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DBC*CG* Repræsentantskabsmøde
19. januar 2015

Formandens beretning

Startside & nyheder

Web-Indtastning

Web-genetik

Web-vejledninger

Retningslinjer / Vejledninger

Skemaer og patientinfo.

Protokoller

Om DBCG

About DBCG 

Sekretariat / Kontakt

Udvalg

Deltagende afdelinger

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Publikationer

Kvalitetsdatabase

Databaseudtræk

Statutter

Obligatorisk indberetning

DBCg's 30 års jubilæum

Retningslinier:

1. [DBCg](#) 38 KB (Indholdet sidst opdateret 15. juni 2011)
2. [Diagnose](#) 116 KB (Indholdet sidst opdateret 24. maj 2013)
3. [Patologi](#) 532 KB (Indholdet sidst opdateret 11. juni 2014)
4. [Kirurgisk behandling](#) (Indholdet sidst opdateret 3. april 2013)
5. [Postoperativ strålebehandling](#) 716 KB (Indholdet sidst opdateret 14. april 2014)
6. [Medicinsk behandling](#) 7,3 MB (Indholdet sidst opdateret 2. marts 2014)
7. [Kapitlet er udgået](#) (1. juli 2013)
8. [Bisfosfonater og behandlingsinduceret tab af knoglemasse](#) (Indholdet sidst opdateret 01. januar 2011)
9. [Opfølgning og kontrol](#) 2,4 MB (Indholdet sidst opdateret 11. juni 2012)
10. [Duktalt carcinoma in situ \(DCIS\)](#) 55 KB (Indholdet sidst opdateret 13. december 2012)
11. [Lobular carcinoma in situ \(LCIS\)](#) 50 KB (Indholdet sidst opdateret 01. januar 2006)
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14. [Behandling af primær inoperabel / lokoregional fremskreden cancer mammae](#) 83 KB (Indholdet sidst opdateret 27. april 2011)
15. [Behandling af brystkræft hos kvinder på 75 år eller ældre og/eller kvinder uanset alder med høj komorbiditet](#) 56 KB (Nyt kapitel 12. oktober 2009)
16. [Udredning og behandling af brystkræft i forbindelse med graviditet](#) 53 KB (Indholdet sidst opdateret 01. januar 2011)
17. [Lokoregionært recidiv](#) 85 KB (Indholdet sidst opdateret 27. april 2011)
18. [Behandling af cancer mammae med fjernmetastaser](#) (Indholdet sidst opdateret 15. august 2014)
19. [Arvelig cancer mammae - ovarii](#) (Indholdet sidst opdateret 03. januar 2014)
20. [Anbefaling om bevægelse/træning til kvinder opereret for brystkræft indenfor de første 8 uger postoperativt](#) (Indholdet sidst opdateret 02. oktober 2014)
21. [Forløbsbeskrivelse for fysioterapi under brystkirurgiske patientforløb 82KB](#) (Nyt kapitel; 5. december 2011)
22. [Vejledning til udarbejdelse af retningslinier](#) 38 KB (Indholdet sidst opdateret 01. januar 2006)



TORS DAG 15. JANUAR 2015

Jyllands-Posten

LÆGERNES TAG SELV-BORD

Forside Indland Politik International Sport Kultur Debat Aarhus Livsstil **Temaer** ▾ Mere ▾ PREMIUM FINANS

Lægernes store tag-selv-bord Her er seriens største afsløringer Morten Pihl: En enmandshær med ringbind

INDLAND 05.12.2014 kl. 16:48

Rigsrevisionen kommer med skarp kritik i sagen om misbrug af forskningsmidler

AF MORTEN PIHL

Vage retningslinjer og manglende kontrol er blandt årsagerne til, at forskningsmidler er blevet brugt til alt andet end forskning, skriver Rigsrevisionen.

Retningslinjerne for brugen af forskningsmidler er så vagt formuleret, at de åbner en ladeport for fejl, misforståelser og misbrug af forskningsmidler.

Det konkluderer Rigsrevisionen ifølge Dagens Medicin i et udkast til en beretning til Statsrevisorerne om forskningsmidlerne.

I udkastet, som Dagens Medicin er kommet i besiddelse af, kritiserer Rigsrevisionen bl.a., at retningslinjerne kun angiver de overordnede rammer for anvendelse af forskningsmidler.

