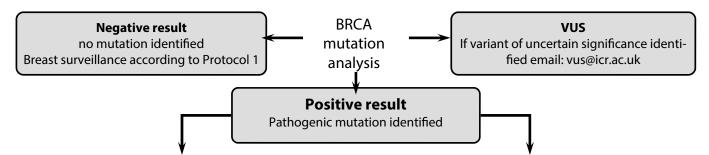
# Protocol 3 BRCA mutation carrier guidelines





#### **BRCA1** risks\*

**Unaffected carriers:** 

#### **Breast Cancer**

Lifetime risk (to 80 yrs): 60%-90%

Average remaining lifetime and 5 year risks - see table below

#### **Ovarian cancer**

Lifetime risk: 40%-60%

Majority of lifetime risk conferred after age 40

#### Male breast cancer

Lifetime risk ~0.1-1%

#### **Prostate cancer**

Lifetime risk similar to population risk ~8%

Affected carriers:

#### Women with unilateral breast cancer

Lifetime risk contralateral breast cancer ~50%

Overall 5 year risk ~10%

# BRCA2 risks\*

**Unaffected carriers:** 

# Breast Cancer

Lifetime risk (to 80 yrs): 45%-85%

Average remaining lifetime and 5 year risks - see table below

#### **Ovarian cancer**

Lifetime risk: 10%-30%

Majority of lifetime risk conferred after age 50

#### Male breast cancer

Lifetime risk ~5-10%

#### **Prostate cancer**

Lifetime risk ~25%

Affected carriers:

#### Women with unilateral breast cancer

Lifetime risk contralateral breast cancer ~50%

Overall 5 year risk ~5-10%

BRCA1-Breast cancer risks*		
Current age (yrs)	Approximate remaining lifetime risk to 80 yrs	Approximate 5 yr risk
20-25	70%	5%
26-30	70%	5%
31-35	65%	5%
36-40	65%	10%
41-45	60%	10%
46-50	55%	15%
51-55	50%	15%
56-60	40%	10%
61-65	30%	10%
66-70	25%	10%

DICAZ-Dieast Cancer risks		
Current age	Approximate remaining	Approximate
(yrs)	lifetime risk to 80 yrs	5 yr risk
20-25	70%	~1%
26-30	70%	2%
31-35	65%	5%
36-40	65%	5%
41-45	60%	10%
46-50	55%	10%
51-55	50%	10%
56-60	50%	10%
61-65	45%	15%
66-70	35%	15%

BRCA2-Breast cancer risks\*

# **Carrier management**

#### Surveillance\*

#### Breast

Advise on breast awareness

Annual mammography 40-70 yrs - review age 70

Annual MRI 30-50 years

No breast surveillance for male carriers

#### Ovary

Ovarian surveillance is not recommended

#### Other cancers

No surveillance is recommended for other cancers Carriers may be eligible for surveillance in research studies

#### Chemoprevention\*

- It is not appropriate to offer chemoprevention to BRCA1 carriers
- Discuss benefits and sides effects with BRCA2 carriers. Can be offered if no contra-indications

# Risk-reducing surgery\*

#### Breast

Discuss bilateral risk-reducing mastectomy

- breast cancer risk reduction 90-95%
- refer to surgeon to discuss surgical options

## Ovary

Offer risk-reducing bilateral salpingo-oophorectomy, once childbearing is complete.

Discuss the following:

- Ovarian cancer risk reduction ~95%
- Breast cancer risk reduction ~ up to 50%
- Side effect: premature menopause
- HRT should be offered until age 50 in women who have not had ER positive breast cancer