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Duration and frequency of surveillance mammography after primary breast cancer treatment

Recommendation:

It is recommended that MDTs follow the NICE Guidelines^{1,2}

Advice:

For invasive cancers and DCIS: Annual mammography for 5 years after diagnosis then enter National Health Service Breast Screening Programme (NHSBSP). More frequent mammography only at discretion of MDT and should be a rare event.

For younger patients (≤ 42 years), eligible for mammographic surveillance, continue annual mammography UNTIL entering NHSBSP.

No surveillance mammography is required on the side of mastectomy with or without reconstruction.

For patients aged ≥ 67 years at diagnosis: Annual mammography for 5 years then can self refer through NHSBSP

Recommend suspension from NHSBSP while on active Breast Unit surveillance if possible

Surveillance after cancer treatment with moderate or high risk of gene mutation as per NICE Guidelines² (and ABS Council Family History document on the ABS website).

Ultrasound is not recommended as a screening tool and should only be considered in exceptional cases and be agreed by the MDT.

MRI surveillance (outside of NICE Familial Guidelines) should only be used on an individual patient basis such as a dense breast and agreed by the MDT.

***Siobhan Laws, Simon Harries, Michael Douek, Philip Drew, Kieran Horgan
On behalf of the ABS Council***

And with thanks to Lucy Davies for assistance in their production

References:

1. *Early and locally advanced breast cancer: Diagnosis and treatment.* NICE guidelines 2009; CG80
2. *Familial breast cancer: Classification and care of people at risk of familial breast cancer and management of breast cancer and related risks in people with a family history of breast cancer.* NICE guidelines 2013; CG164

Note:

Members of ABS Council and Committees met and discussed a set of topics on which it was felt clinical guidance was sought by ABS members. This document represents the considered, agreed opinions of experienced breast surgeons. It is not meant to supplant authoritative guidelines. Discussion and correspondence would be gratefully received by the ABS to lucydavies@absgbi.org.uk