

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Scope for guideline update (starting 2023)

Early and locally advanced breast cancer: diagnosis and management

NICE is updating its guideline on [early and locally advanced breast cancer: diagnosis and management \(NG101\)](#). The guideline was originally published in February 2009 and last updated in July 2018. It was developed as set out in the [2018 scope](#) for the NICE guideline on early and locally advanced breast cancer: diagnosis and management.

New evidence about radial margin width after breast-conserving surgery suggests that the recommendations in the [guideline section on surgery to the breast](#) may need updating. Full details are set out in the [January 2023 surveillance review decision](#).

The update will be developed using the methods and processes in [developing NICE guidelines: the manual](#).

1 Who the guideline update covers

The current guideline update covers:

- Adults (18 and over) who have had breast-conserving surgery because of newly diagnosed invasive adenocarcinoma of the breast of any size (T1–T4), with or without spread to locoregional lymph nodes (N0–N3) and with no distant metastases (M0).
- Adults (18 and over) who have had breast-conserving surgery because of newly diagnosed ductal carcinoma in situ (DCIS).

Exclusions

- People who have had a mastectomy instead of breast-conserving surgery
- People who have had intraoperative radiotherapy

- People who have had neoadjuvant therapy
- People with multicentric breast cancer
- People who have mastectomy by choice after breast conserving surgery based on their greater genetic risk of breast cancer (e.g., people with BRCA1 and BRCA2 gene mutations)

The groups covered by the rest of the guideline will remain unchanged.

Equality considerations

The [equality impact assessments for the 2018 guideline](#) list equality issues identified during its development and how they have been addressed.

The equalities and health inequalities assessment (EHIA) in [appendix B](#) provides details of equality and health inequalities issues that were identified during the [2023 surveillance review](#). The EHIA form will replace the equality impact assessment form which was used previously. The equality impact assessment for the 2018 guideline will be checked and any issues relevant to the current update that were not identified in the surveillance review will be included in the EHIA for this review question.

This update will look at equality and health inequality issues relating to protected characteristics (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual orientation), socioeconomic status and deprivation, geographical variation, and inclusion health and vulnerable groups. The issues that have been identified during scoping are summarised in the [scoping stage EHIA](#). In addition, there is a [health inequalities briefing](#) for breast cancer that will be used during development of this update. Consideration will also be given to where health inequality issues arise (for example access to and quality of care).

2 Activities, services or aspects of care covered by the guideline update

We will look at the evidence and consider making new recommendations or updating existing recommendations on:

- Surgery to the breast (section 1.3)

For all other areas of the guideline:

- There will be no evidence review.
- We will retain the existing recommendations, but we may revise them to ensure consistency. In some cases minor changes may be made – for example, to update links or bring the language and style up to date – without changing the intent of the recommendation.

3 Draft review question

We have identified the following draft review question:

What is the optimum tumour-free radial margin after breast-conserving surgery for adults with ductal carcinoma in situ (DCIS) and/or invasive breast cancer to minimise the risk of local recurrence and maximise overall survival and patient satisfaction?

4 Economic aspects

We will take economic aspects into account when making recommendations. We will review the economic evidence, using an NHS and personal social services perspective, as appropriate. We will also consider economic impacts in certain subgroups of patients, including how a patient's circumstances might lead to preferences for certain treatment options when re-excision is discussed (for example, choosing mastectomy to avoid the need for repeated travel for radiotherapy appointments).

5 NICE guidance and quality standards that may be affected by this guideline update

No other NICE guidance has been identified that may be affected by this update and the [Breast cancer \(2011\)](#) NICE quality standard QS12 does not cover further surgery to the breast.

6 Further information

NICE guidelines cover health and care in England. Decisions on how they apply in other UK countries are made by ministers in the [Welsh Government](#), [Scottish Government](#) and [Northern Ireland Executive](#).

The guideline update is expected to be published in February 2024.

To follow the progress of the update, see the guideline in development page.

Our website has information about [how NICE guidelines are developed](#).

© NICE 2023. All rights reserved. Subject to [Notice of rights](#).