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## [Follow-Up Care for Breast Cancer \[1\]](#)

*December 7, 2015*

To help doctors provide their patients with the highest quality care, the American Society of Clinical Oncology (ASCO) provides recommendations for follow-up care for women who have received treatment for breast cancer. This article combines recommendations updated in 2012 by ASCO and recommendations from ASCO and the American Cancer Society (ACS) developed in 2015.

### **The importance of follow-up care**

After treatment for breast cancer, follow-up care is important to help maintain good health, manage any side effects from treatment, watch for signs that the cancer has come back after treatment, and screen for other types of cancer. A follow-up care plan may include regular physical examinations and other medical tests to monitor your recovery during the coming months and years. You and your doctor should work together to develop a personalized follow-up care plan. Be sure to ask about any concerns you have about your future physical or emotional health. ASCO offers [forms to create a treatment summary to keep track of the cancer treatment you received and develop a survivorship care plan \[2\]](#) once treatment is completed.

### **Signs of a breast cancer recurrence**

Many survivors feel worried or anxious that the cancer will come back after treatment. While it often does not, it's important to talk with your doctor about the possibility of the cancer returning. Most breast cancer recurrences are found by patients between doctor visits. Tell your doctor if you notice any of the following symptoms, as they may be signs of a cancer recurrence:

- A lump under the arm or along the chest wall
- Rash or skin changes on the breast or chest wall
- Changes in the shape or size of the breast or swelling in the breast or arm
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Pain that is constant, worsening, and not relieved by over-the-counter medication

- Bone pain or fractures, a possible sign of bone metastases
- Seizures or long-lasting headaches that don't improve with over-the-counter pain medication, such as Tylenol or aspirin. These are possible signs of brain metastases
- Chronic coughing or trouble breathing, possible symptoms of lung metastases
- Abdominal pain or yellow skin and eyes from a condition called jaundice, which may be associated with liver metastases
- Changes in vision, excluding changes in near or distance vision
- Changes in energy levels, such as feeling ill or extremely tired
- Having a poor appetite and/or weight loss

## **Breast cancer recurrence screening recommendations**

After breast cancer treatment, you may continue to visit your oncologist for some time and then transfer your care to a primary care doctor. Screening for a recurrence is based on your age, specific diagnosis, and the treatments you received. In general, the following screening tests and schedule are recommended:

- **Medical history and physical examination.** Visit your doctor every 3 to 6 months for the first 3 years after the first treatment, every 6 to 12 months for the next 2 years, and then once each year thereafter.
- **Mammography.** Schedule a [mammogram](#) [3] 1 year after the first mammogram that led to your diagnosis. However, if you have had radiation therapy, wait 6 months after your last treatment. After this first post-treatment mammogram, mammography is recommended at least every year, either on one or both breasts depending on the type of surgery you received.
- **Breast self-examination.** Perform a breast self-examination every month. This procedure is not a substitute for a mammogram.
- **Genetic counseling.** Another important part of follow-up care is to tell your doctor if you have a history of cancer in your family because you may benefit from genetic counseling. Learn more about [how to know if breast cancer may run in your family](#) [4].
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**Hormonal therapy.** If it is a part of your treatment plan, continue hormonal therapy as directed by your oncologist. Learn more about [hormonal therapy for breast cancer](#) [5].

## Appropriate use of tests to diagnose a breast cancer recurrence

The tests listed below have not been shown to be helpful to monitor for a breast cancer recurrence. However, doctors may use these tests to learn more about the causes of complex symptoms and side effects after treatment. Learn more about [why these tests may not be recommended for routine follow-up care](#) [6].

- A complete blood count (CBC) test and liver and kidney function tests
- Chest x-ray
- Bone scan
- Liver ultrasound
- Computed tomography (CT or CAT) scan
- Fluorodeoxyglucose-positron-emission tomography (FDG-PET) scan
- Breast magnetic resonance imaging (MRI) test, unless you have a high risk of breast cancer
- Breast cancer tumor markers, such as CA 15-3, CA 27.29, and carcinoembryonic antigen (CEA).

Learn more about these [tests and procedures](#) [7].

## General health and cancer screening recommendations

Women recovering from breast cancer are encouraged to follow established guidelines for good health, such as reaching and maintaining a healthy weight, exercising, not smoking, eating a balanced diet, and following cancer screening recommendations.

Here are general recommendations for women recovering from breast cancer:

- Focus on eating more fruits, vegetables, whole grains, and legumes. Eat fewer high-calorie foods and beverages and less saturated fat.
- Be physically active for at least 150 minutes of moderate or 75 minutes of vigorous activity each week.
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Include strength training exercises at least 2 days per week. In particular, women who received chemotherapy or hormonal therapy should work on maintaining and/or building strength.

