Survivorship – Invasive Breast Cancer

This cancer survivorship algorithm has been specifically developed for MD Anderson using a multidisciplinary approach and taking into consideration circumstances particular to MD Anderson, including the following: MD Anderson’s specific patient population; MD Anderson’s services and structure; and MD Anderson’s clinical information. This algorithm is provided as informational purposes only and is not intended to replace the independent medical or professional judgment of physicians or other health care providers. Moreover, this algorithm should not be used to treat pregnant women.

**ELIGIBILITY**
- Female or Male
- with Invasive Breast Cancer
- 5 years from date of diagnosis
- No evidence of Disease

**CONCURRENTLY**
- History and physical with clinical breast exam annually
- Screening mammogram annually
- Assess for compliance with hormone therapy and assess for toxicities

**MONITORING FOR LATE EFFECTS**
- Consider the following:
  - Bone Health (See Breast Cancer Survivorship: Bone Health Algorithm)
  - Cardiac screening
  - Patient education regarding symptoms including radiotherapy complications if appropriate
  - Lymphedema assessment
  - Sexual health/fertility
- Fatigue assessment
- Neuropathy assessment
- Assess for cognitive dysfunction
- Gynecological assessment if on tamoxifen

**RISK REDUCTION/EARLY DETECTION**
- Gynecologic screening (See Cervical Screening Algorithm)
- Colorectal screening (See Colorectal Screening Algorithm)
- Diet/weight management counseling
- Exercise/activity (See Physical Activity Algorithm)
- Tobacco cessation counseling (See Tobacco Cessation Algorithm)
- Sun exposure/skin cancer screening (See Skin Cancer Screening Algorithm)
- Vaccinations
- Genetic screening

**PSYCHOSOCIAL FUNCTIONING**
- Distress (See Distress Screening & Psychosocial Management Algorithm)
- Financial stressors
- Body image
- Social support

**SURVEILLANCE**
- Yes
  - See Evaluation for Recurrence on Breast Cancer Invasive Algorithm
- No
  - Continue survivorship monitoring

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1 Completion of all treatment with the exception of hormonal agents
2 Consider tomosynthesis/3D mammogram
3 Premenopausal women on hormonal therapy

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SUGGESTED READINGS

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DEVELOPMENT CREDITS

This survivorship algorithm is based on majority expert opinion of the Breast Survivorship work group at the University of Texas MD Anderson Cancer Center. It was developed using a multidisciplinary approach that included input from the following medical, radiation and surgical oncologists.

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