What to Know
ASCOD’s Guideline on Follow-Up Care for Breast Cancer
OCTOBER 2012

KEY MESSAGES
• Follow-up care for breast cancer includes managing the short-term side effects of treatment and watching for long-term side effects or a return of the cancer.
• ASCO’s recommendations for follow-up care include regular visits to your doctor and mammography.
• People with breast cancer should talk with their doctors about a follow-up care plan and how to coordinate this care between the oncologist and their primary care or family doctor.

To help doctors give their patients the best possible care, the American Society of Clinical Oncology (ASCO) developed evidence-based recommendations for follow-up care for patients with breast cancer. In 2012, ASCO reviewed the results of new research studies, and no changes to the recommendations were needed based on the current research findings. This guide for patients explains the ASCO recommendations.

BACKGROUND
After treatment for breast cancer, follow-up care is important to help maintain good health, which includes managing any side effects from treatment and watching for long-term side effects (called late effects) or signs of a cancer recurrence (cancer that comes back after treatment). A follow-up care plan may include regular physical examinations and other medical tests to monitor your recovery for the coming months and years. To help keep track of the cancer treatment you received and work with your doctor to develop a survivorship care plan, ASCO offers cancer treatment summary forms at www.cancer.net/treatmentsummaries.

Many survivors feel worried or anxious that the cancer will come back after treatment. While it often does not, it’s important to talk with your doctor about the possibility of the cancer returning. Most breast cancer recurrences are found by patients between doctor visits. Tell your doctor if you notice any of the following symptoms, as they may be signs of a cancer recurrence:
• New lumps in the breast
• Bone pain
• Chest pain
• Abdominal pain
• Shortness of breath or difficulty breathing
• Persistent headaches
• Persistent coughing
• Rash on breast
• Nipple discharge (liquid coming from the nipple)

**RECOMMENDATIONS**
ASCOC recommends the schedule of tests and procedures listed below after treatment for breast cancer. About a year after diagnosis, you may continue to visit your oncologist or transfer your care to a primary care doctor. Women receiving hormonal therapy should talk with their oncologist about how often to schedule follow-up visits for re-evaluation of their treatment.

**Medical history and physical examination.** Visit your doctor every three to six months for the first three years after the first treatment, every six to 12 months for years four and five, and every year thereafter.

**Post-treatment mammography.** Schedule a mammogram one year after the first mammogram that led to your diagnosis. However, if you have had radiation therapy, wait six months after your last treatment. Obtain a mammogram every six to 12 months thereafter.

**Breast self-examination.** Perform a breast self-examination every month. This procedure is not a substitute for a mammogram.

**Pelvic examination.** Continue to visit a gynecologist regularly. Because the drug tamoxifen (Nolvadex) increases the risk of uterine cancer, women taking this drug should tell their doctors about any abnormal vaginal bleeding.

**Genetic counseling.** Another important part of follow-up care is to tell your doctor if you have a history of cancer in your family because you may benefit from genetic counseling. The following risk factors may indicate that breast cancer could run in the family:

- Ashkenazi Jewish heritage
- Personal or family history of ovarian cancer
- Any first-degree relative (mother, sister, daughter) diagnosed with breast cancer before age 50
- Two or more first-degree or second-degree relatives (grandparent, aunt, uncle) diagnosed with breast cancer
- Personal or family history of breast cancer in both breasts
- History of breast cancer in a male relative

The following tests are not currently recommended by ASCO for regular follow-up care because they have not been shown to lengthen the life of a person with breast cancer. Learn more about why these tests may not be recommended at www.cancer.net/topfivelist.

- A complete blood count (CBC) test and liver and kidney function tests
- Chest x-ray
- Bone scan
- Liver ultrasound
- Computed tomography (CT or CAT) scan

**QUESTIONS TO ASK THE DOCTOR**
To learn more about follow-up care for breast cancer, consider asking your doctor the following questions:

- What follow-up care plan would you recommend for me?
- What is the chance that the cancer will recur?
- What tests do you recommend? Why?
- Based on my personal and family medical history, do I need to visit a genetic counselor?
- Where can I find more information about follow-up care?

For women receiving hormone therapy:

- Are there any signs or symptoms I should watch for?
- What side effects are common with this treatment?
- How often should I schedule additional follow-up visits with the oncologist?
• Fluorodeoxyglucose-positron-emission tomography (FDG-PET) scan
• Breast magnetic resonance imaging (MRI) test
• Breast cancer tumor markers, such as CA 15-3, CA 27.29, and carcinoembryonic antigen (CEA).

WHAT THIS MEANS FOR PATIENTS
The recommendations for follow-up care for breast cancer include regular physical examinations, mammograms, and breast self-examinations. The follow-up care may be provided by your oncologist or primary care doctor, as long as your primary care doctor has talked with your oncologist about appropriate follow-up care and the possible late effects. In addition, patients with a possible or known family history of breast cancer may want to visit a genetic counselor. Use these guideline recommendations to talk with your doctor about an appropriate follow-up care plan for you.

HELPFUL LINKS
Read the entire clinical practice guideline at www.asco.org/guidelines/breastfollowup.

Guide to Breast Cancer
www.cancer.net/breast

Breast Cancer Survivorship Care Plan
www.cancer.net/treatmentsummaries

Genetics of Breast Cancer
www.cancer.net/genetics

What to Expect When Meeting With a Genetic Counselor
www.cancer.net/genetics

RESOURCES
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) 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. ASCO is composed of more than 30,000 members who are the leaders in advancing cancer care. All the information and content on Cancer.Net was developed and approved by the cancer doctors who are members of ASCO, making Cancer.Net an up-to-date and trusted resource for cancer information on the Internet. Visit Cancer.Net to find guides on more than 120 types of cancer and cancer-related syndromes, clinical trials information, coping resources, information on managing side effects, medical illustrations, cancer information in Spanish, videos, podcasts, the latest cancer news, and much more. For more information about ASCO’s patient information resources, call toll free 888-651-3038.