeted Therapies

HER2-positive breast cancer has seen remarkable advancements:

- Tucatinib: A HER2-specific tyrosine kinase inhibitor (TKI) used in combination with trastuzumab and capecitabine for brain metastases.
- Trastuzumab deruxtecan (Enhertu): Expanded indications for HER2-low breast cancer, demonstrating efficacy in patients previously considered HER2-negative.

### CDK4/6 Inhibitors

CDK4/6 inhibitors, such as palbociclib, ribociclib, and abemaciclib, remain a cornerstone for HR+/HER2- advanced breast cancer. Recent studies have focused on their role in early-stage breast cancer:

- NATALEE Trial: Demonstrated the efficacy of ribociclib in reducing recurrence risk in early HR+/HER2- breast cancer.
- The MONARCHE trial: Demonstrated that adding Abemaciclib to standard endocrine therapy significantly improved outcomes for patients with hormone receptor-positive, HER2-negative early breast cancer at high risk of recurrence.

### PBS Scheme Drug addition announcement

Additionally, a major milestone was reached with the announcement of Olaparib being added to the PBS (Pharmaceutical Benefits Scheme) under Medicare, ensuring greater accessibility for eligible patients in Australia.



*Targeted therapy allows clinicians to better tailor treatment to the individual patient which is a must in the current era of personalised medicine. Olaparib is now available on the PBS for patients with BRCA1 or 2 mutation with high risk early breast cancer or metastatic breast cancer which has the potential to change outcomes for a huge cohort of patients.*

*It is thanks to the research studies showing the effectiveness of new medications which leads to PBS approval underscoring the importance of clinical trials as we aim for better outcomes for all patients.*

**Dr Brendan Kirwin**  
ONCOLOGIST

**Disclaimer: The information provided here is general in nature and should not replace professional medical advice. Always consult your doctor or a qualified healthcare professional for guidance specific to your health.**

# Multidisciplinary Meeting?

At BCRC-WA, we are dedicated to providing clinical, evidence-based, and multidisciplinary care that prioritises the well-being of our patients. We conduct weekly Multidisciplinary meetings (MDM) for new and ongoing cases. The MDM approach is global best practice by emphasising the power of teamwork to achieve outcomes that go beyond what any individual could accomplish alone. In particular, cross-disciplinary teams offer a unique advantage, as they harness a broad range of knowledge, skills, and abilities. These collaborative discussions bring together surgeons, oncologists, breast physicians, pathologists, radiographers, clinical psychologists, genetic counsellors, and specialised nurses, serving as a cornerstone of patient-centred care in managing complex conditions like breast cancer.

## HOW A TYPICAL MDM OPERATES:

### Case Presentation:

The meeting begins with the oncologist or surgeon presenting the patient's case. This includes: Key details such as age and background information, current status and treatment history.

### Pathology Review:

The pathologist shares the most recent pathology results, providing insights into tumor biology, receptor status, and any other relevant findings.

### Radiology Analysis:

The radiologist presents the latest imaging scans, highlighting findings and offering an analysis. Input from surgeons, oncologists, and other specialists helps ensure the imaging is interpreted in the broader context of the patient's treatment plan.

### Collaborative Discussion:

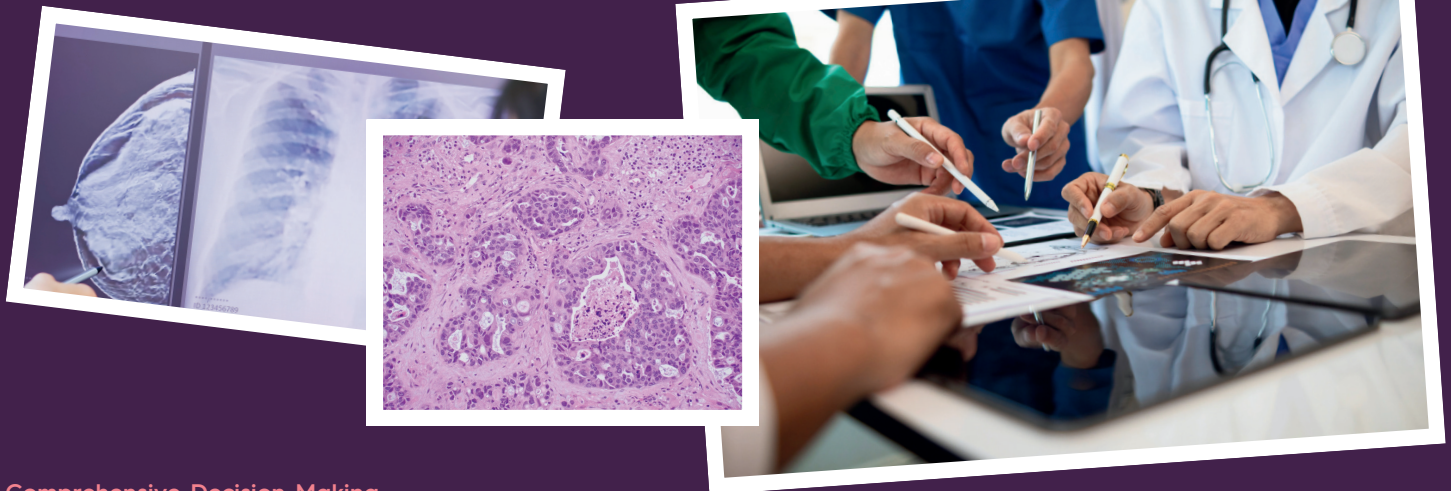
A discussion follows among the team, including surgeons, oncologists, radiologists, and breast care nurses, to evaluate the next steps. Topics include: potential treatment options (e.g., surgery, chemotherapy, radiations targeted therapy) or any adjustments needed based on the most recent results and patient needs.

