



Lowenstein Sandler's Women's Initiative Network Podcast: Real Talk

Episode 61 –
Beyond Resilience: Krista Gundersen on
Living and Working With Stage IV Breast
Cancer

[Jennifer Fiorica Delgado](#), [Megan Monson](#)

OCTOBER 2026

Rachel Dikovics: Welcome to the Lowenstein Sandler podcast series, the *Women's Initiative Network: Real Talk*. I'm Rachel Dikovics, counsel in Lowenstein's White Collar Defense Practice Group and a member of the Women's Initiative Network at Lowenstein Sandler. Before we begin, please take a moment to subscribe to our podcast series at Lowenstein.com/podcast, or find us on iTunes, Spotify, Pandora, or SoundCloud. Now let's take a listen.

Jennifer Delgado: Welcome to the Women's Initiative Network: Real Talk. We are excited to have Krista Gundersen with us on today's episode of Real Talk. Krista and I met during the pandemic, which feels like a lifetime ago, and yesterday, all at the same time.

One of the reasons we connected so quickly is because we're both lawyers and our sons were actually born on the exact same day. Under normal circumstances, that probably would've led to lots of play dates and time together. But because we met during COVID, much of our friendship developed virtually.

Not long after we met, Krista received a breast cancer diagnosis. Since then, I've watched her navigate challenges that most of us can barely imagine with remarkable strength, resiliency, honesty, and grace. It's been more than five years since her diagnosis, and Krista has continued to live with Stage IV cancer while also being an athlete, the mother of a very active six-year-old, and continuing to grow and advance in her career.

There's so much of your story that I think will resonate with people. Krista, thank you so much for being here, and thank you for joining us, Megan.

Megan Monson: Happy to be here.

Krista Gundersen: Thank you for having me. I'm really happy to be here and have an opportunity to have this conversation.

Jennifer Delgado: Before we dive into where you are today, I'd like to go back to that time in your life where you received your diagnosis. I know this may be difficult, so please share only what you're comfortable sharing. What do you remember about those early days surrounding your diagnosis?

Krista Gundersen: I think in the beginning, what really stays with me is how shocked and scared I was in the beginning, and how it felt like I had all this time that was suddenly running out. Having a young child when all of this happened, I think definitely exacerbated that feeling. I had never really heard about women or people my age getting Stage IV cancer diagnoses, and so to get one when I was about to turn 39 was very, very scary to me.

Jennifer Delgado: And that was such a scary time in general, because we all had newborns and we were in the middle of a global pandemic and there was so much uncertainty. So, I remember just this feeling of tremendous fear and anxiety that already existed, so I can only imagine.

One thing I remember so vividly was a conversation among a group of us who were connecting virtually, because of course our new moms group turned into just a WhatsApp chat. You were waiting for test results and shared how scared you were, especially because your mom had died from ovarian cancer.

I remember being struck by your vulnerability in that moment because it was just so honest to say out loud, "I'm very scared." Again, only if you're comfortable sharing, how much did your family history affect what you were experiencing emotionally at that time?

Krista Gundersen: So, I think having gone through the experience as a young adult with a parent who died from a Stage IV cancer diagnosis, I think that part of the complication, like you mentioned, was also the isolation that the pandemic brought.

So, on the one hand, I did feel to some extent, that I was equipped to deal with some of the medical information and the treatment options, because I had gone through the experience with my mom. But on the other hand, I had to go to all those appointments by myself, because you weren't allowed to bring anyone with you to the doctor because of the fear of COVID spreading.

There were still tests required before you did any procedures. Masks obviously were required anytime you stepped outside or into the hospital. So, the isolation, I think, really fed into the feelings of

uncertainty and the fear of what was going to happen regardless of the treatment.

I think also one of the things that struck me was that one of the times that I was having a diagnostic scan early in the process happened to be the anniversary of my mom's death. And so me being about 15 years younger than she was when she died and going through these diagnostics, I just remember laying face down on the table and thinking that it was unbelievable that this was my life at this point.

