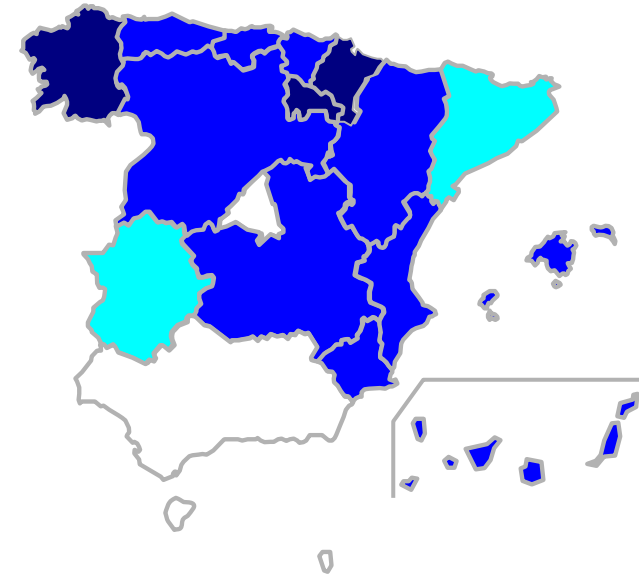
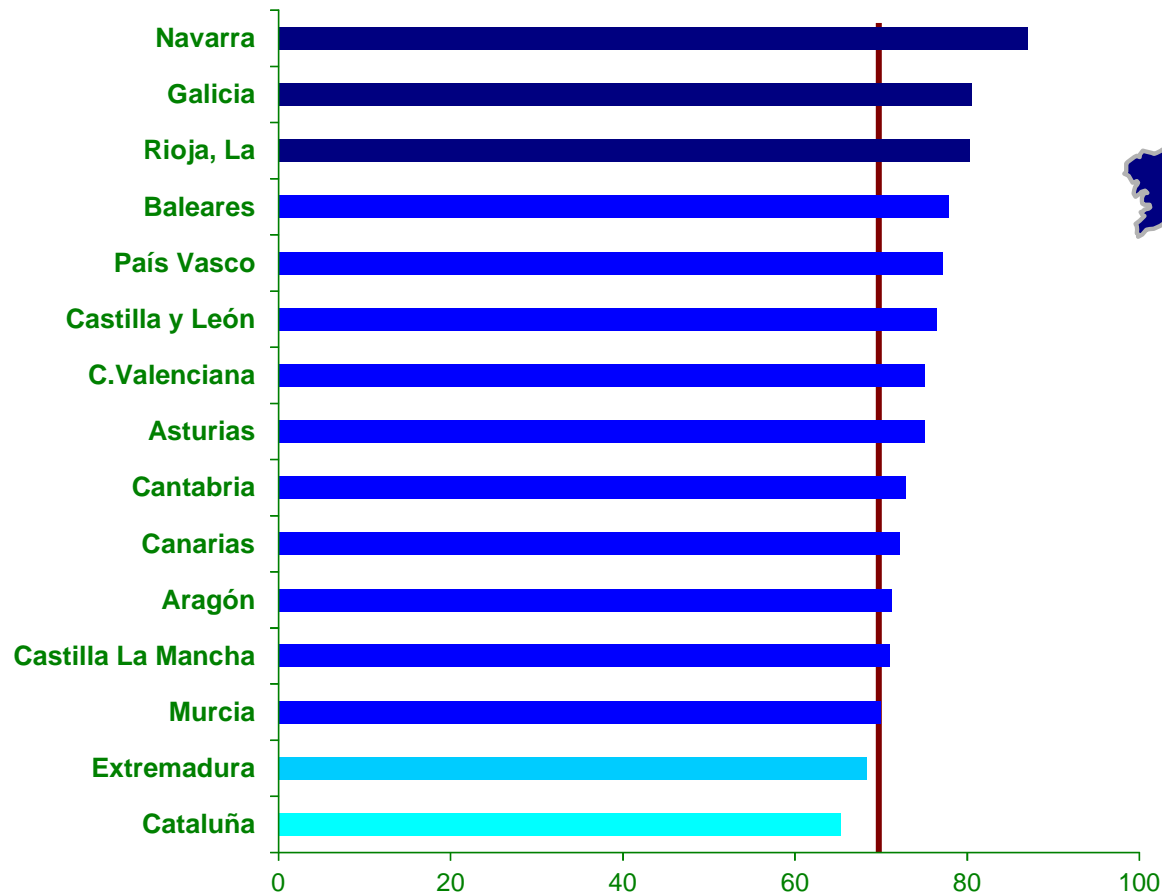


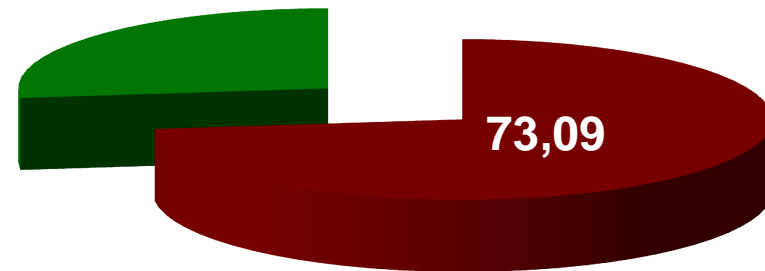