»Retningslinjerne er generelt ikke tilstrækkeligt konkrete om, hvad der kan finansieres af forskningsmidler. Det betyder, at forskerne ikke ved, i hvilke konkrete tilfælde f.eks. sociale arrangementer kan finansieres af forskningsmidler,« hedder det. Jyllands-Posten har beskrevet adskillige fester på hospitaler, som har været finansieret med penge, som medicinalindustrien har stillet til rådighed til forskning for lægerne på afdelingerne.

A STØRRE | MINDRE



GEM ARTIKEL



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OM TEMAET



Journalisten bag serien: [Morten Pihl](#)

Jyllands-Posten afslører, hvordan overlæger på især Rigshospitalet har misbrugt forskningsmidler til dyre vine, middage, møbler og rejser for familie og kolleger.

Da flere af de involverede overlæger i retten har fået nedlagt forbud mod at blive identificeret, har vi måttet anonymisere eller udelade en stor del af artiklerne, som har ført til politianmeldelser af lægerne. Afsløringerne har stået på siden den 16. juni 2013.

Morten Pihl modtog 9. januar 2015 Cavling-prisen for sine afsløringer.

Har du input eller kommentarer til Jyllands-Postens dækning af sagen, er du velkommen til at kontakte morten.pihl@jp.dk

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		Lietzen, L W; Ah...	Glucocorticoid prescriptions and breast cancer recurrence: a Danish nationwide prospective cohort study.	2014	Annals of oncology : official journal of the European S...	jan. 11
		Christiansen, Pe...	Position paper: Breast cancer screening, diagnosis, and treatment in Denmark.	2014	Acta oncologica (Stockholm, Sweden)	16/02/14
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		Rasmussen, Chri...	Incidence of metachronous contralateral breast cancer in Denmark 1978-2009.	2014	International journal of epidemiology	jan. 16
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		Tvedskov, Tove ...	Robust and validated models to predict high risk of non-sentinel node metastases in breast cancer patients with micrometastases or isolated tumor cells in the sentinel node.	2014	Acta oncologica (Stockholm, Sweden)	jan. 16

Acta Oncologica, 2013; Early Online: 1–12

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ORIGINAL ARTICLE

Excess mortality in postmenopausal high-risk women who only receive adjuvant endocrine therapy for estrogen receptor positive breast cancer

BENT EJLERTSEN, MAJ-BRITT JENSEN & HENNING T. MOURIDSEN; FOR THE DANISH BREAST CANCER COOPERATIVE GROUP

Danish Breast Cancer Cooperative Group (DBCG) Secretariat and Statistical Office, Rigshospitalet, Copenhagen University Hospital, Copenhagen, Denmark

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ORIGINAL ARTICLE

PAM50 breast cancer intrinsic subtypes and effect of gemcitabine in advanced breast cancer patients

CHARLOTTE L. T. JØRGENSEN^{1,2}, TORSTEN O. NIELSEN³, KARSTEN D. BJERRE², SHUZHEN LIU³, BRETT WALLDEN⁴, EVA BALSLEV¹, DORTE L. NIELSEN⁵ & BENT EJLERTSEN²

¹Department of Pathology, Herlev University Hospital, Herlev, Denmark, ²Danish Breast Cancer Cooperative Group, Copenhagen Ø, Denmark, ³Genetic Pathology Evaluation Centre, Vancouver Coastal Health Research Institute, British Columbia Cancer Agency, University of British Columbia, Vancouver, British Columbia, Canada, ⁴NanoString Technologies, Seattle, Washington, USA and ⁵Department of Oncology, Herlev University Hospital, Herlev, Denmark

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VOLUME 31 · NUMBER 1 · JANUARY 1 2013

JOURNAL OF CLINICAL ONCOLOGY

ORIGINAL REPORT

Prognostic Impact of Pregnancy After Breast Cancer According to Estrogen Receptor Status: A Multicenter Retrospective Study

Hatem A. Azim Jr, Niels Kroman, Marianne Paesmans, Shari Gelber, Nicole Rotmensch, Lieveke Ameye, Leticia De Mattos-Arruda, Barbara Pistilli, Alvaro Pinto, Maj-Britt Jensen, Octavi Cordoba, Evandro de Azambuja, Aron Goldhirsch, Martine J. Piccart, and Fedro A. Peccatori

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Acta Oncologica, 2014; Early Online: 1–2

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COMMENTARY

Comments to the paper: Influence of mammography screening on use of mastectomies in Denmark

