

[How the Statement was developed](#) [1]

The *Cancer Australia Statement – Influencing best practice in breast cancer* was developed through an evidence-informed, collaborative process, outlined below.

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Steering Group

Cancer Australia established a Steering Group to provide expert advice on the approach to developing the Statement, informed by key learnings from similar healthcare improvement initiatives, both nationally and internationally.

It was agreed that the following definitions would be applied:

- an appropriate practice is one that provides patient benefit; is effective (based on valid evidence, including evidence of benefit); efficient (cost-effectiveness); equitable and consistent with the ethical principles and preferences of the individual patient;
- an inappropriate practice is one that may cause harm or provides little benefit to patients and may be frequently misused in clinical practice. It is a practice that does not meet the requirements for an appropriate practice.

Breast Cancer Expert Group

A Breast Cancer Expert Group was convened to provide specialist input and advice on the selection of appropriate and inappropriate breast cancer practices for the Statement. The membership consisted of representatives from the Medical Oncology Group of Australia, the Royal College of Pathologists of Australasia, the Royal Australian and New Zealand College of Radiologists, Breast Surgeons of Australia and New Zealand, the Clinical Oncology Society of Australia, the Australian College of Rural and Remote Medicine, Cancer Australia's Breast Cancer Advisory Group and Breast Cancer Network Australia.

National and international guidelines

Cancer Australia sourced relevant national and international clinical guidelines, publications and position statements to develop a list of potential breast cancer practices, with additional practices nominated by the Breast Cancer Expert Group. Criteria for inclusion of practices on the list were developed in consultation with the Steering Group and included:

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- evidence to support the appropriateness or inappropriateness of the practice;
 - evidence of unwarranted variation in the use of the practice;
 - the practice is measurable, or could be measured; and
 - the practice is inconsistent with clinical guidelines, clinical college position statements or recommendations.

Criteria

In consultation with the Steering Group, criteria for prioritising the selection of key candidate breast cancer practices were established and included the following considerations:

- the practice is equitable/inequitable across patient populations;
- the practice is highly valued, but underused or not consistently used;
- there is evidence/no evidence of clear and meaningful benefit to specific patient populations;
- the practice allows for consideration of patient preferences and personal values;
- the practice does/does not enhance safety and minimise harm;
- the practice has a high potential positive/negative impact on health/costs/equity of access;
- the existence of a cost-effective alternative; and
- the practice concerns conditions with a high/low impact on patients.

Guided and informed by these prioritisation criteria, the Breast Cancer Expert Group reached a consensus on an initial short-list of 20 candidate practices. The clinical colleges and organisations represented on the Breast Cancer Expert Group, as well as the Consumers Health Forum and the Royal Australian College of General Practitioners reviewed and provided feedback on the short-list of candidate breast cancer practices.

National and International research

Cancer Australia performed an extensive search of national and international research publications to identify supporting evidence for each short-listed practice. This included high-level evidence, where available, such as existing systematic reviews, meta-analyses, audits and registry data; other evidence such as patient outcomes, current use in Australia, unwarranted variations in practice and cost-effectiveness data; and existing Health

Technology Assessment reports and other technical reviews, as available.

Assessment

Cancer Australia performed a rigorous assessment of each practice against the detailed summaries of evidence and the prioritisation criteria, with expert input where necessary. The summaries of supporting evidence, together with the assessment against the prioritisation criteria and feedback from key stakeholders informed the Breast Cancer Expert Group's final selection of 12 key appropriate and inappropriate breast cancer practices.

Review

The Breast Cancer Expert Group and Cancer Australia's Intercollegiate Advisory Group, including representatives from the Royal Australian College of General Practitioners, the Royal Australasian College of Surgeons, the Royal Australasian College of Physicians, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, the Royal Australian and New Zealand College of Psychiatrists, Medical Oncology Group of Australia, Clinical Oncology Society of Australia, Cancer Nurses Society of Australia, the Australian Cancer Consumer Network and Cancer Voices Australia reviewed and had input into the agreed final wording of the practices and supporting materials. The Statement was endorsed by Cancer Australia's Advisory Council.

Source URL: <https://thestatement.canceraustralia.gov.au/how-statement-was-developed>

Links

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