Indicadores de proceso y resultado 2011

(datos obtenidos en mayo 2013)

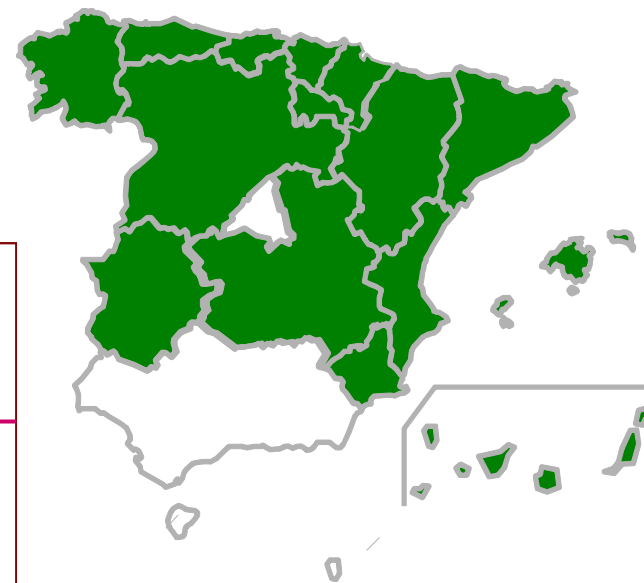
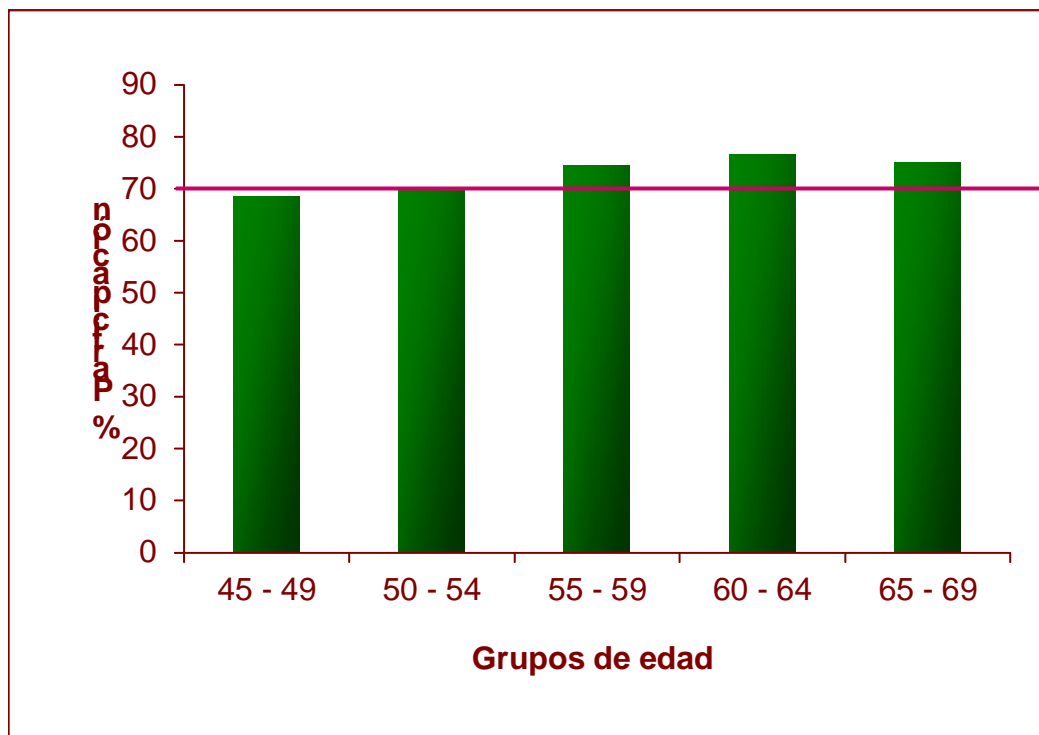
