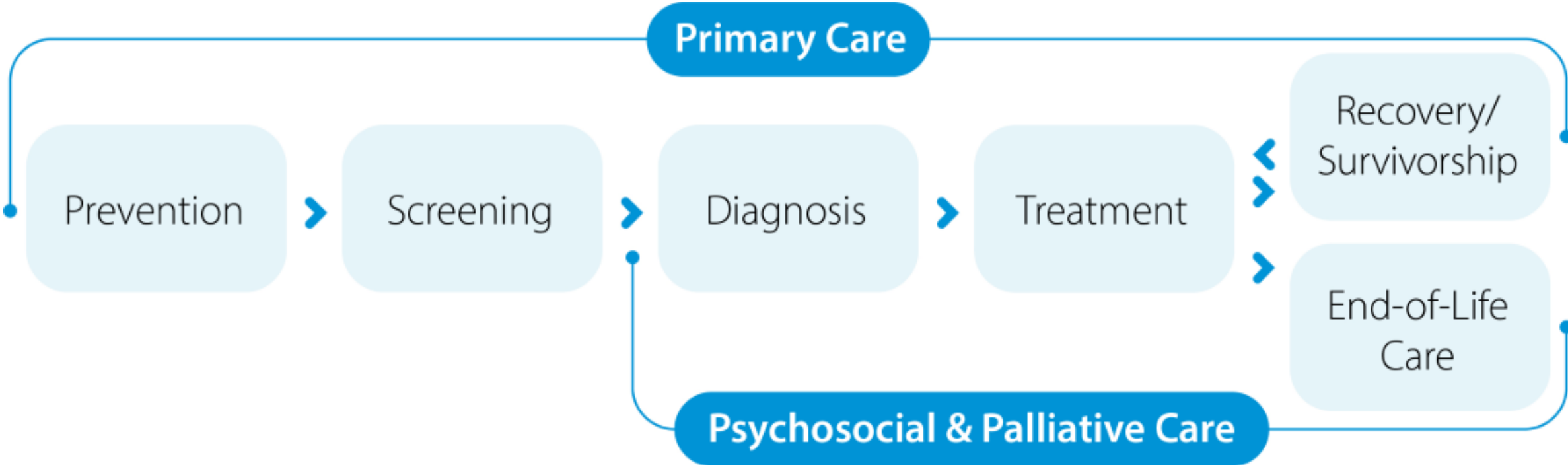


# Breast Cancer Prevention Pathway Map

Version 2021.03



**Disclaimer:** The pathway map is intended to be used for informational purposes only. The pathway map is not intended to constitute or be a substitute for medical advice and should not be relied upon in any such regard. Further, all pathway maps are subject to clinical judgment and actual practice patterns may not follow the proposed steps set out in the pathway map. In the situation where the reader is not a healthcare provider, the reader should always consult a healthcare provider if he/she has any questions regarding the information set out in the pathway map. The information in the pathway map does not create a physician-patient relationship between Ontario Health (Cancer Care Ontario) and the reader.




















### Target Population

People who are at a higher than average risk for breast cancer.

### Pathway Map Considerations

- For more information about the evidence linking risk factors to breast cancer visit:
  - [Cancer Risk Factors in Ontario: Healthy Weights, Healthy Eating and Active Living](#)
  - [Cancer Risk Factors in Ontario: Alcohol Report](#)

### Pathway Map Legend

Colour Guide	Shape Guide	Line Guide
 Primary Care	 Intervention	 Required
 Palliative Care	 Decision or assessment point	 Possible
 Pathology	 Patient (disease) characteristics	
 Surgery	 Consultation with specialist	
 Radiation Oncology	 Exit pathway	
 Medical Oncology	 Off page reference	
 Radiology	 Referral	
 Multidisciplinary Cancer Conference (MCC)		
 Genetics		
 Psychosocial Oncology (PSO)		

### Pathway Map Disclaimer

This pathway map is a resource that provides an overview of the treatment that an individual in the Ontario cancer system may receive.

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## Ontario Breast Screening Program Risk Categories & Criteria

### Average Risk Screening

Women are considered eligible for average risk screening if they are asymptomatic and meet all of the following criteria:

- Are 50-74 years of age\*
- Have no personal history of breast cancer
- Have no current breast implants
- Have not had a mastectomy
- Have not had a screening mammogram within the last 11 months

For more information see: [Breast Screening Guidelines Summary](#)

### Potentially at High Risk (Genetic assessment required to determine eligibility for High Risk OBSP)

Women may be eligible for high risk screening if they are asymptomatic, are 30-69 years of age AND meet one of the following criteria:

- First degree relative of a carrier of a gene mutation associated with a high risk of breast cancer and has **not** had genetic counselling or testing
- A personal or family history of **at least one** of the following:
  - Two or more cases of breast cancer (particularly where diagnosis occurred at  $\leq 50$  years) and/or ovarian cancer (any age) in the family, especially in first-degree or second-degree relatives, on the same side of the family
  - Bilateral breast cancers
  - Both breast and ovarian cancer in the same woman
  - Breast cancer at  $\leq 35$  years of age
  - Invasive serous ovarian cancer
  - Breast and/or ovarian cancer in Ashkenazi Jewish families
  - An identified gene mutation associated with a high risk of breast cancer in any blood relatives
  - Male breast cancer

For more information see: [Breast Cancer Screening for Women at High Risk](#) and [OBSP Requisition for High Risk Screening](#).

