



# Ontario DCIS Cohort



# Electronic Data Abstraction

## Pathology Report

CASE : SU-04-14576 Collected on Jul 1 2004 Received on Jul 1 2004.

Data: 51-year-old female with right breast mass and previous history of ADH.

Gross Description: A) Received fresh designated "right breast needle localization for ADH" is a previously inked per protocol portion of breast with attached two localization needles. The specimen measures: M-L 8.5 cm, A-P 1.0 cm, and S-I 5.5 cm. Serial sections reveal fibroadipose tissue with no distinct nodules or masses. Approximately 1.5 cm dark red-brown, likely hemorrhagic area of previous biopsy site is noted in the mid portion of the specimen. The specimen is radiographed and areas grossly containing more abundant fibrosis or radiographically suspicious for calcifications were sampled. Cassette summary: A1 - medial pole; A2-A3 - lateral pole; A4-A10 - entire prior biopsy cavity from medial to lateral with most medial in A4 and most lateral in A10; A11-A14 - every other level from the tissue medially from the previous biopsy site with the most medial in A11; A15-A20 - every other level from the tissue lateral to the previous biopsy site with most lateral in A20. Approximately 80% submitted. Diagnosis: A) Breast, right, lumpectomy Lobular carcinoma in situ. Atypical ductal hyperplasia. Changes compatible with prior biopsy site. No evidence of invasive carcinoma. Numerous intraluminal calcifications present.

07/07/2004

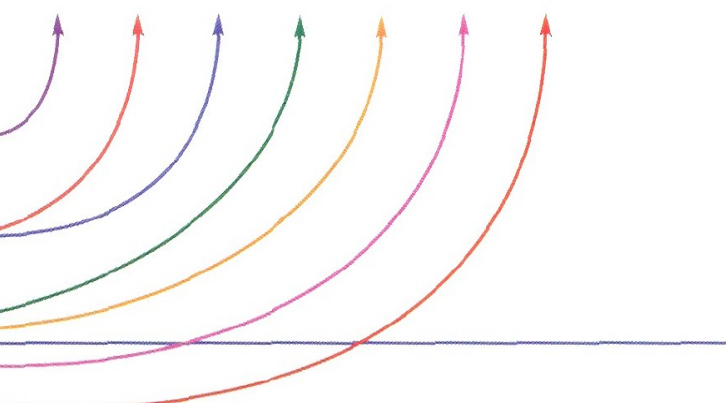
John White MD

Pathologist

Electronically signed 07/07/2004 by the Attending Pathologist

## Normalized Data Repository

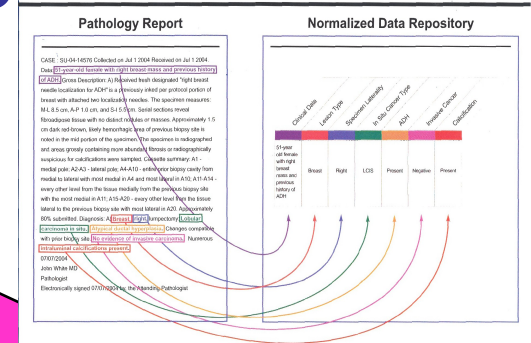
	Clinical Data	Lesion Type	Specimen Laterality	In Situ Cancer Type	ADH	Invasive Cancer	Calcification
51-year old female with right breast mass and previous history of ADH	Breast	Right	LCIS	Present	Negative	Present	





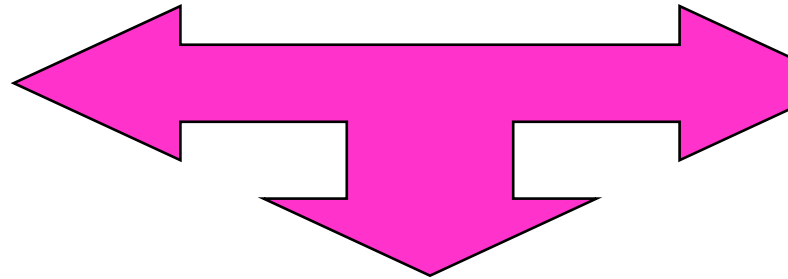
# DCIS Ontario Cohort

Cohort  
Definitive date of diagnosis



Linkage to Administrative databases:

