



Influencing best practice in breast cancer

While survival for women with breast cancer in Australia is among the highest in the world, there is evidence that not all patients are receiving the most appropriate care or getting the information they need about the options that are right for them. This unwarranted variation has the potential to have an impact on patient outcomes and experience.

About the Statement

The aim of the *Cancer Australia Statement – Influencing best practice in breast cancer* is to iron out unwarranted variations in breast cancer care in Australia.

The Statement is a summary of 12 practices that have been identified as appropriate or inappropriate for the provision of evidence-based, patient-centred breast cancer care in Australia. It highlights what 'ought to be done' in breast cancer care to maximise clinical benefit, minimise harm and deliver patient-centred care.

Not every practice will be relevant for all people diagnosed with breast cancer. The practice(s) relevant to an individual will depend on the type and stage of their breast cancer, their age, and where they are in their breast cancer journey.



HOW WAS THE STATEMENT DEVELOPED?

Cancer Australia took a highly collaborative, consultative and evidence-based approach to the development of the Statement. People with cancer were an integral part of the process, which brought key clinical and cancer organisations together with women with breast cancer to identify priority areas of practice.

USING THE STATEMENT

The Statement aims to empower people with breast cancer to engage with their health professionals and make informed, evidence-based decisions that deliver the best outcomes for them.

You may wish to talk with your health professionals about the practices in the Statement and about the options available to you.

For more information about the Statement visit canceraustralia.gov.au/statement



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Not appropriate to perform intensive testing (full blood count, biochemistry or tumour markers) or imaging (chest X-ray, PET, CT and radionuclide bone scans) as part of standard follow-up of patients who have been treated for early breast cancer and who are not experiencing symptoms.

WHAT THIS PRACTICE IS ABOUT

After active treatment has ended, it is important that patients with early breast cancer are followed up to check whether the breast cancer has come back or a new primary breast cancer(s) has developed.

National and international guidelines recommend a standard follow-up schedule of tests and timings, including:

- taking a patient history and clinical examination; and
- annual imaging by mammography and/or ultrasound.

Additional tests are only recommended if symptoms suggest that cancer has spread or a new breast cancer has developed.

More intensive testing, involving chest X-rays, bone scans, CT or PET scans, or blood tests, does not improve survival or increase the quality of life of patients who do not have symptoms.

WHY THIS PRACTICE MIGHT BE IMPORTANT TO YOU

After breast cancer treatment, your follow-up care should follow a standard schedule of doctor visits and examinations, and a mammogram or ultrasound.

If you do not have any symptoms, additional tests do not provide any benefit and cause you unnecessary harm and anxiety.

Discussing the potential benefit or need for any additional tests with your doctor is important in avoiding unnecessary testing and potential harm.

MORE INFORMATION

More information about other recommended practices and the Statement is available at canceraustralia.gov.au/statement

* Early breast cancer is defined as invasive cancer that is contained in the breast, or has spread to lymph nodes in the breast or armpit, but not to other parts of the body. Some cancer cells may have spread outside the breast and armpit area but cannot be detected.



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