

DCIS Post-Mastectomy Patient Letter

[Date]

Dear [Insert name];

Your surgeon and/or family doctor has referred you to the cancer clinic for consultation following mastectomy (surgical removal of the entire breast) for ductal carcinoma in situ (DCIS) – Stage 0.

DCIS is a noninvasive (pre-malignant or pre-cancerous) diagnosis in which abnormal cells are found in the lining of a breast duct. The abnormal cells have not spread outside the duct to other areas in the breast. DCIS, if left untreated, has the potential to become invasive.

You have undergone mastectomy, therefore all of the DCIS has been surgically removed. As such, there is a very low risk of DCIS or invasive breast cancer recurrence (returning) at the mastectomy site. Unlike patients who have undergone breast conserving surgery (partial mastectomy or segmental resection) for DCIS, currently, there is no evidence that any further therapy (radiation therapy, chemotherapy or estrogen-blocking therapy e.g. tamoxifen) will further lower your risk of recurrence. **We have therefore sent a letter back to your doctor indicating that you do NOT require consultation at the Cancer Centre at this time.** The recommended follow-up procedures contained in this letter have also been sent to them for review.

SURVEILLANCE FOR CANCER RECURRENCE

We recommend follow-up as outlined below:

- **Self-examination** of the chest wall (mastectomy site), remaining breast and armpits every month;
- **Mammogram** of your remaining breast yearly (there is no evidence to support routine imaging of the chest wall, with either mammograms or ultrasound, post-mastectomy);
- **Examination by your physician/health care provider** of your chest, remaining breast and armpits every 6 months for 2 years and then yearly after that;
- Other routine follow-up investigations (e.g. lab work, tumour markers, x-rays) are NOT recommended if you are not having any worrisome symptoms.

It is your responsibility to contact your doctor and arrange for your follow-up visits.

If you do not currently have a family doctor, please call Health Link Alberta (1-866-408-5465) for a list of doctors in your area. If you have access to the Internet, you can also search for a family doctor accepting new patients on this website: <http://www.cpsa.ab.ca/PhysicianSearch/AdvancedSearch.aspx>.

PATIENT SUPPORT AND GENERAL RECOMMENDATIONS

Other resources available to your patient in the surveillance period are as follows:

Cancer support groups and resources such as:

- **Information and Resources for Breast Cancer Survivors in Alberta** (booklet provided to patient by oncology care team at end of active treatment)
- **Alberta Health Services:** ahs.ca
 - Search term: **sources of help**
- **Cancer and Work:** cancerandwork.ca/
- **Living Well with Cancer-Related Fatigue:** <https://myhealth.alberta.ca/Alberta/cancer-fatigue>
- **Canadian Cancer Society:** cancer.ca or 1-888-939-3333
- **American Society for Clinical Oncology (patient site):** cancer.net
- **Wellspring:** Calgary: wellspringcalgary.ca
Edmonton: wellspringedmonton.ca

Counselling and Support: Post-treatment adjustment should be assessed. If problems are identified, treat or refer to an appropriately trained professional. Resources are available from the following sources (Community Cancer Centre patients should call the nearest Associate or Tertiary site):

- Edmonton: 780-643-4303 or 780-643-4304

- Calgary: 403-355-3207
- Grande Prairie: 780-538-7372
- Lethbridge: 403-388-6814
- Medicine Hat: 403-529-8817
- Red Deer: 403-343-4485
- Other Communities visit www.ahs.ca/Cancer.asp and click: *Provincial Cancer Patient Navigation*
- Cancer Connection (peer support) – www.cancerconnection.ca
- Young Adult Cancer Canada – www.youngadultcancer.ca/

Sexual Health:

- **Menopause Symptoms:** Hot flashes which interfere with sleep and daily function can be managed with non-hormone therapies (e.g. venlafaxine or gabapentin). Vaginal dryness can be managed with a dual purpose vaginal moisturizer and lubricant (eg. Replens[®]). If non-hormonal therapies do not help, vaginal estrogen (Estring[®], Vagifem[®]) can be considered. Oral hormone replacement therapy is NOT recommended in patients with a previous history of DCIS or breast cancer.
- **Self-Image:** For some women, breasts are an important part of their self-image. If you are concerned about how a mastectomy has changed your body, you may wish to talk to your doctor about a breast prosthesis (a breast form that fits inside your bra and matches the size and shape of your breast) or breast reconstruction (plastic surgery to rebuild the breast). Psychological counseling can also be helpful for improving body image satisfaction, addressing relationship concerns and reducing sexual dysfunction.

You are encouraged to lead a healthy lifestyle.

Modifiable Lifestyle Factor	Recommendations
Body weight	Body mass index (BMI): 18.5-25 kg/m ² Waist circumference: less than 80 cm for women
Physical activity	<ul style="list-style-type: none"> • Try to be active for 2.5 hours (150 minutes) every week • Spread out your exercise throughout the day and week, such as 30 minutes 5 days a week • Focus on moderate (brisk walking) to vigorous activity (jogging)
Nutrition	<ul style="list-style-type: none"> • Avoid sugary drinks and foods • Try to drink 8 cups (2 litres) of liquids (water, juice, tea) every day • Eat a variety of vegetables, fruits, whole grains, and legumes such as beans • Limit how much red meat you eat (beef, pork, and lamb), and avoid processed meats such as bacon or sausage • Limit foods that contain a lot of salt
Bone health	Vitamin D: 1000 - 2000 IU per day Calcium: 1000-1200 mg per day. Try to get most from food not supplements. More information on bone health can be found at: osteoporosis.ca *Note: Raloxifene (Evista[®]) is NOT recommended for treatment of osteoporosis in patients with a previous DCIS or breast cancer diagnosis.
Alcohol	Limit excessive consumption (<1 drink/day, <3 drinks/week)
Smoking	Practice smoking cessation. For help contact Alberta Quits 1-877-710-QUIT(7848) or albertaquits.ca and visit ahs.ca/guru for clinical practice guideline. Also the Tobacco Treatment and Support Clinic are available in Edmonton (780-432-8236) and Calgary (403-698-2988).
Sun exposure	<ul style="list-style-type: none"> • Avoid being out in the sun for too long • When in the sun use sunscreen and wear sunglasses and a hat. • Do not use indoor tanning beds • Check your skin regularly and tell your doctor if you notice any unusual changes
Immunizations	Annual non-live influenza vaccination, unless contraindicated. Other vaccinations as appropriate.
Other cancer screening	Age-appropriate screening for other cancers. Refer to http://screeningforlife.ca/healthcare-providers-resources/ for more information.

You may access and print the DCIS Patient Follow-up Checklist to keep track of your own visits and results at:

<http://www.albertahealthservices.ca/assets/info/hp/cancer/if-hp-cancer-guide-dcis-patient-checklist.pdf>

Thank you for letting us be a part of your healthcare team.

Sincerely,

The Alberta Provincial Breast Tumour Team