

HEREDITARY CANCER IN THE JEWISH COMMUNITY

RESOURCES

Informational and Support Resources

- » **Basser Center for BRCA** (basser.org)
- » **Sharsheret** (sharsheret.org)
- » **Facing Our Risk of Cancer Empowered** (FORCE) (facingourrisk.org)
- » **HIS Breast Cancer Awareness** (hisbreastcancer.org)
- » **Living Beyond Breast Cancer** (lbbc.org)

Funding Resources

Genetic testing costs are often covered, either in part or in full, by insurance companies when an individual meets certain criteria. There are many programs that can assist individuals with costs related to cancer screenings and other procedures.

FOR MORE INFORMATION

and assistance finding a genetics specialist or other resources, contact the Basser Center for BRCA at 215.662.2748 or visit Basser.org.

A Guide for Rabbis and Community Leaders for Starting the Conversation about *BRCA1/2* Mutations



BRCA OVERVIEW

Everyone has *BRCA1* and *BRCA2* genes. Women who have an error, called a mutation or pathogenic variant in *BRCA1* or *BRCA2* have increased cancer risks, most notably up to an 75% lifetime risk of developing breast cancer and up to a 50% lifetime risk of developing ovarian cancer. Men who carry *BRCA* gene mutations also have increased cancer risks, including pancreatic, prostate, and male breast cancer. *BRCA* mutations can be inherited by children and run in families. Women and men who are shown to carry *BRCA* gene mutations through genetic testing have options to reduce and manage their cancer risks.

Men and women of Ashkenazi Jewish descent who meet any of the following criteria should be referred to a genetics specialist:

- » Diagnosed with breast cancer (male or female), ovarian cancer, or pancreatic cancer at any age
- » Diagnosed with high grade prostate cancer with a family history of breast, ovarian, pancreatic, or high grade prostate cancer
- » Family history of breast, ovarian, pancreatic, or high grade prostate cancer
- » A known mutation in a cancer risk gene in a family member

How to find a genetics specialist:

- » National Society of Genetic Counselors (nsgc.org)
- » Through a National Cancer Institute designated cancer center (Cancer.gov/research/infrastructure/cancer-centers)
- » Call your local Cancer Center's Genetics Department or ask your health care team for a referral
- » Speak one-on-one with Sharsheret's certified genetic counselor for guidance (sharsheret.org)
- » Contact the Basser Center for BRCA (Basser.org)

HOW YOU, AS A LEADER CAN HELP

► RAISE AWARENESS IN YOUR COMMUNITY

- » Encourage families to learn their family history of cancer on both sides of the family (mother and father).
- » Host a Sharsheret Teal/Pink Shabbat® event to educate your community about the increased risk of hereditary breast and ovarian cancer among Jewish families, and raise awareness about Sharsheret's support and education programs.
- » Distribute educational resources at your facility:
 - Share Basser Center fact sheets with your community. (Basser.org/Jewish)
 - Include Sharsheret's "Your Jewish Genes: Hereditary Breast & Ovarian Cancer" booklet in your resource room (sharsheret.org).

► START THE CONVERSATION AND REFER TO A GENETICS SPECIALIST

Constituents may seek you out, but you can also begin a dialogue. Any Ashkenazi Jewish man or woman who meets criteria (see left panel) should meet with a genetics professional. Meeting with a genetic counselor or other health care provider doesn't mean that one will definitely have testing, but it allows people to learn more about testing and its ramifications, and to make an informed decision that is right for them.

► PROVIDE EMOTIONAL SUPPORT AND RABBINIC GUIDANCE

Men and women undergoing genetic testing may seek guidance from their community and religious leaders to assist in disclosing genetic results to family members, discussing possible concerns about the impact of test results on marriageability, or assessing how cancer risk management and reproductive options interface with Jewish law.

ELEVATED RISKS FOR FOR INDIVIDUALS OF
ASHKENAZI JEWISH ANCESTRY

1^{IN} 40
CHANCE
of carrying a BRCA
gene mutation

COMPARED TO

1^{IN} 200
PEOPLE
people in the general
population