Participación



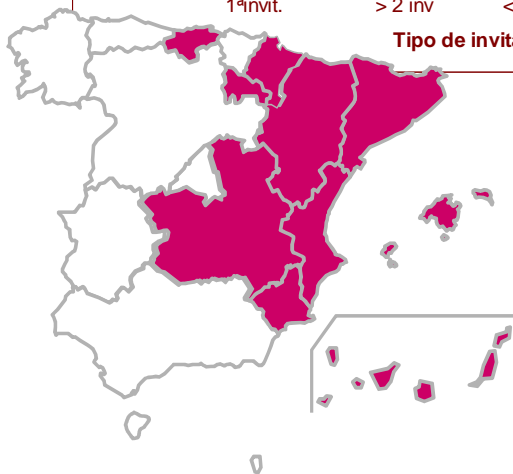
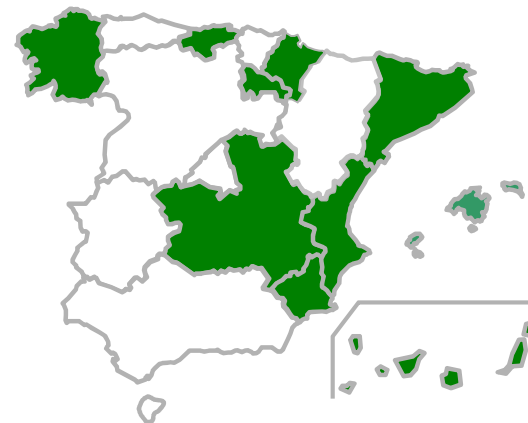
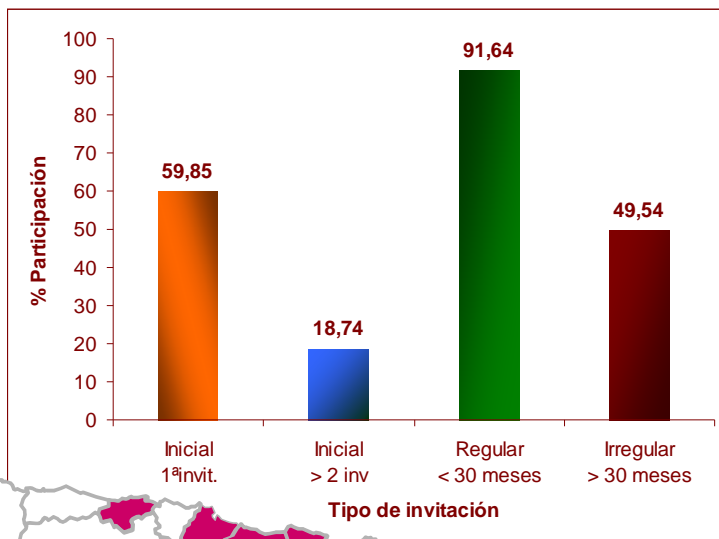
