

# New model of follow up for breast cancer patients

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Public health researchers from the University of Adelaide have evaluated international breast cancer guidelines, finding that there is potential to improve surveillance of breast cancer survivors from both a patient and health system perspective.

International guidelines recommend annual follow-up mammograms for every woman after treatment for early [breast cancer](#), regardless of the risk of her cancer returning. There is also no strong evidence to support annual [mammography](#) compared with other possible mammography schedules.

In a paper published in the journal *Value in Health*, researchers in the University's School of Population Health demonstrate that for [postmenopausal women](#) with moderate prognosis early breast cancer, less frequent surveillance may be more cost-effective, especially for those older than 70 years.

"Due to early diagnosis and improved treatment, the number of [breast cancer survivors](#) is increasing. All of these [women](#) will need follow-up mammography to detect recurrent or new disease," says the study's co-author, Professor Jon Karnon.

"But while the diagnosis and treatment have significantly improved the outlook for many cancer patients, approaches to cancer surveillance haven't changed.

"The results show that for younger postmenopausal women at moderate risk of [breast cancer recurrence](#), annual follow-up screening for five years, with two yearly visits thereafter, appears to be cost-effective.

"For older women, a mammography schedule every two years is likely to be cost-effective, if women continue to attend follow-up mammography," he says.

The researchers based their findings on health service data and simulation modelling, enabling them to predict the long-term costs and health outcomes of alternative mammography schedules for women, based on the women's age and the features of their primary breast cancer.

"It's clear to us that the current 'one size fits all' international guideline of annual follow-up mammography may not be necessary for all women with early breast cancer," says study co-author Clinical Associate Professor Taryn Bessen.

"This work highlights the potential benefit of tailoring follow-up to the risk of recurrence, and the use of modelling methods to help guide clinical practice in an evidence-based and pragmatic manner."

Provided by University of Adelaide

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