



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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Appropriate to consider the pre-operative use of chemotherapy or hormonal therapy (systemic, neoadjuvant therapy) informed by hormone and HER2 receptor status, for all patients where these therapies are clinically indicated.

WHAT THIS PRACTICE IS ABOUT

Chemotherapy and hormonal therapies are drugs used to treat people with cancer. They may be used to destroy cancer cells or stop cancer cells from growing. Chemotherapy and hormonal therapy are most commonly used after surgery for early breast cancer.

For some patients with early breast cancer that will be treated by surgery (operable breast cancer), it may be beneficial to have chemotherapy or hormonal therapy before surgery. This is called 'neoadjuvant therapy'. Studies have shown that receiving these treatments either before or after surgery is equally as effective, in terms of overall survival and disease progression.

WHY THIS PRACTICE MIGHT BE IMPORTANT TO YOU

Neoadjuvant therapy may be an option for you if your breast cancer has certain receptors (hormone receptors and/or the HER2 receptor).

Neoadjuvant therapy can shrink the size of the cancer which may mean that breast conserving surgery is an option rather than a mastectomy. It could also help your doctor find out the type of chemotherapy or hormonal treatment which is likely to be effective for you.

Discussing the options with your doctor will help you to decide whether this treatment approach is appropriate for you.

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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