

Summary of NICE Guidelines

Title	Early and locally advanced breast cancer
NICE Reference	CG80
Date of Review:	06/06/2017
Date of Publication	February 2009
Summary of Guidance (Max 250 words)	Early breast cancer can be classed as being in situ disease (most cases are ductal carcinoma in situ; DCIS) or invasive cancer. The updated guidelines advise on best practice for investigation (imaging/surgery) and management of early breast cancer (endocrine/biological/chemotherapy treatments, radiotherapy and follow-up). The main recommendations covered: MRI of the breast in patients with invasive breast cancer
	 Minimising surgery when staging the axilla (preference for sentinel lymph node biopsy) for patients with invasive breast cancer.
	Discussion of breast reconstruction with all who are advised on mastectomy
	 Early application of chemotherapy/radiotherapy (within 31 days) post-surgery
	 Advice regarding aromatase inhibitors in postmenopausal women
	Assessment of loss in bone mineral density with DEXA scan
	Treatment with systemic therapy rather than endocrine therapy in isolation
	 Annual mammography until entry into an NHS breast screening programme
	Patient care plans
	Useful information for clinical laboratories includes information about predictive factors and endocrine therapy. An update for predictive factors recommended quantitative assessment of oestrogen receptor status (immunohistochemistry) and testing of human epidermal growth factor receptor 2 (HER2) in all invasive breast cancers. Genetic testing (BRCA1 and BRCA2 gene mutations) was also suggested for females < 50 years with triple negative breast cancer. Endocrine therapy encompasses ovarian suppression/ablation and use of aromatase inhibitors (anastrozole, letrozole, exemestane) in early invasive breast cancer. The guidelines outline when these should be

	offered and when they should not. May have an effect on use of tamoxifen in future.
Impact on Lab (See below)	☐ Moderate
Lab professionals to be made aware	✓ Chemical Pathologist ✓ Clinical Scientist ✓ Biomedical Scientist
Please detail the impact of this guideline (Max 150 words)	An awareness of updated diagnostic procedures and therapies will be useful for understanding test requests, results interpretation and in the follow-up of patients with early breast cancer. The information pertaining to predictive factors and endocrine therapy will be of interest to those that may encounter specimens from early invasive breast cancer patients and deal with referrals to departments such as genetics and pathology.

Impact on Lab

- None: This NICE guideline has no impact on the provision of laboratory services
- Moderate: This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.
- **Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.

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