

Did you know?

Clinical trial enrollment by adults in the U.S. is less than 5 percent!

And, of these participants, fewer than 10 percent are members of racial or ethnic communities who often face higher breast cancer mortality rates.

Speak to a Susan G. Komen Clinical Trial Information Specialist:

Call toll-free **1-877 GO KOMEN (1-877-465-6636)** or email **clinicaltrialinfo@komen.org**

5 COMMON MYTHS

about clinical trials and the truths you should know.

Myth #1

“If I take part in a cancer treatment trial, I might be given a placebo.”

False

True

Everyone who takes part in a cancer treatment clinical trial gets treated. You will either get the new treatment being studied or the standard treatment.

Myth #2

“Clinical trials are only for people with metastatic breast cancer.”

False

True

There are many treatment-related clinical trials for those with metastatic breast cancer. There are also many clinical trials for those with breast cancer at all stages. Breast cancer clinical trials study prevention, new screening tests and treatment options, as well as quality of life issues.

Myth #3

“My doctor should decide if a clinical trial is right for me.”

False

True

The person who decides if a specific breast cancer clinical trial is right for you, is YOU. Doctors should discuss the benefits and risks of clinical trials with eligible patients, but patients make the final decision. It's a good idea to get a second opinion!

Myth #4

“Clinical trials are only available at large cancer centers.”

False

True

Clinical trials take place across the country and around the world in many types of medical centers, hospitals and clinics.

Myth #5

“If I choose to enter a breast cancer trial, I have to stay in the trial, no matter what.”

False

True

You are free to change your mind and stop participating in the trial at any time, for any reason.

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Learn more about clinical trials: Visit **komen.org**.