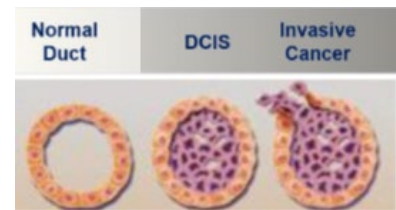


## FREQUENTLY ASKED QUESTIONS ABOUT DCIS OF THE BREAST.

### Is Ductal Carcinoma in Situ (DCIS) cancer?

Cancer is a disease that starts as a growth in one place (for example, the breast or the colon or the lung) and spreads to other places. DCIS is a condition where abnormal cells appear in the milk ducts of the breast; “in situ” is Latin for “in place” so while the cells have some features of cancer, like the ability to grow abnormally, they don’t yet have the most important feature of cancer, which is the ability to spread to other parts of the body. In this sense, DCIS is not really cancer.



### Does DCIS need treatment?

Strictly speaking, DCIS does not need treatment since abnormal cells inside the ducts are not causing any harm as long as they stay “in place” inside the duct. However, in some cases, if left alone long enough, the DCIS cells can learn to break through the duct wall and become “invasive”. The reason to treat DCIS is to prevent it from spreading beyond the duct.

### What is the usual treatment for DCIS?

Because DCIS has a few different growth patterns, there can be different recommendations for treatment. Currently, DCIS is almost always removed surgically; many women are advised to have radiation after surgery; and if the DCIS cells have a protein that binds estrogen (called estrogen receptor or ER), women are advised to take tamoxifen or similar drugs to prevent new occurrences of DCIS or invasive cancer.

### Is it dangerous to delay surgery for DCIS?

To the best of our knowledge, most DCIS takes a long time, probably years, to turn into invasive cancer. Therefore, doctors in this field agree that patients can take their time to consider their options and plan around their schedules, often taking six weeks or longer. Women participating in clinical trials that test medical treatment prior to surgery have waited up to six months to have surgery. In fact, there are enough questions about whether these treatments (surgery, radiation, medication) are necessary for all DCIS, that clinical trials have been started in the US and Europe to study the idea that women with low-risk DCIS can safely avoid having surgery.

### Why consider a DCIS clinical trial?

At the moment, women who want to have less-than-usual treatment for DCIS are encouraged to consider a clinical trial that tests a lesser approach to DCIS therapy, because we still have much to learn about how to best treat women with DCIS. We appreciate you considering this trial. Your care will not be affected by whether you choose to participate or not. Participation may not directly benefit you, but like the women before you who participated in trials and taught us how to treat breast cancer, you will help to increase our knowledge about how to give the women with DCIS the treatment they need (not too much, and not too little!)



**NATIONAL  
CANCER  
INSTITUTE**



**ROBERT H. LURIE  
COMPREHENSIVE CANCER CENTER**  
OF NORTHWESTERN UNIVERSITY



**DukeHealth**



**Memorial Sloan-Kettering  
Cancer Center**



**Cleveland Clinic**



**MAYO CLINIC**



**St. Elizabeth  
HEALTHCARE**

**THE UNIVERSITY OF KANSAS  
CANCER CENTER**

If you would like to learn more about this study, please contact the study coordinators:

**Northwestern University**

Azza Mohamed  
azza.akasha@northwestern.edu  
(312) 472-4759

**Duke University**

Melissa Rodgman  
melissa.rodgman@duke.edu  
(919) 684-8151

**University of Kansas Cancer Center**

Andrea McConnell  
Amconnell2@kumc.edu  
(913) 945-9887

**Memorial Sloan Kettering Cancer Center**

Tenzin Dechen  
dechent@mskcc.org  
(646) 888-5288

**Cleveland Clinic**

Brenna Elliot  
elliott2@ccf.org  
(216) 445-4217

**Mayo Clinic**

Gen Smith  
smith.gen@mayo.edu  
(507) 284-0602

**St Elizabeth Healthcare**

Sara Cahill  
Sara.Cahill@stelizabeth.com  
(859) 301-5889

<https://www.nucancerprevention.org/breast>  
<http://bit.ly/toptamresearch>



Scan this code with your smart phone's camera, or visit the links listed above for more information.