1.775.556 invitaciones
1.297.821 exploraciones



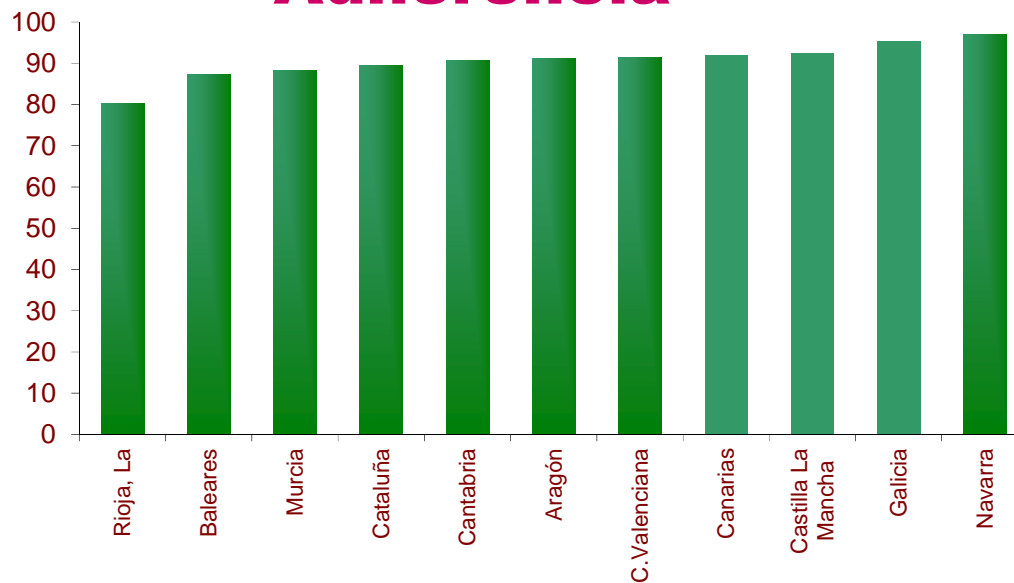
Participación por edad



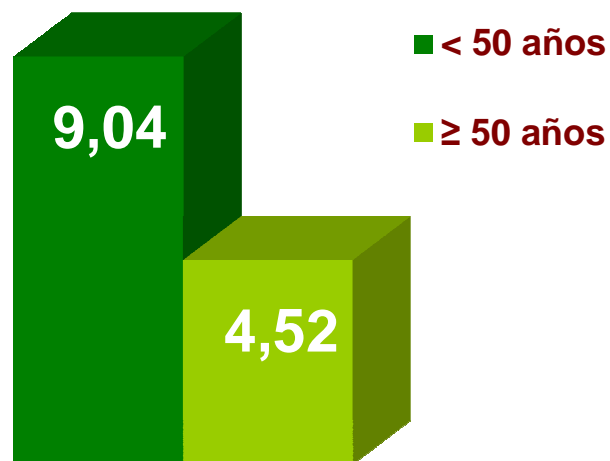