Treatment & outcomes



CIHI-DAD

OHIP database

RPDP

OCR

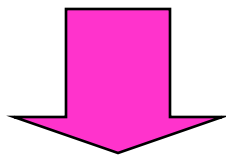
ODB

Surgical procedures

Radiation therapy  
Chemotherapy

Mortality

Invasive cancer diagnosis



validation



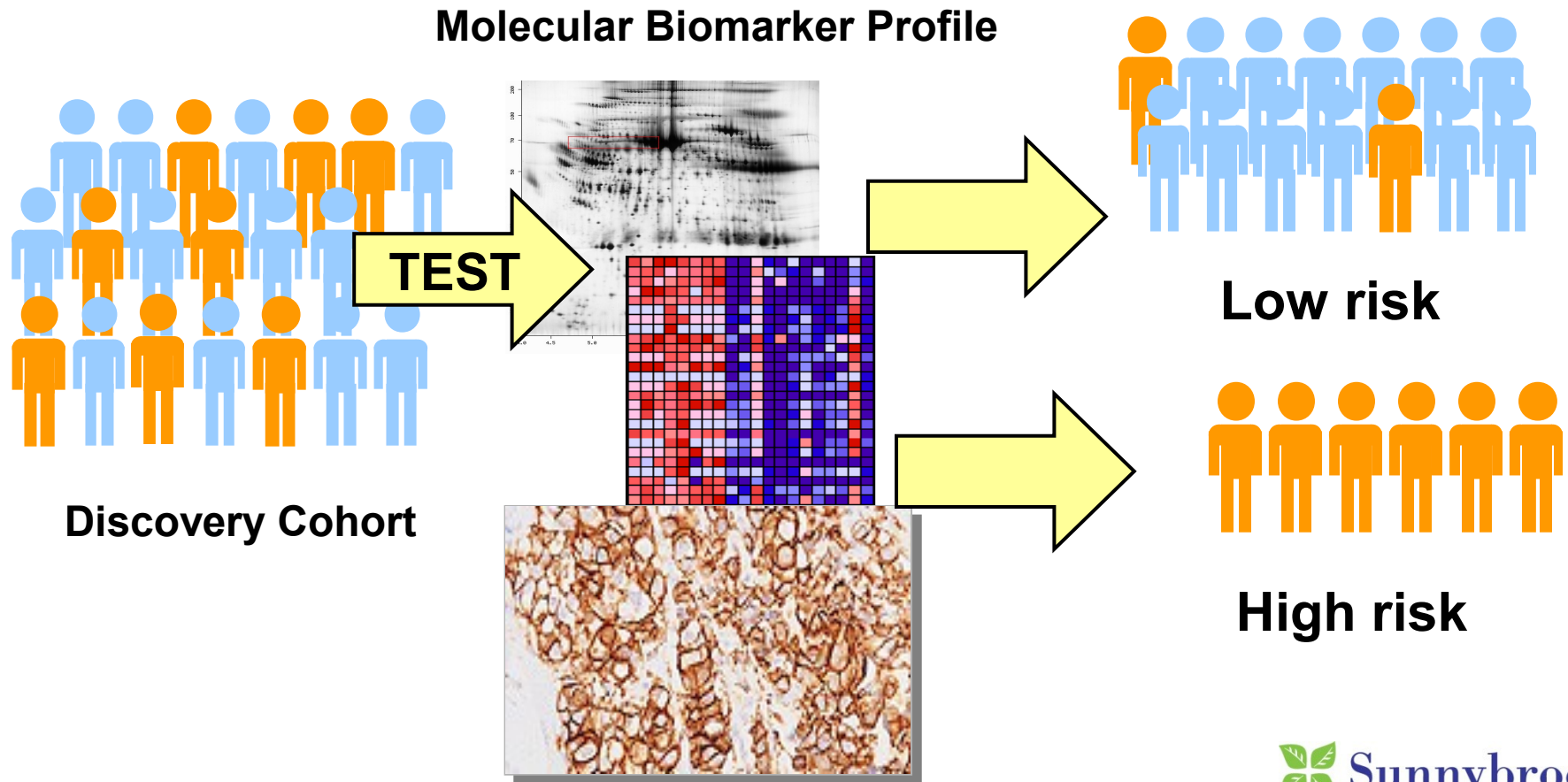
## KEY QUESTION!!

Who will develop Invasive Cancer following Ductal Carcinoma in Situ?



# PERSONALISED MEDICINE

## Improving Risk Stratification in DCIS



Validation in Population Cohort

# Personalized Treatment of DCIS

