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Dianne Smith

From:

Dianne Smith

Sent:

Friday, October 07, 2005 5:29 PM

To:

Patricia Pilgrim

Subject:

FW: Communiqué regarding ER/PR

Importance: High

Pat, FYI - Completed - Sent to Drs. Jong, Jenkins, Alteen. Dr. Williams suggested we forward to Dr. Baker also.

Don't work to long on Monday.

See you on Tuesday.

Dianne

----Original Message----

From: Dianne Smith

Sent: Friday, October 07, 2005 5:27 PM

To: 'gbaker@ahcib.ca'

Subject: FW: Communiqué regarding ER/PR Testing

Importance: High

Dr. Baker,

Dr. Gardiner asked if you would ensure surgeons in the Carbonear area are aware of the attached communiqué.

Thank-you!

Dianne

----Original Message----From: Dianne Smith

To: 'mjong@hvgb.net'; 'kjenki@healthwest.nf.ca'; 'lalteen@cwhc.nf.ca'

Subject: Communiqué regarding ER/PR Testing

Sent: Friday, October 07, 2005 5:26 PM

Importance: High

Please see attached communiqué from Dr. Paul Gardiner, Medical Director, Dr. H. Bliss Murphy Cancer Centre, regarding the ER/PR testing issue.

We ask that you ensure surgeons in your area who perform breast surgery receive a copy of this communiqué.

Dianne Smith, CPS Executive Assistant, COO Cancer, Child/Women's Health, Rehab Care Eastern Health Room 1345, Level I Health Sciences Centre St. John's, NL A1B 3V6

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October 4, 2005

Dear Colleague:

As you are undoubtedly aware Eastern Health is working through an issue related to Estrogen Receptor/Progesterone Receptor (ER/PR) Testing in the Immunohistochemistry Division of the St. John's Pathology Laboratories. I am providing you with the following synopsis of this issue for your information.

Since 1997, the Health Care Corporation of St. John's has utilized a Dako semi-automated system for testing for ER/PR receptors. In 2004, this methodology was replaced with an automated Ventana system.

Recently it was discovered that samples tested in 2002 with the Dako system and reported as ER/PR negative were retested with the Ventana system and now reported as ER/PR positive. As some research indicates that Tamoxifen may benefit a patient up to ten years after diagnosis, it was felt important to retest all samples determined to be negative for ER/PR.

All negative ER/PR samples since 1997 have been collected and sent for retesting at Mount Sinai Hospital in Toronto Ontario. Once the results return, the Pathology Laboratory will forward these results to the Surgeon and the Oncologist involved in the patient's care.

It is recommended that patients who are now known to be ER/PR positive should be offered Tamoxifen for five (5) years. If Tamoxifen is contraindicated or not tolerated, then an aromatase inhibitor could be considered in post-menopausal patients.

Currently, all new samples are being forwarded directly to the Mount Sinai laboratory. This will continue until our quality review is complete.

If needed, patients may be consulted to a Medical Oncologist for a decision regarding therapy.

Paul Gardiner, M.D., F.R.C.S.(C)

Medical Director

Dr. H. Bliss Murphy Cancer Centre

/eds