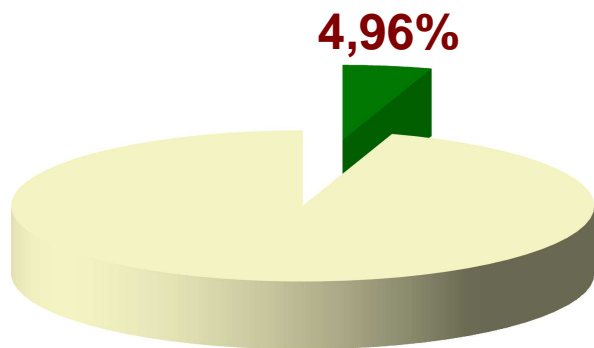
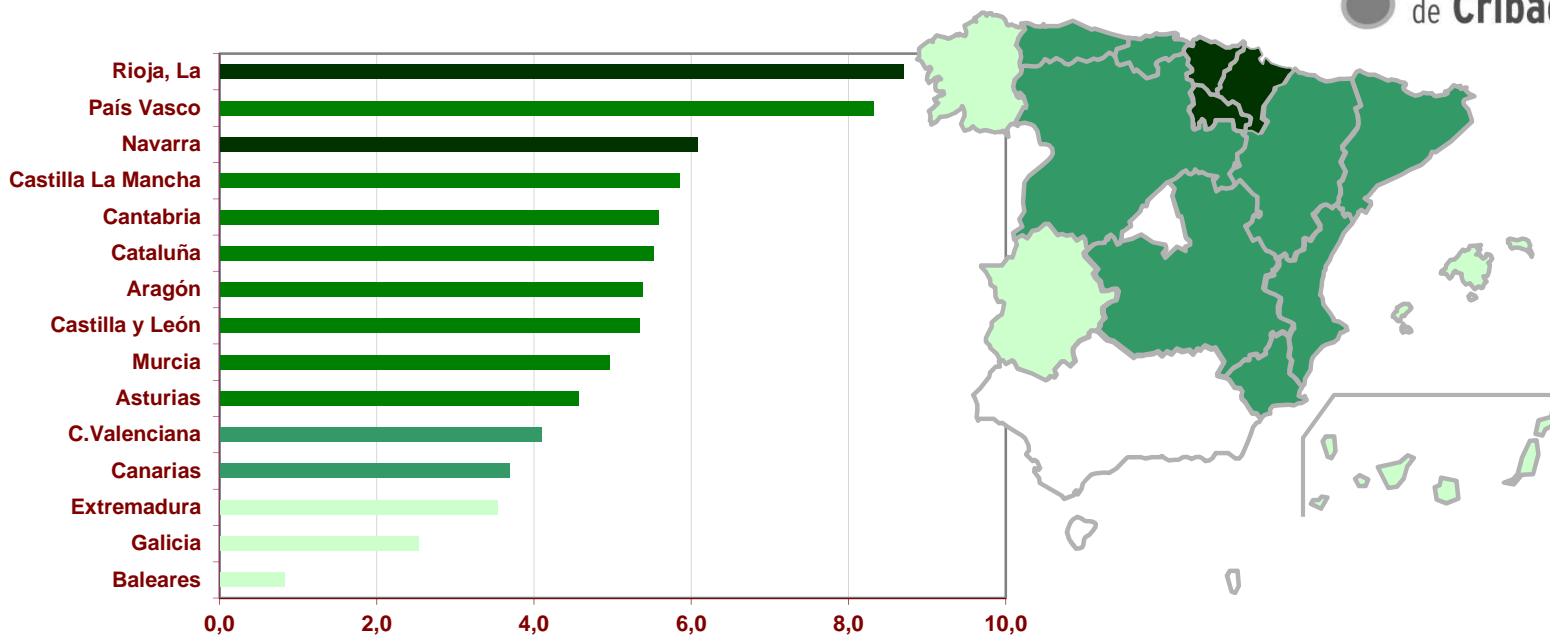
Participación por tipo de invitación