### Nursing Coordination:

Specialised Breast care nurses, acting as case managers, contribute insights about the patient's overall well-being and logistical considerations. They ensure plans are practical and address both clinical and psychosocial needs, including scheduling the next appointments.

### Genetic Counselling Referrals:

If the patient meets the criteria for genetic counseling, the genetic counsellor is brought into the discussion to address familial risk factors and hereditary considerations.



## Comprehensive Decision Making

MDMs bring together a team of specialists—surgeons, oncologists, breast physicians, genetic counselors, pathologists, radiographers and specialised nurses—who collaboratively review each case. This diverse expertise ensures every aspect of a patient's diagnosis and treatment is considered. By combining input from multiple disciplines, MDMs enable the creation of highly individualised care plans. This approach considers not only the clinical aspects of the disease but also the patient's unique needs, preferences, and circumstances.

## Support Beyond Medicine

The inclusion of genetic counsellors, specialised nurses & clinical psychologists ensures that patients receive holistic care, addressing both medical and emotional aspects of their journey. Clinical psychologists play a critical role in helping patients cope with the stress, anxiety, and depression that often accompany a breast cancer diagnosis. By integrating psychological care into MDM discussions, we ensure emotional well-being is prioritised during challenging moments, such as navigating treatment difficulties, processing tough news about treatment updates, and addressing the need for support within the family at home.

Please note that you will be notified if your case is being discussed.

# Will-Writing

## PARTNERSHIP



# Safewill

We're pleased to announce our new partnership with Safewill, helping to make will-writing more accessible and affordable for our community.

Through this partnership, Safewill is offering an annual 50% discount on will-writing services, along with exclusive Free Wills Weeks and Free Wills Months throughout the year. Every will created using Safewill's platform is reviewed by an Australian legal team, ensuring accuracy and peace of mind. By planning for the future, you can protect what matters most while also leaving a lasting impact. Stay tuned for more details on how you can take advantage of this incredible initiative.

Safewill is supported by our award-winning affiliate law firm Safewill Legal, an industry leading specialist Wills and Estates practice based in Sydney and operating Australia-wide. Safewill Legal are also a leading Probate and Estates practice, offering low cost and fixed fee probate and estate administration services to support and guide you through this complex legal process.



### Gifts in Wills

Leaving a gift in your will is a powerful way to make a lasting impact. Your generous contribution will help bring us one step closer to a world without breast cancer, offering hope and healing to countless individuals and families.

It is easy to leave a gift in your Will to support the work of BCRC-WA for future years. We encourage you to seek legal advice to ensure that your Will is valid and will achieve everything that you wish.

It is important to firstly consider your family and special friends and to inform them if you decide to leave a gift (bequest) to BCRC-WA. For further information, you can contact the Law Society in your State or Territory to obtain a list of the lawyers near you who specialise in Wills and Estates if you do not already have a legal adviser.

## Key Dates

Safewill offers two Free Wills Weeks, and BCRC-WA hosts a Free Wills Month.

FREE WILLS WEEK	March 17th-24th
FREE WILLS WEEK	September TBC
FREE WILLS MONTH	April

scan  
here



or visit [www.safewill/bcrc-wa/](http://www.safewill/bcrc-wa/)



# JOIN THE

# PYNKS IN 2025



PYNKS is a supportive social group for patients with metastatic or advanced breast cancer

- Monthly coffee catch-ups at Kings Park
- Fun activities and workshops like candle making and laughing yoga
- Education programs



To join the PYNKS email [caryn.fong@bcrc-wa.com.au](mailto:caryn.fong@bcrc-wa.com.au) or visit our website [www.bcrc-wa.com/support/pynks/](http://www.bcrc-wa.com/support/pynks/)

## BECOME AN

# Ambassador

BCRC-WA are proud to announce our new ambassador program for 2025! We are seeking individuals who would like to get involved, raising awareness and promoting our cause to make a real difference in the breast cancer community.