### Known High Risk (Eligible for direct entry into High Risk OBSP)

Women are considered eligible for high risk screening if they are asymptomatic, are 30-69 years of age and meet **at least one** of the following criteria:

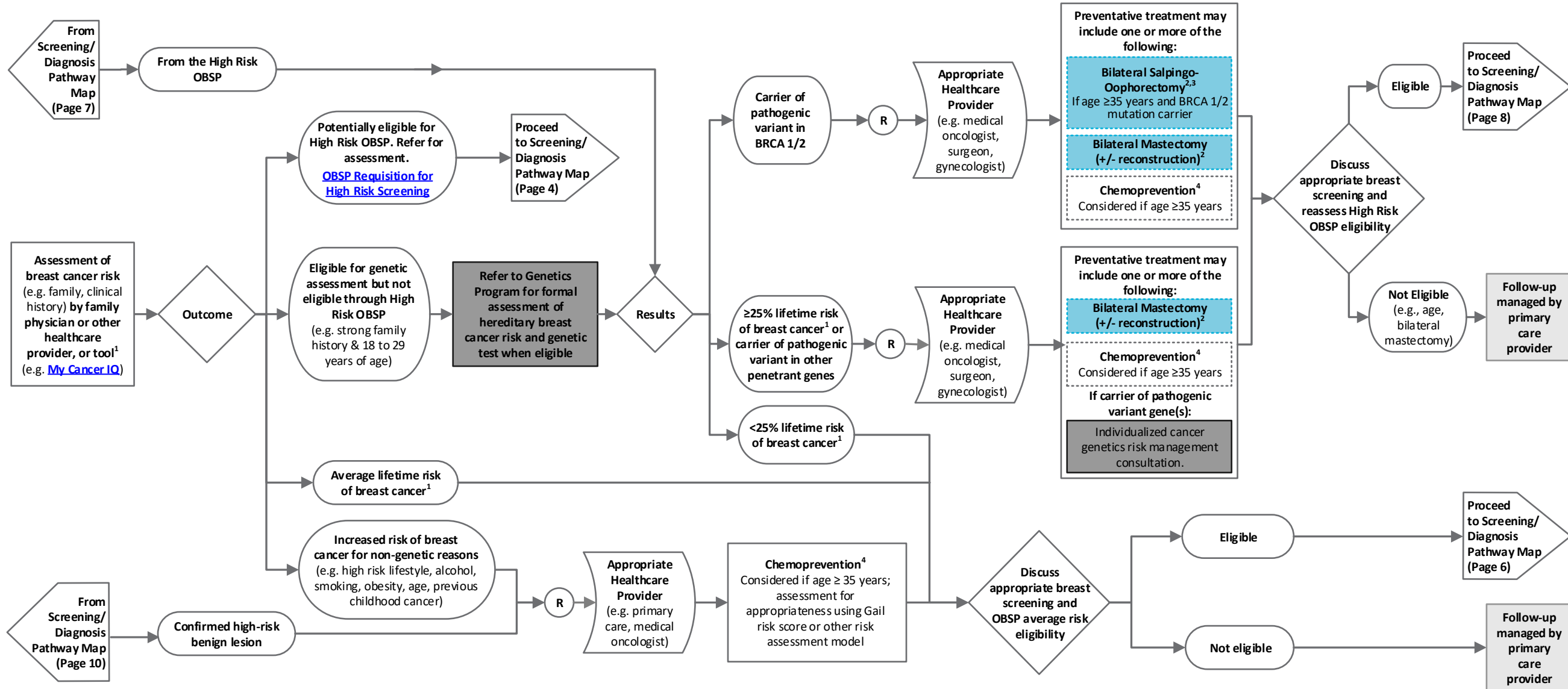
- Known carrier of a gene mutation associated with a high risk of breast cancer
- Have not had genetic testing, but have had genetic counselling because they are a first-degree relative of a carrier of a gene mutation associated with a high risk of breast cancer
- Previously assessed as having a  $\geq 25\%$  lifetime risk of breast cancer based on personal and family history (confirmed at a genetics clinic using the International Breast Cancer Intervention Study (IBIS) or Breast and Ovarian Analysis of Disease Incidence and Carrier Estimation Algorithm (BOADICEA) risk assessment tools; results must be faxed with requisition form.)
- Had radiation therapy to the chest before age 30 and had the radiation at least 8 years ago

For more information see: [Breast Cancer Screening for Women at High Risk](#) and [OBSP Requisition for High Risk Screening](#).

\* Women over age 74 can be screened within the OBSP; however, they are encouraged to make a personal decision in consultation with their healthcare provider. The OBSP will not recall women over age 74 to participate in the program. To continue screening throughout the OBSP, a healthcare provider will need to make a referral.

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**Health behaviour interventions (e.g., exercise, nutrition) should be considered for all individuals of any risk category.**



<sup>1</sup> Lifetime risk of breast cancer should be based on personal or family history and must have been assessed using IBIS or BOADICEA risk assessment tools, preferably by a genetics or breast cancer clinic. For more information on these tools visit <http://www.ems-trials.org/riskevaluator/> for IBIS and <http://ccge.medschl.cam.ac.uk/boadicea/> for BOADICEA.

<sup>2</sup> National Comprehensive Cancer Network (2019). Genetic/Familial High-Risk Assessment: Breast, Ovarian, and Pancreatic (Version 1.2020), Table GENE-A, p.20

<sup>3</sup> For information on the examination of bilateral salpingo-oophorectomy specimens visit the CAP checklists at [www.cap.org](http://www.cap.org)

<sup>4</sup> Use of Endocrine Therapy for Breast Cancer Risk Reduction: ASCO Clinical Practice Guideline Update. Kala Visvanathan et al. Journal of Clinical Oncology 2019 37:33, 3152-31