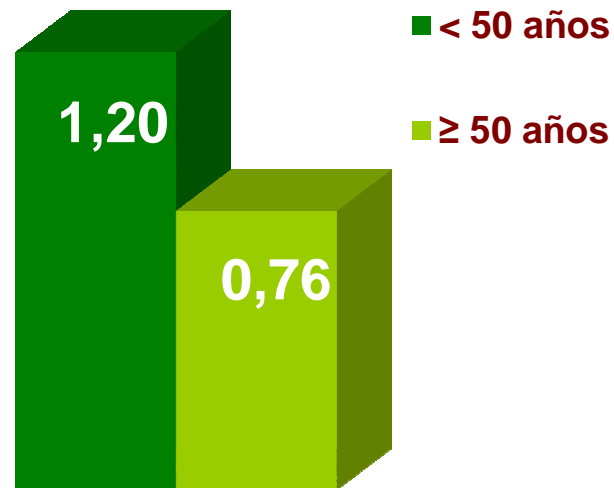
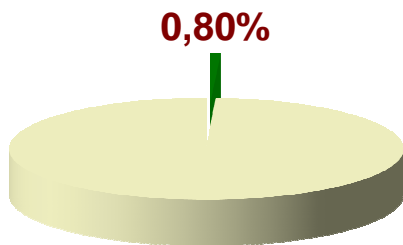
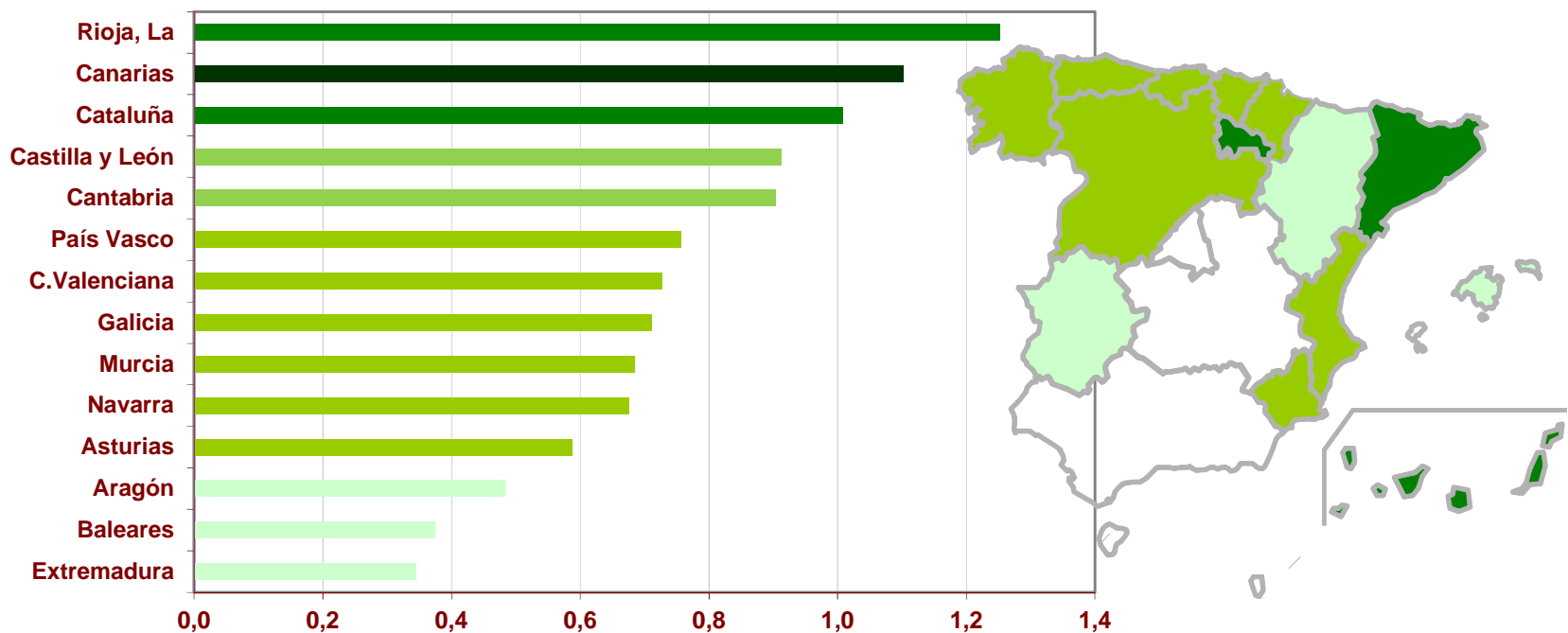
Adherencia



