

Home > About Us > Collaborations > Top Five List in Oncology > Choosing Wisely®: Top Five Cancer-Related Tests, Procedures, and Treatments That Many Patients Do Not Need

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Choosing Wisely®: Top Five Cancer-Related Tests, Procedures, and Treatments That Many Patients Do Not Need [1]

 *Listen to the Cancer.Net Podcast: The Top Five List in Oncology ? What This Means for Patients, with Dr. Allen Lichter[2], adapted from this content.*

Being diagnosed and treated for cancer is a complex process, often filled with many tests, procedures, and treatments that may not be familiar to you. Learning more about these tests and treatments can help you understand what to expect when having them, but how do you know which ones actually increase your chance of recovering from cancer and maintaining the best quality of life and which ones increase side effects without improving quality of life?

To help patients answer these questions, the American Society of Clinical Oncology (ASCO) joined with the American Board of Internal Medicine (ABIM) Foundation and eight other medical specialty societies in the Choosing Wisely® campaign. The campaign's goals are to improve the value of each patient's medical care, meaning that patients receive the tests, procedures, and treatments that are most likely to improve their lives without overburdening them with unnecessary costs [3]. To achieve this goal, experts in every field of medicine took a careful look and came up with the top five tests, procedures, and treatments that are misused or overused in each field.

For oncology, a panel of experts carefully reviewed the research and created this list of the "Top Five" tests, procedures, and treatments that are often used in cancer care but have not been shown to increase the chance of recovery or quality of life for most patients. By avoiding these tests, procedures, and treatments, ASCO hopes that patients can continue to receive high-quality cancer care without unnecessary side effects and costs. This summary is designed to help patients talk with their doctors about the purpose and goals of specific cancer-related tests and procedures, to determine which options are right for them.

Topic #1: Cancer-Directed Treatments at the End of Life [4]

Cancer care is made up of treatment(s) to slow, stop, or eliminate the cancer combined with treatments to relieve the related symptoms and side effects, called palliative or supportive care [5]. However, for some people, there is a point when the available treatments cannot control the growth and spread of the cancer. This may be called advanced or terminal cancer. Then, the main focus of treatment is on managing the symptoms of the cancer.

Topic #2: Imaging Tests for Early-Stage Prostate Cancer [6]

For many cancers, especially those that are likely to spread throughout the body, it is important to find out if the cancer has spread and where it has spread. This is called staging. Knowing the stage helps the doctor decide what kind of treatment is best and can help understand a patient's prognosis when diagnosed. Prostate cancer is divided into stages I through IV (one through four). Staging for prostate cancer also includes measuring the prostate-specific antigen (PSA) level in the blood, and determining the grade, called a Gleason score.

Topic #3: Imaging Tests for Early-Stage Breast Cancer [7]

For many cancers, especially those that are likely to spread throughout the body, it is important to find out if the cancer has spread and where it has spread. This is called staging. Knowing the stage helps the doctor decide what kind of treatment is best and can help understand a patient's prognosis when the cancer is first diagnosed. Breast cancer is divided into stage 0 (zero), which is called ductal carcinoma in situ (DCIS), and stages I through IV (one through four). Find more detailed staging information for breast cancer [8].

Topic #4: Follow-up Tumor Marker Tests and Imaging Tests for People Treated for Breast Cancer [9]

Tumor markers, also called serum markers or biomarkers, are substances found at higher than normal levels in the blood, urine, or body tissues of some people with cancer. In specific situations, biomarker tests can be used for many reasons, including to screen healthy people who have no symptoms of cancer, help diagnose several different types of cancer, determine the prognosis for a person with cancer, monitor how well cancer treatment is working, and watch for a recurrence (cancer that has come back after treatment). However, many tumor markers can be at higher than normal levels in people without cancer, or a person with cancer could have low levels of tumor markers. For this reason, they are always used along with other tests.

Topic #5: White Blood Cell Growth Factors for Preventing Infection

[10]

White blood cell growth factors, also called hematopoietic (blood-forming) colony-stimulating factors (CSFs), are proteins that help the body make white blood cells. White blood cells help fight infection. Many cancer treatments, such as chemotherapy, damage white blood cells. This can cause neutropenia, a very low level of white blood cells that increases the risk of getting an infection. When neutropenia occurs with a fever, it is called febrile neutropenia and may be a sign of an infection. Infections can be very serious for people with cancer because they often do not have enough white blood cells to fight the infection on their own and will usually need to be treated in the hospital with antibiotics. CSFs increase levels of white blood cells to help a person avoid infection. However, most patients receiving chemotherapy will not need CSFs. This is because most chemotherapy is only associated with less severe neutropenia, and the risk of severe neutropenia can usually be predicted ahead of time.

About ASCO's Recommendations [11]

Read ASCO's complete Top Five list for oncology care and treatment, along with scientific sourcing, at www.asco.org/topfive [12].

Resources [13]

The best cancer care starts with the best cancer information. Well-informed patients are their own best advocates, and invaluable partners for physicians. Cancer.Net (www.cancer.net [14]) brings the expertise and resources of ASCO, the voice of the world's cancer physicians, to people living with cancer and those who care for and care about them.

Links:

- [1] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need>
- [2] http://www.cancer.net/sites/cancer.net/files/top_five_list_in_oncology.mp3
- [3] <http://www.cancer.net/node/24865>
- [4] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/topic-1-cancer-directed-treatments-end-life>
- [5] <http://www.cancer.net/node/25282>
- [6] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/topic-2-imaging-tests-early-stage-prostate-cancer>
- [7] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/topic-3-imaging-tests-early-stage-breast-cancer>
- [8] <http://www.cancer.net/node/18625>
- [9] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/topic-4-follow-tumor-marker-tests-and-imaging-tests-people-treated-breast-cancer>

[10] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/topic-5-white-blood-cell-growth-factors-preventing-infection>

[11] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/about-ascos-recommendations>

[12] <http://www.asco.org/topfive>

[13] <http://www.cancer.net/about-us/collaborations/top-five-list-oncology/choosing-wisely%C2%AE-top-five-cancer-related-tests-procedures-and-treatments-many-patients-do-not-need/resources>

[14] <http://www.cancer.net>