

5 Appropriate to offer biopsy of accessible metastases to assess biological markers (such as oestrogen and progesterone receptors, and HER2 status), and to offer germline genetic testing for BRCA1/2, if the result is likely to lead to a change in the management of patients with metastatic breast cancer.

WHAT THIS PRACTICE IS ABOUT

This practice highlights the importance of testing tissue or blood samples from people with metastatic breast cancer, to help guide decisions about treatment.

Treatment options for metastatic breast cancer depend on the biological features of breast cancer cells. This includes whether the cells have certain receptors on them, such as hormone receptors or the HER2 receptor.

When cancer spreads to another part of the body, the receptors on the new cancer cells can be different to those on the original breast cancer cells. This means that treatments that were not recommended for someone with early breast cancer may now be an option. Testing a sample of cancer tissue from another part of the body can be helpful to guide the choice of treatment. This may require a new biopsy or may use tissue from the person's early breast cancer if it is still available in the pathology department. A blood test may also be helpful to help decide which treatments are suitable.

The choice of treatment may also depend on whether the person carries a gene fault known to affect the risk of breast cancer. Examples include a fault in the BRCA1 or BRCA2 gene. If genetic testing has not been done previously, it may be useful to look for faulty genes.

WHY THIS PRACTICE MIGHT BE IMPORTANT FOR YOU

It is important to know as much as possible about the breast cancer cells in your body to make sure you receive the treatments that are likely to be most effective for you. Your doctors may recommend that you have a biopsy and/or a blood test to help make decisions about suitable treatments.

A biopsy may involve taking tissue from an area where cancer has spread to (that is, not from the breast). Depending on what other tests you have had, it may also be helpful to test a sample of the original breast cancer. This is possible if tissue is still available in the pathology department.

QUESTIONS TO ASK

Do you recommend a new biopsy or blood test for me?

What information will a biopsy or blood test provide?

What is involved in having a biopsy?

Is any tissue still available from the original breast cancer?

Would it be useful to test this tissue?

MORE INFORMATION

For more information on the *Cancer Australia Statement – Influencing best practice in metastatic breast cancer* and to access supporting resources, visit canceraustralia.gov.au/statement



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Influencing best practice in metastatic breast cancer

Metastatic breast cancer is cancer that has spread from the breast to other parts of the body. It is also known as advanced breast cancer or secondary breast cancer. People with metastatic breast cancer experience a range of emotional, physical and practical challenges.

The aim of treatment and care for people with metastatic breast cancer is to control the growth and spread of the cancer, relieve symptoms and help people live as well as possible. There is evidence that approaches to treatment and care vary across Australia.

It is important that everyone with metastatic breast cancer receives evidence-based information, treatment and support that reflect their individual needs and preferences. This includes avoiding treatments that may not provide meaningful benefits or may cause harm.

ABOUT THE STATEMENT

The aim of the *Cancer Australia Statement – Influencing best practice in metastatic breast cancer* is to reduce unwarranted variation in the treatment and care of people with metastatic breast cancer in Australia.

The Statement focuses on 10 practices that have been identified as appropriate or inappropriate in the treatment and care of people with metastatic breast cancer, to help them to live as well as possible. This includes providing the treatment and care that is most likely to benefit the patient, and avoiding treatments that are unlikely to help, or that may be harmful.

Not every practice is relevant for every person diagnosed with metastatic breast cancer. The practice(s) relevant to an individual will depend on their diagnosis and situation.

HOW WAS THE STATEMENT DEVELOPED?

The Statement is based on available national and international evidence and was developed with input from a range of experts and people affected by metastatic breast cancer. The Statement has the support of key clinical colleges, cancer and consumer organisations.

USING THE STATEMENT

The Statement aims to empower people with metastatic breast cancer and their families to make informed decisions about treatment and care that are right for them. A key part of informed decision making is to talk to health professionals and ask questions about available options for treatment, care and support.

You may wish to talk to your health professionals about which practices in the Statement are most relevant for you. Each practice includes a few questions that you may find helpful to guide conversations about your treatment and care options.

MORE INFORMATION

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