

How do I get more information?

When you attend the clinic the benefits and limitations of screening will be explained to you.

If you need further information at another time you can contact Nicky Turner (contact details below).

Tel: 01476 593945 and leave a message

Email: breastteam.grantham@ulh.nhs.uk

We hope this leaflet has answered some of your questions. If you require any more advice please contact us on:

01476 593945 and leave a message.

General statements made in this leaflet do not apply in every case, as each patient is an individual. Your doctor will advise you of any specific information.

Breast Cancer Care

0808 800 6000

www.breastcancercare.org.uk

breast
cancer
care

Breast cancer now

08080 100200

www.breastcancernow.org

breast cancer
now

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at patient.information@ulh.nhs.uk

Excellence in rural healthcare

NHS
United Lincolnshire
Hospitals
NHS Trust

Family History Clinic Information Moderate risk



Breast Services

www.ulh.nhs.uk

Population risk

There is a chance that breast cancer can be familial and therefore you have been seen in the family history clinic to assess your personal risk. There is approximately a 5% chance that there could be a defective gene causing familial breast cancer, however, for 95% of patients their breast cancer is not familial.

The risk of developing breast cancer increases with age and therefore screening programmes are in place to manage this risk.

Your risk

Following your visit to clinic today and based on the information you have provided, we have been able to calculate your predicted risk as below:

This shows:

Your 10-year risk is
Your lifetime risk is

We use the following criteria to establish your surveillance schedule. This is:

Low Risk:	< 3% 10-year risk	< 17% lifetime risk
Moderate Risk:	3-8% 10-year risk	> 17-30% lifetime risk
High Risk	> 8% 10-year risk	> 30% lifetime risk

Therefore based on the above assessment, we would recommend that you follow the **moderate risk pathway**. This is:

- No clinical review after first clinic visit.
- Annual mammography from the age of 40-50. You can consider extended mammography to the age of 60. Please discuss this with us.
- Advised to remain breast aware.

We will provide you with information with regard to Breast Awareness, Lifestyle advice and mammography risks/benefits. Chemoprevention advice is also available.

What next

Your risk assessment may change if there is a change in your family history. It is therefore important to advise us of any changes you are made aware of. We can then recalculate your predicted risk and advise you if your surveillance pathway should change.

There are no current indications to refer you to a specialist genetics service, however, this may change in the future. If you would like to be considered for referral for assessment by them, please advise and we can arrange this for you, if it is agreed to be appropriate.

If you notice any breast changes, please contact your GP for an appointment and if required, they will refer you to our diagnostic service.

Further support

There may be local or national support groups that are able to offer you support and you can obtain free leaflets from:

www.breastcancercare.org.uk or
www.breastcancernow.org

Clinical trials

There may be clinical trials that are appropriate for you to consider enrolling in. We may contact you with regard to these, however, you are under no obligation to consider these if you do not want to.