So, that definitely gave me a different perspective to think about all of the diagnostics that I was going through at the time.

Jennifer Delgado: Because my relationship with you, Krista, developed not in person, I think we actually met in person one time before we started talking on that WhatsApp chat. From where I was sitting, you just exuded such tremendous strength. Did you grieve during this portion of your journey? Were you really grieving for something?

Krista Gundersen: 100%. There were several things I was grieving. I think first of all, the fact that my son was about 14 months old at the time that I was initially diagnosed, and when they determined that I was going to have to go through chemo and surgery, one of the first things they said to me was, "You have about 24 hours to decide if you're going to have any more children, because if you want to have more children, you're going to have to start fertility preservation treatments."

And so ultimately my husband and I decided that we were going to go with the guarantee, which is that we already had a healthy child and we weren't willing to invest in something that wasn't a guarantee. We wanted to be able to have the resources to provide for our son and give him every opportunity that he deserved rather than trying to take a risk on having a second child.

But I definitely was grieving having that choice taken away from me. I wasn't ready at that point, to decide in a day what my family was going to look like for the rest of my life. I also was grieving the idea that I might not be around for my son.

We were already, I think, Jen, you can understand this, we were already so anxious about having these little babies and not being able to socialize them the way that we had expected to. And not knowing what the future was going to hold as far as daycare, education, vaccines that would allow them to start being in groups.

All I could think of, I remember driving home one day was I was facing the Holland Tunnel in my car and I just kept thinking about how I wasn't

sure if I was going to be able to see him go to kindergarten or first grade. Because at the time, the statistics for survival for the type of Stage IV cancer I had were very, very poor. They were about 23% first five-year survival rate.

So, there were all of these things that I was really having to grapple with while also having to keep a logical head, and make very serious decisions about medical treatment. And how I was going to continue to work and contribute to the household, and how I was going to care for my son that all converged at once.

Jennifer Delgado: I want to ask you a two-part question. First, I want to talk about how it is that you found your healthcare providers and what that process was like, and how important that was for your ultimate outcome? I also want to hear about your coping mechanisms during this time. I know those are both very different topics, but I think they're somewhat related for a type A lawyer.

Krista Gundersen: Yeah. Definitely. Putting together of my medical team happened organically, because I was sent for the initial diagnostics by my OB-GYN, who was associated with Englewood Hospital in Englewood, which is the same hospital that I gave birth in. So, I was referred there. I did all my diagnostics there.

I was referred immediately to an oncologist, a medical oncologist at Englewood, and all of that initial discussion and review of my scans happened at Englewood. And then they encouraged me to go get a second opinion, which I would've done anyway. But I remember having a conversation with a friend of mine from law school who had just gone through a pretty serious breast cancer diagnosis.

I remember her telling me that everyone is going to tell you that you need to go to this particular hospital in the city to get your treatment done. They're going to really push you, your friends, your family are going to pressure you. And she said to me, "Go with your gut." She's like, "Absolutely go there, get a second opinion. But if that's not the place that you feel comfortable going, then listen to yourself and go with your instinct."

And I'm so glad she said that to me because I did go and get a second opinion at that hospital, and I was a little traumatized by their response. Which was that they had a very specific standard of care for metastatic breast cancer, which was that they don't treat it aggressively. They treat it as incurable, which it technically is.

But their standard of care is to start you on a line of treatment, usually hormone therapy, targeted therapy, and then they just keep you on it

until it stops working and they switch you to another one, and they just repeat that cycle until ultimately you die. And that was not the answer that I was hoping for or wanted to hear at that time.

I remember I went to that appointment with a really good friend of mine, who had been treated at that hospital for a different type of cancer, and we walked out of that appointment and he said to me, "I can't believe that that just happened." So, I'm glad that my friend had told me that going in, because I went back to my original doctors at Englewood and I haven't looked back.