PEER CHRISTIANSEN¹, ILSE VEJBORG², NIELS KROMAN³, IBEN HOLTEN⁴,
JENS PETER GARNE⁵, PETER VEDSTED⁶, SUSANNE MØLLER⁷ & ELSEBETH LYNGE⁸

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Glucocorticoid prescriptions and breast cancer recurrence: a Danish nationwide prospective cohort study

L. W. Lietzen^{1*}, T. Ahern², P. Christiansen⁴, A. B. Jensen⁵, H. T. Sørensen¹, T. L. Lash^{1,3}
& D. P. Cronin-Fenton¹

¹Department of Clinical Epidemiology, Aarhus University Hospital, Aarhus, Denmark; ²Departments of Surgery and Biochemistry, College of Medicine, University of Vermont, Burlington; ³Department of Epidemiology, Rollins School of Public Health, Emory University, Atlanta, USA; Departments of ⁴Surgery; ⁵Oncology, Aarhus University Hospital, Aarhus, Denmark

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REVIEW

**Position paper: Breast cancer screening, diagnosis, and treatment
in Denmark**

PEER CHRISTIANSEN¹, ILSE VEJBORG², NIELS KROMAN³, IBEN HOLTEN⁴,
JENS PETER GARNE⁵, PETER VEDSTED⁶, SUSANNE MØLLER⁷ & ELSEBETH LYNGE⁸

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Statins and breast cancer prognosis: evidence and opportunities



Thomas P Ahern, Timothy L Lash, Per Damkier, Peer M Christiansen, Deirdre P Cronin-Fenton

Much preclinical and epidemiological evidence supports the anticancer effects of statins. Epidemiological evidence does not suggest an association between statin use and reduced incidence of breast cancer, but does support a protective effect of statins—especially simvastatin—on breast cancer recurrence. Here, we argue that the existing evidence base is sufficient to justify a clinical trial of breast cancer adjuvant therapy with statins and we advocate for such a trial to be initiated without delay. If a protective effect of statins on breast cancer recurrence is supported by trial evidence, then the indications for a safe, well tolerated, and inexpensive treatment can be expanded to improve outcomes for breast cancer survivors. We discuss several trial design opportunities—including candidate predictive biomarkers of statin safety and efficacy—and offer solutions to the key challenges involved in the enrolment, follow-up, and analysis of such a trial.

Introduction

Many in-vitro and animal studies suggest that statin drugs suppress breast cancer progression. In human beings, little evidence exists for a protective effect of statins on breast cancer incidence, but consistent evidence supports protection against disease recurrence. The case for adjuvant breast cancer therapy with statins is unlikely to be advanced by new observational epidemiological studies, so evidence from randomised trials is now needed. In this report, we provide a review of statin pharmacology, summarise the evidence for the effects of statins on breast cancer incidence and recurrence, describe why a clinical trial is the next necessary step, and assess the key challenges and design opportunities pertinent to such a trial.

Statin pharmacology

...sulphation), biotransformation occurs through cytochrome P450-mediated oxidation reactions, in which the polymorphic CYP3A4 and CYP2C9 enzymes have major roles (table). More than 90% of circulating statins are protein bound, except for pravastatin, which is roughly 50% protein bound (table). Figure 2 illustrates the disposition of statins, with simvastatin as an example.

Statin drugs differ from each other in several important ways that might affect the degree to which they exert antineoplastic effects. Previous studies have focused on differences in solubility, classifying statins dichotomously into hydrophilic and lipophilic varieties. This classification might be an oversimplification in view of the range of relative organic or aqueous solubility values reported for each drug (table). Moreover, two measures of relative solubility can be used for this purpose. The distribution coefficient (logD) measures

Lancet Oncol 2014; 15: e461–68

Departments of Surgery and Biochemistry, University of Vermont College of Medicine, Burlington, VT, USA (T P Ahern PhD); Department of Clinical Epidemiology (Prof T L Lash DSc, D P Cronin-Fenton PhD) and Unit of Breast and Endocrine Surgery (Prof P M Christiansen DMSc), Aarhus University Hospital, Aarhus, Denmark; Department of Epidemiology, Rollins School of Public Health, Emory University, Atlanta, GA, USA (Prof T L Lash); Department of Clinical Biochemistry and Pharmacology, Odense University Hospital, Odense, Denmark (P Damkier MD); and Danish Breast Cancer Cooperative Group, Copenhagen, Denmark (Prof P M Christiansen)

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Maturitas

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Lifestyle influences on the association between pre-diagnostic hormone replacement therapy and breast cancer prognosis—Results from The Danish ‘Diet, Cancer and Health’ prospective cohort



