

10 Things You Should Know About ... *Hereditary Breast and Ovarian Cancer (HBOC)*

1. One in ten young women of Ashkenazi Jewish descent with breast cancer will have a *BRCA* mutation. If there is a family history, that number goes up significantly. These high risk women need to meet with a genetic counselor.
2. About 1 in 40 individuals of Ashkenazi Jewish descent will have a *BRCA* mutation, regardless of family or personal history of cancer (around 10X higher incidence than the general population).
3. Women who are *BRCA* carriers have a significantly increased risk (susceptibility) for breast and ovarian cancer- **up to 87% chance for breast and up to 44% for ovarian-** especially at a young age. The general population risk for breast cancer is 12% and the general population risk for ovarian cancer is 1-2%.
4. Timing of *BRCA* genetic testing matters. Testing isn't recommended until it would impact management (typically not before age 25).
5. *BRCA* positive women have **options** to significantly reduce their risk of developing cancer, including preventive drug therapy and (prophylactic) surgeries.
6. **Screening** for breast cancer for high risk women through mammograms and breast MRI biannually is effective in detecting breast cancer at an early and treatable stage. Screening for ovarian cancer is not effective at detecting ovarian cancer at an early and treatable stage.
7. **Men can carry *BRCA* mutations**, and those men will have an increased risk to develop male breast cancer and prostate cancer, among other types.
8. *BRCA* carriers have a **50% chance** to pass the mutation on to each of their children.
9. **Preimplantation Genetic Diagnosis (PGD)** is currently being used to help ensure that a *BRCA* mutation isn't passed on to the next generation.
10. If there is a family history of cancer, and the results of genetic testing is normal, there is still a high risk for cancer simply because of the family history. These families should meet with a genetic counselor.

