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News

Cancer risk assessment studied

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NEW HAVEN — Women with one of the least dangerous forms of breast cancer soon may be able to find out if they are at risk for a more lethal type, according to a study led by a Yale University scientist.

The findings mean women with ductal carcinoma in situ can more intelligently decide on a course of treatment, potentially avoiding mastectomy or radiation when they have a low risk of new disease, according to a press release.

"With these findings, a patient will be able to assess her risk of subsequently developing invasive cancer or DCIS — or not developing further tumors," said Annette Molinaro, assistant professor of biostatistics at the Yale School of Public Health and a lead author of the study. "This separation into risk groups will assist in determining an appropriate treatment regimen tailored to an individual woman's clinical profile."

The study looked at 1,162 women who underwent lumpectomies after being diagnosed with DCIS, a relatively nonlethal form of cancer that usually does not spread beyond the initial tumor.

The study found women who discovered they have DCIS because a lump was found in their breast are more likely to develop a more serious cancer later than those whose DCIS was discovered in a mammogram, the press release said.

Another finding was that certain biomarkers found in the cancerous tissue, including estrogen and progesterone receptors, predicted how much risk a woman would have of developing more invasive cancer, according to Yale.

About 11 percent of women who have lumpectomies develop more serious cancer within eight years of discovering DCIS, the statement said, but just 1 percent to 2 percent of women with breast cancer die of the disease.

Many women with DCIS tend to choose more aggressive treatments than necessary, with 35 percent having a lumpectomy, 25 percent having a mastectomy, 3 percent to 5 percent choosing to monitor their cancer and the rest having a lumpectomy with radiation, hormone treatment or both, the release said.

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