You can become a Community Ambassador and contribute in a way that feels right for you. Whether it's public speaking, attending events, volunteering, sharing your story of hope, or being interviewed – every effort helps support our mission.

Register your interest via "Ways to Get Involved" [www.bcrc-wa.com.au](http://www.bcrc-wa.com.au) or email [info@bcrc-wa.com.au](mailto:info@bcrc-wa.com.au)



KICKING FOR WINE

Currently Raised: \$7,800

A huge shoutout to Katy and Sheridan for taking on the Euroz Hartley's Port to Pub Rottneest Duo Swim on March 15th, all while raising funds for Breast Cancer Research Centre WA—a cause incredibly close to their hearts.

With both of them personally touched by breast cancer through their mums, aunts, and nanas, this challenge is more than just a swim—it's a tribute to the strength and resilience of those impacted. Even more inspiring, their entire team, including their paddler and skipper, is made up of incredible women! Girl power at its finest!

So far, they've already raised an amazing \$5,000, and their fundraising efforts will continue right up until race day.



KATHLEEN'S PINK AFTERNOON TEA

Raised: \$1,600

A huge thank you to Kathleen and her wonderful family for hosting their very own fundraiser. On February 6th, they brought together loved ones for a truly special Pink Afternoon Tea, turning a simple gathering into an incredible show of support.

What began as a simple idea from her daughter—to gather sisters and nieces for an afternoon tea—quickly blossomed into an incredible display of love, support, and community spirit.

Their heartfelt efforts raised an outstanding \$1,600 for Breast Cancer Research Centre WA, helping us continue our vital work in research, patient care, and support services.





# SOUTH32 ROTTNEST CHANNEL SWIM

The 35th annual South32 Rottnest Channel Swim took place on Saturday, 22 February 2025, with the earliest waves departing from Cottesloe Beach (Mudurup) at 5:45 AM. BCRC-WA fundraisers took on the iconic 19.7km open water swim to Rottnest Island (Wadjemup). They made an incredible impact, coming 4th overall in the charity leaderboard, raising an impressive \$23,608 to support breast cancer research and patient care.

The 2025 Rottnest Channel Swim proved to be both a test of endurance and an incredible success for charity fundraising. While conditions were challenging, with some rough patches along the way, just enough east in the wind provided a helpful push across the channel. Swimmers battled through but were rewarded with great weather, making for a memorable day on the water.

Honourable mentions go to "The Bulldogs—Harrison, Lincoln, Tate, and Tom"—raised an outstanding \$4,079, pushing through the tough conditions with determination. Meanwhile, the "Mar Mystics" swam in memory of their dear padel teammate, Marloes Mars, raising an inspiring \$3,730 in her honor. An incredible tribute!

## SWIMMERS RAISED

# \$24,000



Pictured: The Bulldogs



In Memory of Marloes Mars

Pictured: Mar Mystics



Pictured: Girls Gone to Rotto



Pictured: McCarthy Family



Pictured: McCarthy Support Team

### FUNDRAISING SPOTLIGHT

#### McCarthy Family & the Girls Gone to Rotto

In 2019, David took on his first solo Rottnest Channel Swim while his wife, Chelsea, was undergoing treatment with Dr. Arlene Chan. The swim became more than just a personal challenge—it was a way to give back, raising over \$30,000 for BCRC WA. After Chelsea's passing in November 2020, close friends Paul and Sascha Keppel helped him organize another swim in 2021. This time, David swam alongside his son Hamish, with Paul and his son Mitch, forming Team "Dads & Lads." Once again, their fundraising efforts made a significant impact, providing much-needed support for BCRC WA.

Now, a few years later and turning 50, David saw this as the perfect opportunity to take on another solo swim and raise funds once more. He began training in July, swimming at North Cottesloe with the Pod Squad, a close-knit community of swimmers. Meanwhile, his daughter Jessie joined a team with Paul and Sascha's nieces, "Girls Gone to Rotto".

Their efforts paid off tremendously—they topped the leaderboard, raising an impressive \$8,222, while David contributed another \$3,313. His family's journey is a testament to resilience, community support, and the power of swimming for a cause.

**DONATE**

*Today*

There are many ways you can donate to BCRC-WA



Online at [bcrc-wa.com.au](http://bcrc-wa.com.au)



By direct deposit ( NAB BSB: 086-006 Acc No: 73798 6097



Phone us on (08) 6500 5501



In person at BCRC-WA, Suite 407, Hollywood Consulting Centre  
91 Monash Avenue, Nedlands WA

Gifts of \$2 or more are tax deductible

BCRC-WA is self-funded and does not receive any government funding.

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