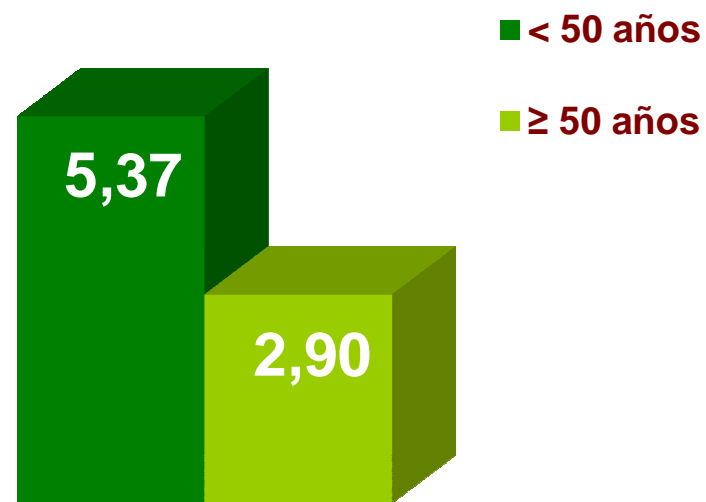
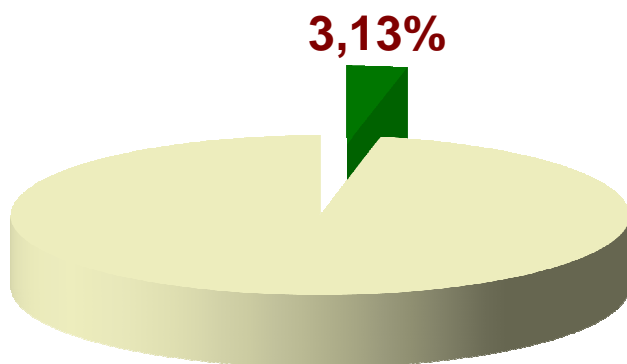
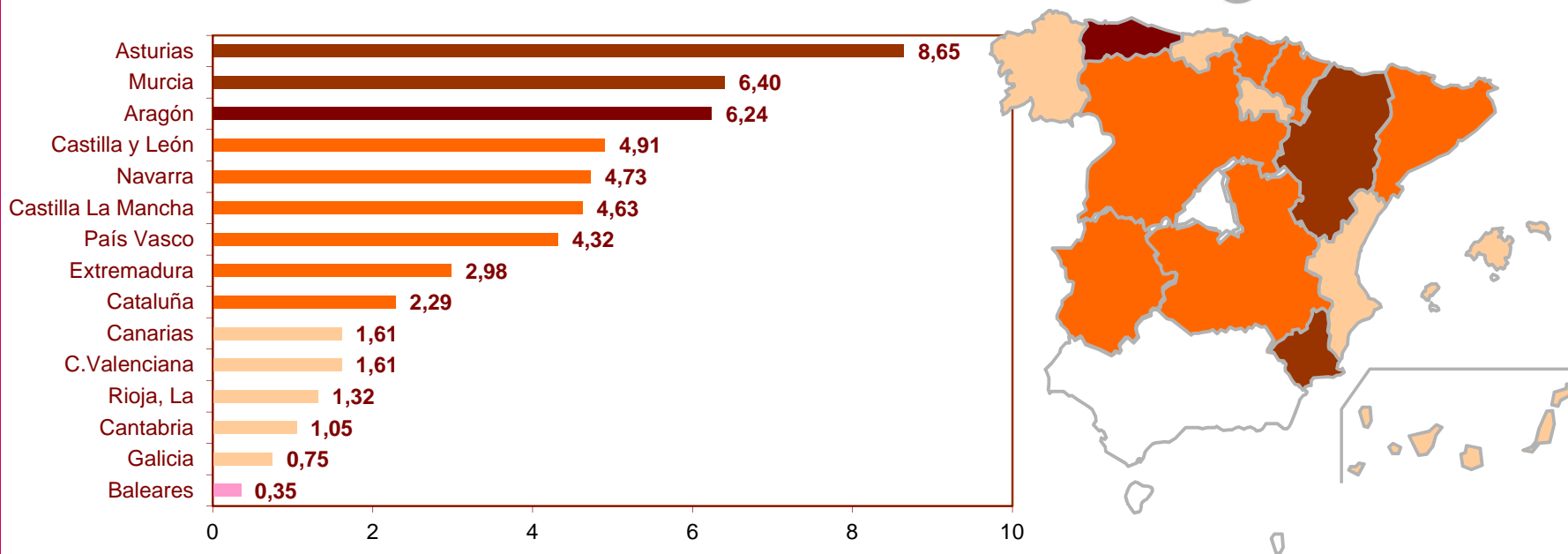
Pruebas adicionales



