

ACT & SE NSW BREAST CANCER TREATMENT GROUP

NEWSLETTER

Issue 1

March 2001

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BreastScreen's role

The Breast Cancer Treatment Group continues to be funded within ACT BreastScreen, ACT Community Care. One third of the women who have participated in the quality assurance project were diagnosed by screening services.

Continued improvements in treatment options are required to provide women with the best outcomes once diagnosed with breast cancer. Sustained support by all clinicians has provided the ACT and surrounding SE NSW region the opportunity to work towards best practice outcomes.

ACT BreastScreen will continue to play a vital role in supporting the quality assurance project.

Alice Jones
Program Manager
ACT BreastScreen

The Breast Cancer Treatment Group

In 1995, following the publication of the NHMRC Guidelines for the Management of Early Breast Cancer, an invitation was sent to potentially interested clinicians and other parties in the ACT and surrounding NSW to participate in the forming of a local interest group. The intention was for the group to look at issues surrounding the management and treatment of breast cancer within the local environment.

The unique nature of the region was seen to be an important and distinctive feature - a small number of hospitals and located within the ACT and the area covered by the Southern Area Health Service of NSW, provided the potential to establish a regional group not aligned to any institution or area health service.

The initial meetings of the group focussed on developing the terms of reference and the local protocols for the various clinical groups. Very early on in the life of the group it was agreed that if we were to make full use of the NHMRC guidelines then we would need to be able to monitor what treatment was being provided to women with breast cancer in the region and to compare that treatment with the best practice guidelines.

In order to do this appropriate data collection mechanisms needed to be put in place. Funding was sought and gained from the Commonwealth for a project officer to undertake the development of a data base and the ongoing collection of data relating to the treatment of breast cancer.

Other activities the group has focussed on include refining the data set and hearing from each clinical group in turn about new developments in breast cancer treatment. A number of guest speakers have been invited to attend the meetings and to speak on national issues relating to breast cancer.

The meetings continue to be well attended six years after the establishment of the group and the wealth of data collected will provide an ongoing source of information to ensure that women receive the best care available.

Jenny Brogan

Chair of the ACT & SE NSW Breast Cancer Treatment Group

Breast cancer audit

One of the activities of the Breast Cancer Treatment Group has been to collect information from members about the care of patients with breast cancer. This project commencing in May 1997, led to the development of an ongoing community based audit of breast cancer treatment based on clinical indicators agreed by the group.

The audit is an integral part of the Group's activities in maintaining currency of treatment practice. Important features of the project are its prospective nature, wide coverage (the region rather than a single institution) and the inclusion of written consent from each patient before their data is included. A report describing the initial 14 months of the project was published in the Medical Journal of Australia last year.

To date (March 2001) 790 women and 5 men have been included in the data collection. As follow-up information is collected, the audit data-base may become a useful resource for examining treatment outcomes from standard treatment of breast cancer.

The foundation of the project has been voluntary unfunded contribution of data by the region's surgeons and other clinicians.

Paul Craft

Chair of Data Collection sub-committee

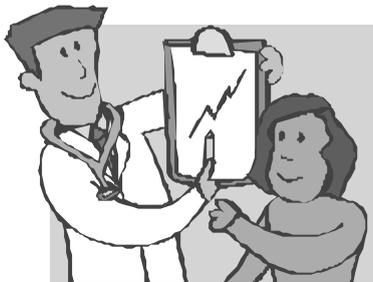
COMMENDATION FROM CONSUMER REPRESENTATIVES

We commend the Breast Cancer Treatment Group on their initiative to establish the Quality Assurance Project to collect breast cancer patient data in the ACT and SE NSW. This information no doubt will assist evidence-based medical decisions in the future and be of benefit to all diagnosed with breast cancer in our region.

It is heartening as consumers to know that we have a very caring group of medical professionals who are interested in the specifics of cases in our region. This demands quite a degree of extra time to participate in the project and we know we represent all consumers in passing on our appreciation for this effort. Whilst national data and guidelines are always of interest and of course, widely accepted, 'close to home' statistics and records of treatment practice are likely to be far more meaningful for us. Being able to accurately report on the recent incidence of breast cancer, the pattern of treatments administered, and the follow-up survival rates means we can have confidence in decisions likely to be made in the future based on the Project data.

