

DCIS Post-Mastectomy Physician Letter

[Date]

Re: [Insert Name, Date of Birth]

Dear Dr. Referring Physician;

Thank you for referring your patient who has been treated with mastectomy for ductal carcinoma in situ (DCIS) of the breast – Stage 0.

Unlike patients who have had breast-conserving therapy for DCIS, there is no level 1 evidence that your patient, who has had a mastectomy for DCIS with clear margins, would benefit from additional therapy (radiation, chemotherapy or endocrine therapy). **Therefore, your patient does NOT require a formal oncology consultation at the Cancer Centre.**

SURVEILLANCE FOR CANCER RECURRENCE

Follow-up after treatment for DCIS post-mastectomy is outlined below. These recommendations are intended to assist you in providing optimal follow-up care for your patient and are not intended to be a substitute for clinical judgment.

- Patients may perform **self-examination** of the chest wall (mastectomy site), remaining breast and both axillae every month.
- **Diagnostic mammography** of the contralateral breast should be performed annually. Reconstructed breasts post-mastectomy (autologous tissue or implants) do not require any form of imaging surveillance.
- **Periodic clinical examination** should include examination of the chest wall and contralateral breast plus the supraclavicular and axillary lymph nodes. Exams should be performed every 6 months for 2 years and then annually thereafter.
- Other routine surveillance investigations (e.g. lab work, tumour markers, diagnostic imaging) are NOT recommended for asymptomatic patients.
- Patients presenting with any of the following symptoms or signs should undergo the appropriate actions/investigations:

Symptoms/signs	Actions/Investigations
suspicious rash or nodule on chest wall	refer to surgeon for biopsy
palpable lymphadenopathy	refer to surgeon for biopsy
new mass in contralateral breast	mammography +/- ultrasound (+/- biopsy)

At any time if you have any concerns or are in need of more information please call the **Alberta Cancer Line: 1-888-432-8865**.

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.

Your patient is 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	Be active at least 2.5 hours a week and focus on moderate to vigorous activity spread throughout the week.
Nutrition	<ul style="list-style-type: none"> • Avoid sugary drinks and foods • Eat more vegetables, fruits, whole grains and legumes such as beans. • Eat less red meat (such as beef, pork, and lamb); avoid processed meat • Eat less salty foods and foods processed with 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	Advise on avoidance of excessive or potentially harmful UV exposure. Advocate for the use of sunscreen and sunglasses. Advise against the use of indoor tanning beds. Check skin regularly for suspicious lesions.
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>

At any time if you have any concerns or are in need of more information please call the **referring oncologist at XXX.**

We appreciate your partnership in caring for this patient.

Sincerely,

The Alberta Provincial Breast Tumour Team