Marianne Holm^{a,*}, Anja Olsen^a, Niels Kroman^b, Anne Tjønneland^a

^a Unit of Diet, Genes, and Environment, Danish Cancer Society Research Center, Denmark

^b Department of Breast Surgery and Danish Breast Cancer Cooperative Group, Rigshospitalet, University of Copenhagen, Denmark

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Reduced risk of axillary lymphatic spread in triple-negative breast cancer

**Emil Villiam Holm-Rasmussen · Maj-Britt Jensen ·
Eva Balslev · Niels Kroman · Tove Filtenborg Tvedskov**

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Acta Oncologica, 2014; 53: 776–787

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ORIGINAL ARTICLE

PAM50 breast cancer intrinsic subtypes and effect of gemcitabine in advanced breast cancer patients

CHARLOTTE L. T. JØRGENSEN^{1,2}, TORSTEN O. NIELSEN³, KARSTEN D. BJERRE², SHUZHEN LIU³, BRETT WALLDEN⁴, EVA BALSLEV¹, DORTE L. NIELSEN⁵ & BENT EJLERTSEN²

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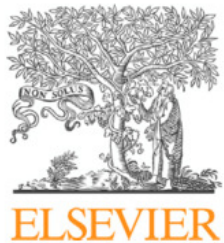
Estrogen receptor, Progesterone receptor, HER2 status and Ki67 index and responsiveness to adjuvant tamoxifen in postmenopausal high-risk breast cancer patients enrolled in the DBCG 77C trial



Ann S. Knoop^{a,b,*}, Anne-Vibeke Lænkholtm^g, Maj-Britt Jensen^c, Kirsten V. Nielsen^d, Jørn Andersen^e, Dorte Nielsen^f, Bent Ejlerlsen^{b,c}, for the Danish Breast Cancer Cooperative Group

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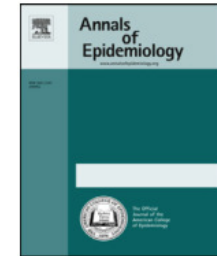
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Original article

Risk of contralateral breast cancer after tamoxifen use among Danish women



Lene Mellekjær PhD^{a,*}, Marianne Steding-Jessen MSc^a, Kirsten Frederiksen PhD^a, Michael Andersson MD, DMSc^b, Bent Ejlersten PhD^{b,c}, Maj-Britt Jensen MSc^c, Jørgen H. Olsen MD, DMSc^a

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^cDanish Breast Cancer Cooperative Group, Copenhagen University Hospital, Rigshospitalet, Copenhagen, Denmark

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Cancer Epidemiology

Incidence of metachronous contralateral breast cancer in Denmark 1978–2009

**Christina Bording Rasmussen,¹ Susanne K Kjær,^{1,2} Bent Ejlertsen,³
Michael Andersson,³ Maj-Britt Jensen,⁴ Jane Christensen,¹
Rikke Langballe¹ and Lene Mellekjær^{1*}**

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²Department of Gynecology, ³Department of Oncology and ⁴Danish Breast Cancer Cooperative Group, Copenhagen University Hospital, Rigshospitalet, Copenhagen, Denmark

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VOLUME 32 · NUMBER 34 · DECEMBER 1 2014

JOURNAL OF CLINICAL ONCOLOGY

ORIGINAL REPORT

Increased Risk for Depression After Breast Cancer: A Nationwide Population-Based Cohort Study of Associated Factors in Denmark, 1998-2011

Nis P. Suppli, Christoffer Johansen, Jane Christensen, Lars V. Kessing, Niels Kroman, and Susanne O. Dalton

Nis P. Suppli, Christoffer Johansen,
Jane Christensen, Susanne O. Dalton,
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ORIGINAL ARTICLE

Robust and validated models to predict high risk of non-sentinel node metastases in breast cancer patients with micrometastases or isolated tumor cells in the sentinel node

TOVE F. TVEDSKOV¹, MAJ-BRITT JENSEN², EVA BALSLEV³ & NIELS KROMAN¹

¹*Department of Breast Surgery, Copenhagen University Hospital, Copenhagen, Denmark,* ²*Danish Breast Cancer Cooperative Group, Copenhagen, Denmark and* ³*Department of Pathology, Herlev Hospital, Herlev, Denmark*

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3. Adjuerende Simvastatin
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Opfølgningsprogram for brystkræft

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