Margaret Knott and Anna Wellings-Booth

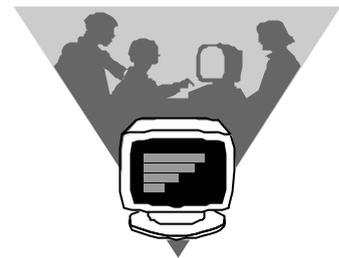
Good response from General Practitioners



Thank you to all the 356 General Practitioners that have sent in the follow-up forms for patients involved in the study. All forms sent to you should be accompanied by a copy of the patients signed consent. Dr Robin Jenkins from ACT BreastScreen requested that

GP's be reminded that mammography will only detect about 90% of cancers, so interval cancers do occur. Please remember to work up any significant breast symptoms with investigation or specialist opinion between mammograms. The National Breast Cancer Centre will be running a series of advertisements to alert women to breast symptoms. If you have any issues you would like to raise in regards to the ACT & SE NSW Project, breast cancer services or indeed any other cancer services issues that should be addressed to the Cancer Services Council, please contact Jenny Weekes on ph: 6201 2351/fax: 6201 2352 or email jrw@cts.canberra.edu.au

Jenny Weekes
GP representative



Collaboration with the Royal Australasian College of Surgeons

The project database serves to provide high quality information for the RACS. Recently an individual surgeons audit report was produced from the project database. The information on the report matched the National Audit form of the College. The audit report was produced for surgeons to be submitted to the College.

Acknowledgements

We would like to acknowledge all those who have supported and contributed to the Project and Group over the last four years. Some of these include Surgeons, Pathologists, Radiation Oncologists, Medical Oncologists, General Practitioners and Medical Secretaries.

Thanks also to the Commonwealth Department of Health and Aged Care Cancer Screening Unit for providing the twelve month's initial funding.

INVITATION

The week of the Royal Australasian College of Surgeons Congress (6-11 May) is a great opportunity for you to come and see where the Quality Assurance Project is located and to have any questions answered.

An invitation will soon be in the mail for you to tell us what day and time you would like to

come.....

Latest Results of the Project

The tables below summarise the results of 795 women and men with breast cancer enrolled by twenty-five clinicians throughout the region from June 1997 to March 2001. Further results will be presented in detail at the Royal Australasian College of Surgeons Annual Scientific Congress in May this year.



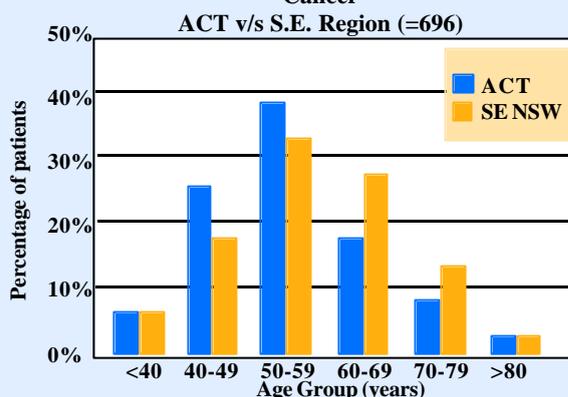
For more information refer to the Group's publication: "Implementing clinical practice guidelines: a community-based audit of breast cancer treatment" *Med J Aust* 2000; 172:213-216.

Characteristics of Patients & Tumours (n=795)

Age (median)	57 years	Range 25-88
Gender		
Female	790	99%
Male	5	1%
Menopausal status		
Pre-	232	29%
Post-	448	56%
Peri-	107	14%
Unknown/Male	8	1%
Diagnosis		
Invasive carcinoma	717	90%
In situ disease only	78	10%
Tumour extent		
Distant metastases at diagnosis	20	3%
Synchronous bilateral tumours	15	2%

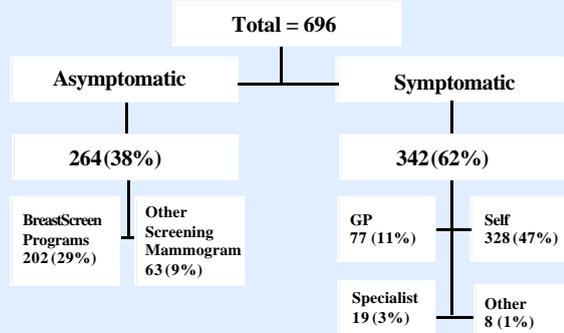
ACT & SE NSW BCTG Quality Assurance Project

Age Distribution: Female Invasive Breast Cancer



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Method of Female Invasive Breast Cancer Detection



