

Cultivating a Triple-Positive Outlook With Triple-Negative Breast Cancer

Malkia Mann was diagnosed with triple-negative breast cancer at age 42. Her secret weapon: not letting it get her down.

September 9, 2024 By Jennifer Cook

Sometimes it's a fluke when a cancer is found. An exam for something else turns up, for example, a tumor that otherwise might not have been noticed until precious time has slipped away. In 2020, during the COVID-19 pandemic, Malkia "Kia" Mann, who's now 46, experienced bloody discharge from her left nipple. She was living in Northern California and juggling mom duties for her two daughters and son (then 21, 8 and 4), plus a demanding job with the Veterans Administration that involved a lot of travel and a side hustle as a custom baker of elaborate special-occasion cakes (her favorite creation: a shark birthday cake). "My stress relief would be to cook and bake," Mann says with a characteristic laugh.

Months earlier, she had noticed a clear nipple discharge from the same breast, but at the time, a mammogram and ultrasound were both clear. In November, she returned for another round of tests. This time, the diagnosis was a papilloma, a benign tumor in the milk ducts near the nipple. "The general surgeon said, 'This is going to be easy. You'll be in and out,'" Mann says. And then he added, "But let's do an MRI just to make sure we didn't miss anything." The MRI and a follow-up biopsy revealed that something had, indeed, been missed: Stage IIIC triple-negative breast cancer, hiding deep inside Mann's dense breast tissue. "If it wasn't for them discovering the papilloma, they wouldn't have found the tumor," she says.

Joining a Clinical Trial for Treatment

Triple-negative breast cancer, an aggressive type of invasive breast cancer, grows and spreads more quickly and has fewer treatment options than other types because it lacks receptors targeted by many available drugs. Mann's oncologist recommended that she enroll in a study designed to determine the effectiveness of a chemotherapy drug after surgery, so Mann had a chemo port implanted right before Christmas and had a lumpectomy on January 12, 2021, her oldest daughter's 22nd birthday. (Unfortunately, the study showed that the drug did not make a difference in recurrence or survival rates, Mann says.)

During this time, Mann also discovered Bay Area Young Survivors, or BAYS, a support group for women in the San Francisco Bay Area diagnosed with breast cancer under age 45. "They've become my extended family," she says. "They're so diverse, and everyone's welcoming. I don't know how I would have coped with some of these things if I was not in BAYS." (See sidebar for more.)

In the late winter, Mann started six months of chemotherapy, followed by six weeks of radiation. Her youngest sister, who had just been laid off from her restaurant job in Los Angeles because of COVID-19, moved in, along with her son, for about six months so she could drive Mann to all her appointments, care for her after surgery and help with the kids, who were attending school online. Other family members also flew in to assist.

The help allowed Mann to soldier on through her treatments and to continue working for the VA. She took time off only for the placement of the port and the surgery itself. The pandemic shutdowns turned out to be a boon, as they allowed her to work from home and pause any work-related travel. In addition, her superiors were "pretty accommodating," she says.

Mann finished her treatments in the summer, but there was yet another health issue to contend with. An earlier PET scan had revealed a mass in her colon that her oncologist had recommended dealing with after her breast cancer was treated. As she was being readied for surgery, a prep nurse said to her, "I don't know why, but God is telling me to pray with you." The nurse read aloud her favorite scripture, Joshua 1:9 ("Have I not commanded you? Be strong and courageous. Do not be afraid. Do not be discouraged, for the Lord your God will be with you wherever you go"), and prayed, and Mann felt her nervousness float away. The surgery went well, and the colon mass was found to be benign. Joshua 1:9 has become one of her go-to verses, with the words continuing to give her strength and ground her when she feels afraid.



Malkia Mann with her two daughters and son

Courtesy of Malkia Mann

Getting a Prognosis—and Palliative Care

The following summer, Mann was ready to have her port removed. She'd had it for more than a year, and it was a constant reminder of the cancer she had now put behind her. Plus, it had to be flushed out every six to eight weeks. So in July 2022, she asked her oncologist whether it could be taken out. Her doctor agreed, but first, Mann had to have a PET scan.

As it turned out, she received the PET scan report at home through the hospital's patient portal even before her doctors read it. The news was devastating. "I saw it said 'metastatic,' and I know what that means. It said [the cancer] was in my lungs and in a mammary node under my sternum," she says. "I was in shock. My whole world turned upside down. I had been doing so well, getting back to working out and working and starting my life again."

