



Congresswoman Debbie Wasserman Schultz, 20th District of Florida

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Dear Friend,

A little more than a year ago, after I found a lump in my breast while doing a routine self-exam, my doctor diagnosed me with breast cancer.

After my diagnosis, it seemed like there were a million different decisions I had to make. My doctor's initial recommendation, because I found the lump so early and it was less than a half centimeter, was to simply have the cancer removed, followed by radiation. However, after sitting down with a nurse educator who asked me many, many questions about my personal and family health history, I also decided to have a blood test that would show whether I had a genetic alteration in the BRCA1 or BRCA2 gene.

Although I have no immediate familial history with cancer I was informed that, as a woman of Ashkenazi Jewish descent, I was in a category of at-risk populations for the gene mutation. I learned that there is an 85 percent lifetime risk for a woman who doesn't have breast cancer, but tests positive for this genetic mutation. For a woman who tests positive and already has breast cancer, there is a 65 percent risk that cancer will affect the healthy breast. Because I was young and diagnosed with breast cancer, there was an indication I might carry the gene, although it was again thought unlikely.

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Several weeks after the successful removal of the tumor, my doctor advised me that I carry the BRCA2 genetic marker that suggests a greater susceptibility to breast and ovarian cancers. After careful consideration, and further consultation with my doctors and my husband, I decided to have a double mastectomy and have my ovaries removed, to reduce the likelihood of a recurrence of cancer.

As any breast cancer patient will tell you, it is a time when you feel you have very little control. I chose to manage my breast cancer and get through the last year privately, with my family and close friends around me. I also chose to wait to tell my young children until recently. After consulting with my doctors, I knew that I could get through the surgeries and procedures and make it very unlikely that I would have a recurrence. I wanted to be able to tell my children with a clear conscience that their Mommy would be okay.

This week in Washington, with a clean bill of health and cancer-free, I plan to introduce the [EARLY Act](#), which seeks to educate young women on the risk factors for breast cancer, why certain populations are more likely to be at risk, and ways that young women can be proactive in lowering their risks. The legislation also seeks to help young women diagnosed with breast cancer deal with the issues unique to their fertility, and the social ramifications young women face.

Some people might say I was lucky. While I certainly was fortunate enough to have access to good health care, I didn't find my tumor early because of luck. I found my tumor early because of knowledge and awareness. I knew that I should perform breast self-exams, and I was aware of what my body was supposed to feel like. We need to ensure that every young woman in America can rely on more than luck.

Their survival depends on it.

Sincerely,



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