And I'm very grateful to them because I credit, specifically my medical oncologist, who unfortunately has now since retired, fortunate for him, not fortunate for me. But he's since retired, but I credit him a lot with saving my life and extending my life, because he was really willing to look at my case as an individual and not just a number, and not just a one size fits all situation.

So, that's one thing that really helped was to trust my instinct, advocate for myself, and not just go with what other people felt might be the right route for me.

Megan Monson:

So, what you just said, Krista, I think is a really important point and probably resonates with a lot of people. We know that women are often overlooked or deprioritized within healthcare systems. I've had similar experiences, and your experience really highlights the importance of self-advocacy and trusting your gut. So, what advice would you give to someone who feels like they aren't being heard by their healthcare providers?

Krista Gundersen:

I think it depends a lot on your personality. For me, I, being a lawyer and being a former litigator, felt very comfortable speaking up. But I think if you're someone who doesn't feel comfortable speaking up or feels intimidated by the fact that you may not have any experience in a situation like this, I really recommend one, finding some support group or a group of people who have gone through a similar experience to talk to them about what their advice is. And also to bring someone with you to the appointment if you can.

Or even back then when I wasn't able to bring someone with me, I would've recommended that have someone call the doctor with you on the phone and talk to them and ask them to explain everything. There's a way to advocate for yourself that doesn't necessarily involve stomping your foot and saying, "No. This is what I think should happen." I think a lot of advocacy is also just information gathering.

A lot of times in appointments, whether they're oncology appointments or other medical appointments, there is a sense of you're being rushed through this appointment and you don't get the information that you need. And so I think it's really important to focus on getting all of the information, so that you can make an educated decision.

That's a really big part, I think that people don't talk about when they're talking about patient advocacy, is just the basis for how you're going to make decisions and advocate for yourself.

I want to go back to Jen's part B of her earlier question about coping mechanisms. I think that for better or for worse, because of what I had gone through with my mom dying when I was young, my grandfather, who I was very close to, died from cancer a few years before that. I had had some other really serious incidents that had happened within my family.

At that point in my life, I felt like I was very good at compartmentalizing. And so I think that, plus having a child, you can't stop being a parent regardless of what else is happening in your life. So, that really forced me to focus on one thing at a time. And so I continued to work, so work was a really good distraction in a lot of ways.

But one of the first things that I did do when I got diagnosed was I had been working with Red Door Community in New York City, which used to be called Gilda's Club. It's a nonprofit that supports people who are living with cancer. And I had been working with them for over a decade fundraising for the organization.

I had been the chairperson of their junior board for three years. And so one of the first things I did was I called them and said, "Okay. Well, now I'm your demographic. I'm no longer the person raising the money. Now, I'm the one who needs to benefit from all that fundraising."

And I was connected immediately to a weekly support group, which I'm still in now, and that really helped with the things that I wasn't able to compartmentalize all the time, with the things that I wasn't able to discuss with my husband or my family members.

It continues to be a coping mechanism, because there is something really special about a group of people who may not be going through the exact same experience as you with their diagnosis, but there is a familiarity and a certain language that comes along with a cancer diagnosis that it's just easier to communicate in a support group.

And so I always recommend that people try to find either a support group or if a group setting is not for you, something comparable to that.

Because you really need something separate from your family, separate from your regular group of friends, where you can trauma dump sometimes in order to get through the really hard parts.

Jennifer Delgado: I want to go back to your comment about work because it's interesting that you put it that way, that work was something that really helped you. It helped keep your mind occupied on something productive. And because I know you, you just didn't coast while you were getting cancer treatments, you actually progressed in your career. Can you talk a little bit about how that was possible and how your cancer diagnosis may have changed the way you think about work and success?

Krista Gundersen: Yeah. I think that I'm really grateful to my organization, because I initially called my direct supervisor maybe 15 minutes after I got the initial diagnosis. She was one of the first people that I told. I know that's not the case for a lot of people. Some people aren't comfortable sharing that information with their supervisors or with their jobs, and I totally get that.