- Limit alcohol consumption to no more than one drink per day.
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- Quit smoking or using other types of tobacco.
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- Follow recommendations for general cancer screening. Women who have been through menopause and are receiving a type of hormonal therapy called a selective estrogen receptor modulator (SERM), such as tamoxifen (Nolvadex, Soltamox), should have a gynecologic exam yearly and tell the doctor about any vaginal bleeding.

Talk with your doctor or other member of your health care team to help you develop an [exercise plan](#) [8], [eating plan](#) [9], and cancer screening schedule that is best for you. In addition, if you smoke or use tobacco, talk with your health care team about [resources to help you quit](#) [10].

## Managing long-term side effects

Screening and monitoring for long-term side effects of breast cancer treatment is an important part of follow-up care. ASCO and ACS recommend that your doctor assess whether you are at risk for any of the following long-term side effects of breast cancer. Learn more about the [long-term side effects of cancer treatment](#) [11].

- [Lymphedema](#) [12]. Ask about ways to prevent or lower your risk of lymphedema. Consider seeing a professional who specializes in managing this condition, such as a physical therapist, occupational therapist, or lymphedema specialist.
- Heart problems
- [Cognitive](#) [13] or thought-process changes
- [Depression](#) [14] and [anxiety](#) [15]
- [Fatigue](#) [16]
- [Bone health](#) [17], particularly for women who have been through menopause, woman taking hormonal therapy, and women who went through menopause because of chemotherapy.
- [Pain](#) [18] and [neuropathy](#) [19] (nerve damage)
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[Fertility](#) [20], for women who are of childbearing age

- [Sexual health](#) [21], intimacy, and [body image](#) [22]
- [Hot flashes and early menopause](#) [23]

## What This Means for Patients

Regularly scheduled follow-up care helps increase the likelihood of finding a treatable recurrence and of managing any long-term side effects. Discussing your risk of recurrence and long-term side effects is important as you are nearing the end of your cancer treatment. Knowing this information helps your doctor develop an appropriate follow-up care plan.

Different people have different risks, so it is important to talk with your doctor about how your risk affects your follow-up care schedule. And, ask about whether your risks affect who provides your follow-up care. Many people who have finished treatment for breast cancer receive their follow-up care through their primary care doctor. Your breast cancer specialist can provide you and your primary care doctor a written treatment summary, as well as recommendations for your follow-up care.

## Questions to Ask the Doctor

To learn more about follow-up care for breast cancer, consider asking your doctor the following questions:

- What is my risk of recurrence?
- What follow-up tests will I need, and how often will I need them?
- Who will be coordinating my follow-up care?
- If I move or need to switch doctors, how do I make sure to continue my recommended follow-up care schedule?
- How often will I need a mammogram?
- What signs and symptoms should I watch for?
- How do I get a treatment summary and survivorship care plan to keep in my personal records?
- Where can I find more information about follow-up care?

## Helpful Links

Read these entire clinical practice guidelines at [www.asco.org/guidelines/breastfollowup](http://www.asco.org/guidelines/breastfollowup) [24] and [www.asco.org/guidelines/breast survivorship](http://www.asco.org/guidelines/breast survivorship) [25].

[Guide to Breast Cancer](#) [26]

[The Importance of Follow-Up Care](#) [27]

[Life After Cancer](#) [28]

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### Links:

- [1] <http://www.cancer.net/research-and-advocacy/asco-care-and-treatment-recommendations-patients/follow-care-breast-cancer>
- [2] <http://www.cancer.net/node/25394>
- [3] <http://www.cancer.net/node/24584>
- [4] <http://www.cancer.net/node/18621>
- [5] <http://www.cancer.net/node/29866>
- [6] <http://www.cancer.net/node/30461>
- [7] <http://www.cancer.net/node/24959>
- [8] <http://www.cancer.net/node/24967>
- [9] <http://www.cancer.net/node/24965>
- [10] <http://www.cancer.net/node/28476>
- [11] <http://www.cancer.net/node/25396>
- [12] <http://www.cancer.net/node/25250>
- [13] <http://www.cancer.net/node/25044>
- [14] <http://www.cancer.net/node/30346>
- [15] <http://www.cancer.net/node/30336>
- [16] <http://www.cancer.net/node/25048>
- [17] <http://www.cancer.net/node/29711>
- [18] <http://www.cancer.net/node/25259>
- [19] <http://www.cancer.net/node/24588>
- [20] <http://www.cancer.net/node/29096>
- [21] <http://www.cancer.net/node/31086>
- [22] <http://www.cancer.net/node/25264>
- [23] <http://www.cancer.net/node/25257>
- [24] <http://www.asco.org/guidelines/breastfollowup>
- [25] <http://www.asco.org/guidelines/breast survivorship>
- [26] <http://www.cancer.net/node/31322>
- [27] <http://www.cancer.net/node/29386>
- [28] <http://www.cancer.net/node/25400>