

## If you

- develop symptoms and are unsure whether they are related to your breast disorder,
- discover abnormalities when you monitor yourself,
- don't feel "quite right" in other ways for a prolonged period,

contact your doctor as soon as possible. Don't wait until the next planned follow-up appointment.

## What can you do to help yourself?

You can boost your own health by finding and taking up a sporting activity you enjoy.

Follow a diet with plenty of fruit and vegetables and only small amounts of harmful things such as alcohol and nicotine.

Maintain contact with people who are good for you. Some people gain new friends and support from a self-help group.

You might discover a new hobby or rekindle your interest in a hobby you used to enjoy.

These things can contribute to an improvement in general wellbeing, and make you feel more comfortable with your body.

You can find further independent information at local cancer advice centres.

(<http://www.krebsinformationsdienst.de/wegweiser/adressen/krebsberatungsstellen.php>)

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## Via Knotenpunkt e.V.

*Women who have either been personally affected by breast cancer or those who work in the field have worked together in the charitable organisation Knotenpunkt since 2003. The aim of the association is to provide independent, factual information about topics relating to breast health and breast disorders.*

*Knotenpunkt e.V. develops clear, multilingual information materials (German, Turkish, Russian, Polish) according to scientifically based research, on topics such as breast cancer follow-up, breast self-examination and mammography screening.*

*Anyone who is interested can download the materials from the internet free of charge. Practices and institutions can also request a large number of printed copies of the leaflets to be sent by post.*

*The association organises information events, lectures and workshops in and around Bielefeld to educate women and encourage them to actively recognise their interests.*

*Knotenpunkt e.V. is independent; the women work on a voluntary basis and finance the work through donations and membership contributions, although monetary donations from the pharmaceutical industry have not been accepted since 2010.*

Knotenpunkt e.V., Bielefeld

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# BREAST CANCER FOLLOW-UP

A guide for patients

The initial treatment for your breast cancer will be an operation, and possibly irradiation or drug treatment as well. Your doctor will then provide an intensive period of observation or follow-up for the next five years.

According to the current guidelines, routine investigations (apart from mammography), including laboratory investigations and tumour markers are not appropriate for affected women who are symptom-free.

Your doctor can advise and support you in dealing with the physical and the psychosocial demands of your illness.

Sports rehabilitation, physiotherapy, massage and lymph drainage can be prescribed according to need. Residential rehabilitation and/or accompanying discussions, for example with psychologists, can contribute to improvement in physical performance and psychological balance.

Your return to work can be facilitated by means of a step by step rehabilitation.

It is possible to apply to the appropriate authority for a pass for the severely disabled, which will generally be provided for a limited period.

After the first five years of follow-up the medical care takes place as part of the annual gynaecological cancer screening tests.

The Arbeitsgemeinschaft Gynäkologische Onkologie [Working Group Gynecologic Oncology] has developed a follow-up treatment concept to provide guidance for the gynaecologists providing your medical care.

### Clinical follow-up guidelines for women who are symptom-free

| Years after initial treatment   |                                     | 1 <sup>st</sup> , 2 <sup>nd</sup> and 3 <sup>rd</sup> year  | 4 <sup>th</sup> and 5 <sup>th</sup> year |
|---|-------------------------------------|---|--|
| Detailed consultation with a doctor (medical history), physical examination, advice |                                     | every 3 months  | every 6 months                           |
|   |                                     | in cases of DCIS/LCIS* every 6-12 Months  |  |
| Imaging procedures and/or laboratory investigations                                 |                                     | only when new symptoms occur and/or there are abnormal findings and/or there is suspicion of a recurrence or metastasis |  |
| Mammography; ultrasound where appropriate   | following breast-conserving surgery | both breasts, every 12 months where appropriate the affected breast every 6 months                                      |  |
|   | after breast removal                | the remaining breast, every 12 months   |  |
|   | in cases of DCIS/LCIS*              | both breasts, every 12 months   |  |

Own illustration based on: Arbeitsgemeinschaft Gynäkologische Onkologie e.V. – Commission Mamma Guidelines Breast, Version 2015.1

\*) DCIS: Ductal carcinoma in situ  
 LCIS (CLIS): Lobular carcinoma in situ  
 Terms for pre-cancerous conditions in the milk ducts and lobules of the breast.

This follow-up treatment concept can be modified to suit your individual situation.

Ultrasound examinations of the breast in addition to individual mammograms are at the discretion of the doctor treating you.