I was really lucky that I knew that I was in an environment where I was safe doing that, and that I was working with an organization that would most likely support me through the entire experience. So, I went into the whole career aspect of it knowing that I didn't have things to fear on that end, which was really, really helpful.

One of the decisions I made early on was to be very transparent about what was going on with me, because I had spent so much time investing in being a reliable, motivated person that I wanted there to be a known reason in the event that I wasn't living up to that standard while I was getting treatment.

So, we joke a lot of times in my support group about playing the cancer card, but I did want to have that card to play in the event that things got worse. I was really lucky that my HR department, one of our senior directors in HR had been a breast cancer survivor, and so she was really helpful in helping me navigate all of the benefits that we had available as far as filing for short-term disability when I had my surgeries, and taking specific sick time for when I was going through chemo.

So, I ended up working full-time the entire time that I was in treatment, and that includes chemo, radiation, and the three major surgeries that I had in what I call the active phase of my treatment. I think as much as the pandemic caused a lot of challenges for me during my diagnosis, it also helped that we were working from home at the time that I got diagnosed.

And so the flexibility of being able to work from home and go to all the appointments that I needed to go to definitely helped as well. My supervisor and the executive team at my organization really was supportive. Even when people started coming back to the office later that year, I stayed fully remote for quite some time after that. And there was never any pressure on me to come back earlier than I was willing to come back.

So, on the flip side, when I was going through my surgeries, I took, I think, a total of six weeks total for all three surgeries off from work. So, I was able to do that because I was working from home. I felt fine after a certain time of recovery. For me, I was like, well, I would rather just be able to do some work 15 feet from my bedroom than just sitting around twiddling my thumbs watching another marathon of the Housewives or something. So, I wanted to be productive.

And so I think that really bolstered my reputation as someone who was going to do the job, do the job well, someone who had grit, and was also realistic about what my limits were and were not. I think a couple of years into my diagnosis, I was promoted to my current role. And so I am very lucky that going through my cancer diagnosis and my treatment did not negatively impact my career.

It's not that way for a lot of people. I felt very close to normal. I don't want to say normal, but I felt very close to normal a lot of days, and so that contributed to my ability to be able to work. There are a lot of people that have much more negative responses to side effects that I didn't have. So, it's not possible for everyone, but I think number one, the biggest factor was just a supportive work environment.

I think it highlights why it's important to have those types of organizations because I think people think that, oh, well, if we give people all this leeway and flexibility, then they're just going to take advantage of it and they're not going to do the work or they're not going to show up. And really it was the opposite for me. It was almost more motivating because I knew that I could take a step back, but when I was feeling really good, I could just go full steam ahead.

Megan Monson:

I think that's a really important thing that you mentioned, that having an organization that you work for that does care about its people and that is supportive of when they're going through some challenging time in their life, and you can be open and honest about that, speaks volumes. And it's showed through of your experience, you getting promoted and continuing to work there.

And so I will say, I feel very fortunate similarly, to work for an organization like that. So, I'm going to give a brief plug for Lowenstein

Sandler because, well, not exactly on those same lines, we did just roll out a new paid leave policy for families with extended NICU stays.

And so for people whose children are in the NICU for an extended period of time, they can receive an extension of paid parental leave proportionate to the length of the NICU stay up to eight additional weeks.

It's having employers that offer that type of benefits, the type of things that you were experiencing really does make a difference and shows that there are employers and organizations that really care about their employees, and can see them also as a person, not just what they can do in the work setting.

Krista Gundersen: Exactly.

Megan Monson: So, Krista, one other thing that stands out to me is that no one can go through something like this alone. I know you've mentioned a little bit about your support system, but maybe you can tell us in a bit more detail who helped carry you through the hardest periods?

Krista Gundersen: Yeah. I think that most people, they think, oh, you're going to have a cancer diagnosis, so immediately the people that are going to step in are your immediate family. I think that's what most people take for granted.