Advocate for yourself. It could save your life.

Her cancer doctor referred her to another oncologist at Stanford Medicine, one whom other BAYS members had seen, for a consultation. The new specialist asked Mann whether her doctor had given her a prognosis and, if not, whether she wanted one. Curious, Mann said yes. “She basically said, ‘For triple-negative, we’re seeing a one- to two-year survival rate,’” Mann says. She was devastated again. Suddenly, “I had a time limit on me.” Further, the doctor referred Mann for palliative care, which she associated with end of life. “So that was like a double whammy.”

But when the palliative care social worker called, she explained that the care wasn’t just about end of life. It would also provide help with pain management, emotional support and help with caregivers and children as well as other resources. Mann listened and accepted the services, which have been extremely helpful; she’s thankful she didn’t close her mind to the assistance.

The Serendipity of Medical Retirement

After working through and beyond her two diagnoses, Mann decided in December 2022 to leave her job at the VA. A scan had revealed disease progression, and she wanted to focus full-time on her health and her family. She researched her options and learned that she could medically retire and receive her full retirement benefits, even though she had worked at the VA for 17 years instead of the requisite 20. “I was scared at first because I thought, How am I gonna pay my bills?” she says. “But I was just like, I don’t know what’s gonna happen, but God, I’m gonna trust you, and I’m gonna start this paperwork.”

She left on medical leave in February 2023. Colleagues donated roughly 300 hours of sick leave they otherwise would have lost, which carried her to nearly May. Her official medical retirement date was June 3, which meant there would be a two- or three-month gap in her rent payments, so she went to the leasing office to explain her situation. A couple of days later, the staff texted her to say that the owner, a breast cancer survivor, wanted to reduce her rent by \$600 a month—not just temporarily but as long as Mann lived in the apartment. “I started crying. I couldn’t believe it,” she says. But it all seemed to be part of a larger plan for her to be exactly where she was.

It’s now been more than a year since she retired, which she feels was the right decision. Today, Mann tells people that she’s a “professional patient—that’s what I do for a living.” She hangs out with friends, former colleagues and family members who are also retired and sometimes travels

with them. She's been to Jamaica, Martha's Vineyard (which she'd always wanted to visit) and Spain, where she had such a great time that she decided to "utilize this time and live life and spend time with my children. And when I feel the urge to travel, I'll travel."

But there have been more setbacks. While at home with her kids after a trip to the Bahamas, she was getting ready to attend a metastatic breast cancer retreat and had a seizure. When she woke up on the floor, her eldest daughter was beside her calling for help. The cause of the seizure: 25 brain lesions. When her radiologist showed them to her on a screen in her hospital room, "I didn't get sad. I had a sense of relief," she says. "I felt a sense of gratitude because I had been traveling all over the world, literally. The week before, I was snorkeling in the Bahamas with my kids. I was in the Florida swamps looking at alligators. I was on a plane, a cruise. And I just kept thinking—because I was a ticking time bomb and didn't know it—what if that seizure happened while I was snorkeling or I was at home by myself? Or driving? I had been literally 20 or 30 minutes from being in my car.

"So I was telling my family and my doctors, I am meant to still be here. Every time I think about it, I still get so emotional, and, like, I'm smiling. Because I know—and I have a very strong faith—if it wasn't meant for me to be here, it would have happened somewhere else. So I couldn't feel sad. I don't—and I still don't."

SIDESTORY

Paying It Forward

Malkia Mann's tips for dealing with cancer.

- If you have dense breast tissue and insurance, press your doctor for an MRI, not just an ultrasound. "Advocate for yourself because it could save your life," she says.
- Stay off Google, which can just make you depressed and anxious.
- When friends and family bombard you with advice, find a polite way to say, "Thanks, but I'm going to work with my medical team and do what's best for me and my body because everything doesn't work for everybody."

- Be patient with yourself and embrace your emotions. You're going to be on an emotional roller coaster, and it's OK.
- No matter what stage you're at, be encouraged. Even if you have a diagnosis of metastatic disease, it's not the end. With today's technology, research and medications, people are living longer.

Editor's note: It is with great sadness that we report Malkia Mann died Tuesday, September 10, 2024. Her optimism and bright spirit will no doubt continue to inspire others long into the future.

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<http://beta.docker.cancerhealth.com/article/cultivating-triplepositive-outlook-breast-cancer-malkia-mann>