

Clinical Breast Examination is Important in Surveillance After Mastectomy

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To the Editor,

I read with interest, the paper in press by Tun SM et al: Mode of Detection of Second Events in Routine Surveillance of Early-Stage Breast Cancer Patients.¹

I applaud their efforts to determine the mode of detection (MOD) of cancer recurrences in 351 patients with early-stage breast cancer over a 5-year period, who had at least 5 years of follow-up, as MOD data is not currently collected in most registries.

Happily only 10 had recurrences. Of the 8 in-breast tumor recurrences and contralateral primary cancers, 7 were detected by annual mammography. (The MOD of the 8th was not stated in the available abstract.) Both of the 2 chest wall recurrences in postmastectomy patients were detected by clinical breast examination (CBE).

Yet the authors downplay the relevance of CBE by citing that, “Provider CBE was MOD in *only* 2/351, 0.6% 95% CI (2.1-0.1%) of patients as chest wall recurrences post-mastectomy.” I argue that the better data point is that 2/10 recurrences were detected by CBE, that is, 20%; Not the 0.6% that led the authors to conclude that CBE had low impact.

Disclosure

The authors have stated that they have no conflicts of interest.

Reference

1. Tun SM, Alluri S, Rastegar V, Visintainer P, Mertens W, Makaru-Judson G. Mode of detection of second events in routine surveillance of early-stage breast cancer patients. *Clinical Breast Cancer*. 2022 Pre-print Proof Published: June 28 DOI: [10.1016/j.clbc.2022.06.003](https://doi.org/10.1016/j.clbc.2022.06.003).

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