In my situation, like I mentioned, my mom passed away when I was in my 20s. My dad now lives in Florida with his second wife, and my husband is also from Florida, and so his mom is in Florida. So, we didn't have any grandparents around to help with my son. My mom was an only child, so I have no cousins on that side. And on my dad's side, I do have quite a few cousins, but we're spread out around New Jersey and Pennsylvania.

So, we really didn't have any family that was geographically close to us that we could rely on, on a regular basis. And so we really had to turn to our found family, our friends that are in the area. People like Jen, who stepped in and just did small things for us that were really meaningful and helpful, in order to get through basically two years after I was diagnosed.

In particular, my son's godparents who are close friends of my husband and mine, and then my work wife and her husband basically alternated living with us for a good chunk of time after I was diagnosed in order to help with my son, get him to school, pick him up, bring me to different appointments if I needed to. Just make sure that everything was covered in our daily routine.

I really don't know how we would've survived without that help. Then there was an extended support system of just all of these people who had been part of my life at some point. My husband always complains that I have too many friends and he can't remember anybody's name. But I always joke if we didn't have that network of people, then we would've been really struggling during that time. I mean, I am talking about my friends from first grade all the way up to current coworkers and neighbors.

So, it really helped that I had spent almost 40 years cultivating a really wide network of people, both personally and professionally, that we were able to lean on during that time. So, I think it's important to talk about support systems not just being family, although family is definitely a component. And my aunts and uncles and cousins were certainly supportive and were sending us meals and sending us things to help out, but that's only one facet of the support system, and there can be other ways that people show up.

One of the things that Jen did for us when I was going through treatment is that she brought by an Easter basket for my son. We didn't have time really to think about those little things, those little details. And she had reached out to me and said, "Hey, I don't know if you guys celebrate Easter, but I would love to drop off an Easter basket for your son." And I said, "Yeah. That would be amazing." And so just the little things like that.

I think that's something that people who are on the outside of the cancer experience don't necessarily know or appreciate, is that it doesn't need to be a grand gesture in order to be a gesture of support. It can be something really, really small. It doesn't need to be, if you don't have the ability to drive someone to every single appointment, that's okay. It's not an all or nothing situation.

Support can look different for everybody, and support can come in a variety of ways. And so I always like to highlight that, because the things that ended up being the most helpful to us during that time weren't necessarily the things that maybe people would think of.

Jennifer Delgado: Were there any things that were really unhelpful to you during that period? Just for people who are trying to be helpful, what should we not be doing?

Krista Gundersen: Look, everyone has really good intentions for the most part, when they hear that you're sick or you're going through a cancer diagnosis, or any major medical diagnosis. No one is coming into the situation, in my experience, with any malintent.

I think what I would recommend to people is just to take a moment to stop and think a little bit more about the words you're using and what you're actually trying to accomplish with your offer, whether it's an offer of verbal support, or an offer of something to do. I joke about this all the time with people who are newly diagnosed, but I always say, "You're going to get a million blankets and a million pairs of fuzzy socks."

And that's lovely, but I didn't really need a blanket or a pair of socks. I needed help figuring out how we were going to have dinner on the table every single night, or who was going to bring my son to daycare when I had to be at the hospital at the exact same time.

So, just really thinking about that. I don't want to characterize anything as being unhelpful because, like I said, I think the intent is always there to do something good. One thing that I think can be really triggering for people is an overload of toxic positivity from people who are outside of the experience.

So, a lot of people would say to me, "Well, you're going to beat this because you're so strong and you are so smart," and all these meritorious adjectives. And at one point I said, "Yeah. That's great. If cancer was a meritocracy, I wouldn't be worried. But cancer does not care that I have a law degree. Cancer does not care that I won a spelling bee in fourth grade. Cancer does not care."

