

Risk Prediction for Local Breast Cancer Recurrence Among Women with DCIS Treated in a Community Practice: A Nested, Case–Control Study

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Collins and colleagues validated the Memorial Sloan Kettering Cancer Center DCIS nomogram in a population of women with DCIS treated with breast conservation in three community-based practices. They found that it provided good prediction of both 5- and 10-year recurrence rates. They found both very good calibration and concordance in this independent external population.

The authors point out that this is now the fourth external validation of the DCIS nomogram. All have shown good calibration (defined as good matching of predicted recurrence risk estimates and actual observed recurrence rates) and discrimination (defined as the ability to distinguish between women who will and will not develop recurrence). They note that the concordance index of 0.68 is similar to that of the OncotypeDX[®] Recurrence Score for invasive cancer (0.69), and better than that of the Gail model (0.58), and Adjuvant! Online (www.adjuvantonline.org) (0.56) for invasive breast cancer.