

AB170. SOH22ABS197. Streamlining the family history

service in a symptomatic breast clinic: a quality improvement project

Nichola McNamara¹, Barbara Julius², Shona Tormey¹, Anne Merrigan¹

¹Symptomatic Breast Unit, University Hospital Limerick, Limerick, Ireland; ²Department of Surgery, University of Limerick, Limerick, Ireland

Background: Breast cancer is the most common invasive malignancy diagnosed in women in Ireland (NCRI 2011; HIQA 2013). Women with a family history of breast cancer account for approximately 30% of breast clinic activity in our service. In 2019, asymptomatic women with a family history outnumbered those attending for surveillance post cancer treatment. The family history service was not streamlined and variations existed in the approach to surveillance for these women.

Methods: We undertook a quality improvement project to streamline the family history clinic, based on the NICE guidelines (2019). We implemented the International Breast Cancer Intervention Study (IBIS) tool for formal risk assessment. An algorithm for follow up was displayed in each clinic room, with education sessions for all staff. We compiled patient information leaflets explaining risk and giving health promotional advice.

Results: Over a 4-month period, 380 women have been safely discharged from the breast clinic: 89 were discharged to BreastCheck, 75 were population risk, 186 were moderate risk women for mammogram screening only, and 30 women aged <40 years were discharged to their GP. All women attending the breast clinics are now formally risk assessed using the IBIS tool. Women are followed up according to

their risk and discharged when appropriate.

Conclusions: Streamlining the family history pathway results in clear surveillance plans for patients. This will lead to an improved and individualised service for asymptomatic women. It will also reduce clinic visits for each woman, thereby allowing capacity to promptly assess family history patients with new breast symptoms. It will also increase capacity to review new patients.

Keywords: Breast cancer; family history; quality improvement; risk assessment; women

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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