And so just being careful about saying things like that, which really can be, like I said, a little triggering when you're talking about a life or death situation and someone is unintentionally suggesting that you're going to overcome it with strength of will.

Because the flip side of that is that if things get worse and don't get better, the implication is like, "Well, you weren't strong enough or you weren't determined enough." So, just being careful with that language, avoiding cliches. Never, ever, ever, ever, ever say to someone who just got very terrible news about their health or their child's health or whatever, never say to them, "Things happen for a reason."

Please, please, please, please. That's my life's mission, is to get people to stop saying that to people who are going through something that's really traumatic. I remember people would say things to me at various times in my life like, "Oh, things happen for a reason," or, "Your mom would really want this to happen this way." And it's like, no. That's not really helpful in that sense. Nobody wants to think that they got cancer for a reason. No. It's not something that you deserve or don't deserve.

So, just things like that. Just being careful about what you're saying to people and how you're showing up for people is something that I think

needs to be talked about a little bit more. Because, like I said, the intention is there, the good intention is there, but sometimes the outcome and the consequences don't quite align.

Jennifer Delgado: Well, on a related note, I want to talk about a word that gets used a lot when people tell stories like yours, and that is the word resilience. When I think about you, it's actually one of the first words that comes to mind, but when we were preparing for this conversation, you mentioned that you're really not a fan of that concept.

It was actually really, really helpful for me to hear it from you, and I had never heard the explanation. Would you mind sharing it with those listening today?

Krista Gundersen: Yeah. So, I actually gave a little speech about this at an event a couple of years ago for one of the organizations that I work for, or work with, I should say. And it was about the idea that my best friend once sent me a card and said, "You're the most resilient person I know."

And it was a double-edged sword, because she was complimenting me on my strength and my ability to survive through some really terrible stuff. But I'm tired of being resilient. I don't want to have to be resilient all the time. I would like a break. I would like a vacation from being resilient.

I think the fact that I got pregnant in 2019, went out on maternity leave in January of 2020 thinking I'm going to be back in four months in the office, going to have this time with my baby that's going to be wonderful. And then I'm going to put him in daycare and I'm going to come back, and none of that happened.

And then a year later, to then be still recovering from that experience, and then to find out that I've just been diagnosed with an incurable form of cancer, I remember just feeling like I am at my breaking point with resilience. I don't want to have to be resilient all the time.

And also because even after being diagnosed with cancer, that doesn't mean that that's the end of bad things that happen in your life. My younger brother unfortunately passed away from an accidental overdose two years after I was diagnosed with cancer. And so again, that feeling of like, I'm going to get through this because that's just what I do, but I don't like it that I have to constantly be bouncing back from these really hard things.

And so I would say that I have a complicated relationship with the word resilience. Because on the one hand, I am very proud of myself that I can continue to soldier on through all of these hard things that have happened in my life. But I think now I'm approaching 45. I really am tired

of having to do this every year through my adult life. And I would really love a break from having to be resilient, just have a little bit of an easier time for a few years.

Jennifer Delgado: First of all, I'm so sorry about your brother, but I do understand that explanation and it really does resonate with me, though I've never dealt with a serious health condition like yours. There have been moments in life where I have felt like that concept of soldiering on is just unfair because it just was a necessity. So, thank you for sharing that.

Krista Gundersen: I think also for women in particular, a lot of times we are in that position of feeling proud that we can do all this. Women are amazing. We can wear all these hats and take care of all these different jobs, but we're tired and it would be really helpful to not have to constantly be doing this all the time.

I think most women I know are working at least three official and unofficial jobs. If they're working outside of the home, they're doing their day job, they're either being a parent or maybe they're taking care of elderly parents or other family members.

And for me, I said, I was working full-time, and then also working full-time as a parent of a young child, and also working full-time as a cancer patient, because of all the logistics and phone calls and information that I had to deal with for that. And I think that's something that a lot of women are dealing with.