ACT & SE NSW BCTG Quality Assurance Project

Surgery Procedures (n=696)

	Breast Conserving (45%)			Mastectomy (55%)
	Biopsy	Local	Re-excision	
Last operation of: (n=694)	1	258	55	380
One operation	463	1	242	0
Two operations	217	16	52	149
Three operations	12		3	9
Four operations	2			2
Axillary dissection	630	217	50	363

* Based on number of women
* No surgery: 2 (1%)

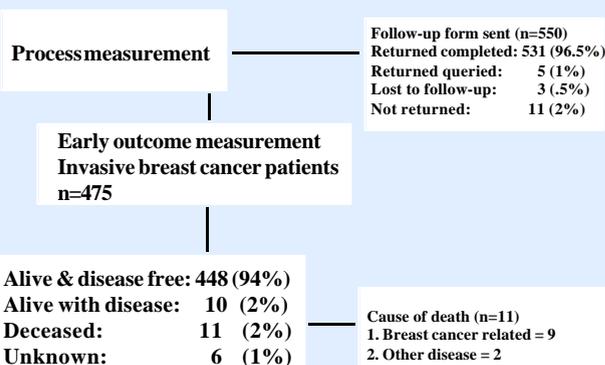
ACT & SE NSW BCTG Quality Assurance Project

Adjuvant Systemic Therapy (n= 696)

Modality	N	%
Radiotherapy N=694		
Post Mastectomy	112	16%
Breast-Conservation	298	43%
Chemotherapy N=696		
CMF	228	33%
AC/EC	36	5%
AC+CMF	35	5%
Other	31	4%
Tamoxifen N=696	468	67%

ACT & SE NSW BCTG Quality Assurance Project

First Year Follow-up Results



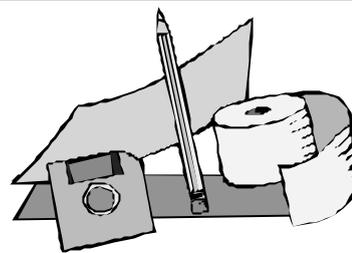
ACT & SE NSW BCTG Quality Assurance Project

Data management tips for the clinician in charge

CONSENT: If you can, please obtain consent as soon as possible. We can not register a patient and use the data until we have received signed consent from the patient.

PATHOLOGY REPORTS: Please send copies of all surgical pathology reports together with the data collection form.

ENVELOPES: A reminder to please use the new reply paid envelopes - 825 not 642.



DATA COLLECTION FORMS:

Please fill in all areas of the data collection form, otherwise if they are left blank you will receive a missing information query.

Data collection forms updated with 'vessel invasion' have been sent out.

The promise of better care

Southern Area Health Service (SAHS) has been represented on this Breast Cancer Treatment Group from its very early times. Not unexpectedly, the database shows that more than one third of people in it are from South East NSW.

While much of the breast surgery is undertaken by surgeons resident in the SAHS, the majority of patients travel to the ACT for at least some of their subsequent treatment.

Many women are able to receive their chemotherapy closer to their homes and this is managed by oncology specialists from the ACT.

As the database grows, it will be valuable to look for ways in which the health systems, particularly SAHS, may be able to improve the care given to women with breast cancer.

Any significant differences between ACT and South East NSW patients in terms of general characteristics, treatment or outcomes may give clues to aspects of care that may be improved through changes in service delivery. The SAHS believes that the advent of the Group and its database gives promise of better care to people with breast cancer.

Robert Arthurson
Southern Area Health Service

The role of the specialist breast care nurse

The Specialist Breast Care Nurse position for the ACT and surrounding region is a challenging and developing role. The role includes patient care, research and audit, patient advocacy and professional and community education.



As a Breast Care Nurse, I am in a unique position within a multidisciplinary team setting to assess and respond to women's needs during the breast cancer journey. This is achieved by providing care through giving information, assisting in decision making, providing practical assistance, as well as emotional and psychological support. Hopefully, in this role I will enhance the care of women diagnosed with breast cancer and promote quality of life beyond the time of diagnosis.

I can be contacted via the Calvary Hospital switchboard or 0411 514 814.

Melva Walter

If you have any enquiries or comments about the project, please contact the Project Co-ordinator. Any clinical questions should be directed to Dr Paul Craft at The Canberra Hospital on (02) 6244 2220. If you require any forms or envelopes please contact the Project Assistant.

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