



## AB156. 129. Surveillance strategies for patients at a family history risk assessment clinic

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**Background:** Women with a family history of breast cancer are assessed in University Hospital Limerick (UHL) using the Family History Risk Assessment Software (FaHRAS, Nottingham, UK) tool, which allows risk stratification of women using the International Breast Cancer Intervention Study (IBIS) risk model. Follow up surveillance of these women is then arranged according to the National Institute for Clinical Excellence (NICE) guidelines on Familial Breast Cancer. The aim was to assess the compliance of follow-up of patients attending the Family History Breast Clinic at UHL with the corresponding NICE guidelines. To establish the outcomes of patients who were assessed with the FaHRAS risk assessment software.

**Methods:** Patients identified using i Patient Manager v5.0 (iPiMS-UHL). Family History Clinic lists obtained from 1st January 2016 to 31st December 2017 using iPiMS. Patients clinic letters obtained and their FaHRAS risk stratification identified. national integrated medical imaging service (NIMIS) x11.7.3.373 was used to identify imaging the patients underwent. NICE Guidelines for Familial Breast Cancer was used to compare against our compliance of patients attending Family History Breast Clinic at UHL. **Results:** A total of 178 patients attended family history clinics. Stratification risk according to FARAH computer program: population risk; 90% correctly discharged to GP, 10% were seen in clinic with annual mammograms. Moderate risk; 85% patients correctly followed-up, 15% received imaging when not required. High risk; 77% correctly followed-up, 23% received magnetic resonance imaging (MRI) imaging when not required.

**Conclusions:** A percentage of patients are not being assessed appropriately in our Family History Clinic according to the NICE guidelines on Familial Breast Cancer.

**Keywords:** Breast; family history clinic

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