They're a stay-at-home parent, they're managing their house, they're managing expectations from other people of what they need to be contributing or not contributing. So, it's, I think something that's not unique to my situation. I think a lot of women in different circumstances feel similarly.

Megan Monson: Yeah. I think a lot of what you're saying really just seems to be that women in particular, we just have to continue moving forward and we figure out all of the challenges that life throws at us.

Krista Gundersen: Absolutely.

Jennifer Delgado: So, Krista, we could talk to you all day, but maybe let's go back to the beginning and summarize where we are. For anyone out there who's navigating a significant health issue, whether it's their own diagnosis or someone that they love, what advice would you give to them as you're five years out from your initial diagnosis?

Krista Gundersen: Number one, don't Google statistics. Google is not your doctor. Number two is to find your support network, whatever that might look like,

whether that's family, whether that's friends, some type of support group or therapist that specializes in working with people with chronic illness.

Three, do get all of the information from your medical providers and take the time to make the decision that's right for you. Get a second opinion, get a third opinion if you need to, get a fourth opinion. Get whatever information that you need to make yourself feel comfortable making what are some of the most important decisions of your life.

And then finally, I think something that goes back to some of the things we were talking about as far as what things could be helpful or unhelpful. Is to just remember that a lot of times when other people are talking to you about your cancer diagnosis and your treatment, a lot of times what they're saying to you is more about how they're managing your cancer than it is about you or your cancer specifically.

So, there are times when people will say things that might seem insensitive, but they're coping with their own emotions and reactions to what's going on in your life. And that is something that I've tried to remind myself sometimes when I've had some more difficult conversations with people in my life. Is it's not about me, it's about how they're managing their reaction to me, what they're afraid of or what their own fears are about their own mortality or what could happen to them.

So, I think keeping that perspective can sometimes keep you grounded and keep you from losing your mind.

Megan Monson: Is there one thing that has surprised you most about yourself throughout this journey?

Krista Gundersen: Honestly, that I'm still here because, like I said, when I first got diagnosed, I really thought that I was on a countdown to the end of my life. And to be having this conversation with the both of you five and a half years out of my initial diagnosis, feeling really healthy and strong, and being able to go to work every day and shuttle my son to dance class and have a happy, healthy relationship with my husband. All of those things are in a way a surprise to me, because I really did not think that that was feasible when I first got diagnosed.

I really thought that I was going to start planning for the end of my life. And so I think one thing that I would hope that people listening to this would walk away with is that yes, Stage IV metastatic breast cancer is still considered incurable, but it doesn't mean that it's a death sentence.

And so women are living many, many years beyond what they used to with a Stage IV diagnosis. There's new treatments all the time, there's new testing coming out all the time. And so I think if I could get in a time

machine and go back to myself in March of 2021, I would tell myself to take a breath and just focus on the present versus the possibility of what might happen and what might go wrong.

I have many friends that are Stage IV breast cancer that are really, really thriving and have been thriving for years now. And I know that there are women out there that have been living with Stage IV breast cancer now for 20 plus years, and I hope that I'm one of them. So, that's something I think that not a lot of people outside of the community know about, which is really important to make people aware of.

Jennifer Delgado: We hope so too, Krista. Thank you so much for sharing your story so openly. I know these conversations aren't easy, but I also know how powerful they can be for people who may be facing similar challenges, whether because of health or otherwise. And so your story is a reminder that a diagnosis or a single event does not define a person.

Megan Monson: Yeah. Thank you so much, Krista. We're just really grateful that you took the time to join us today, share your story, and I think it's going to be very eye-opening and inspirational to a lot of people. So, appreciate your candor and open honesty here.

Jennifer Delgado: Especially because it's Breast Cancer Awareness Month.

Krista Gundersen: Yeah. Thank you both for having me on. I just really appreciate the opportunity to talk to you about my story, and hopefully help some people out there if they're going through a similar experience.

Jennifer Delgado: Thank you for joining us for another episode of the Women's Initiative Network: Real Talk. We'll see you next time.

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