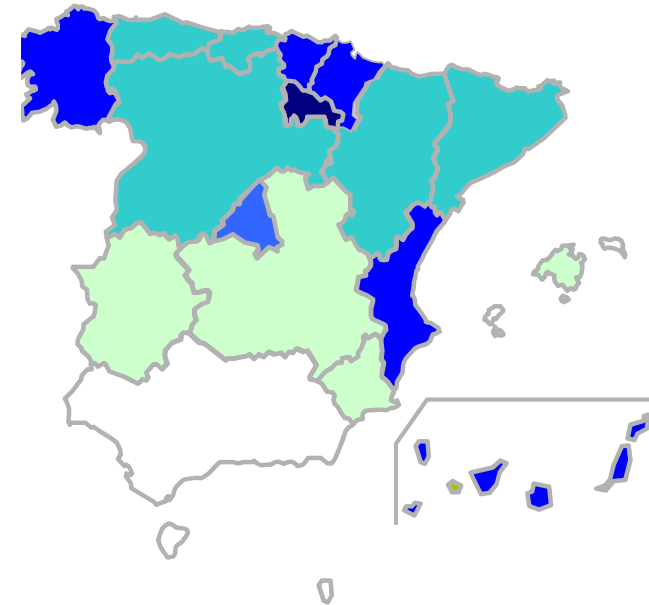
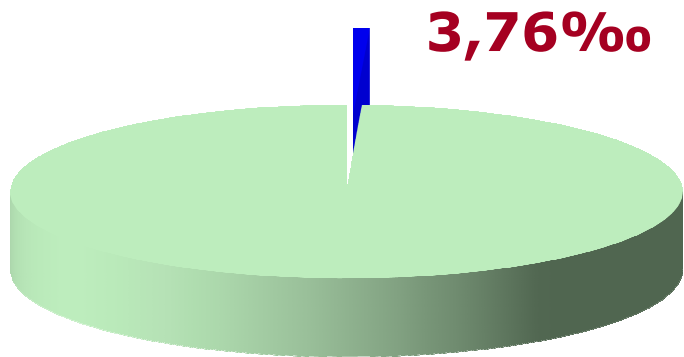
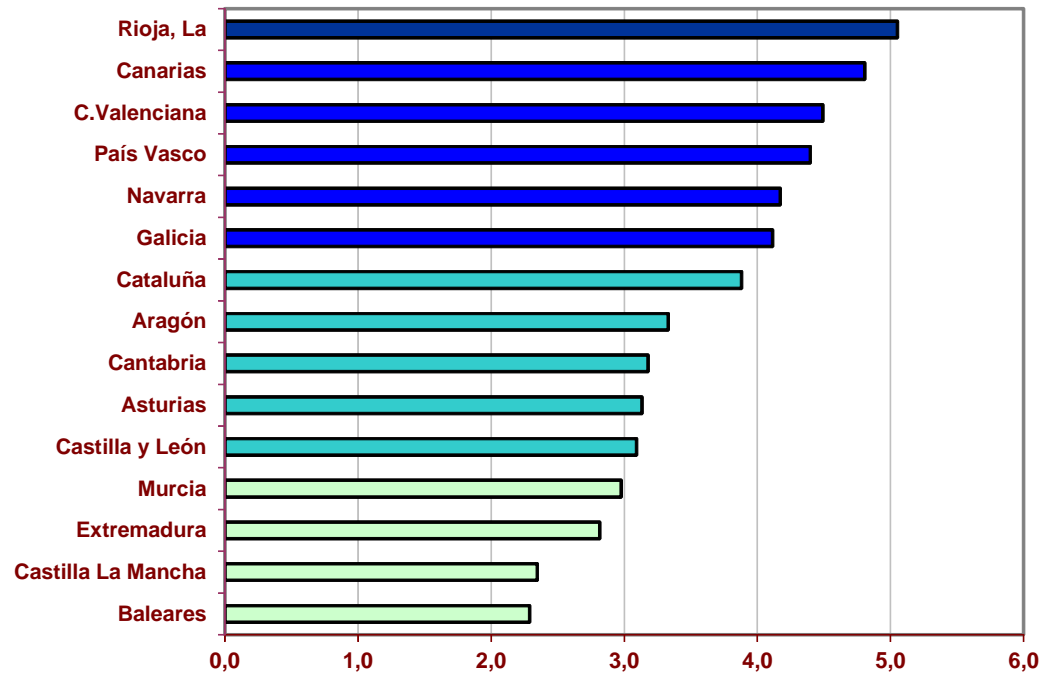
Pruebas adicionales invasivas



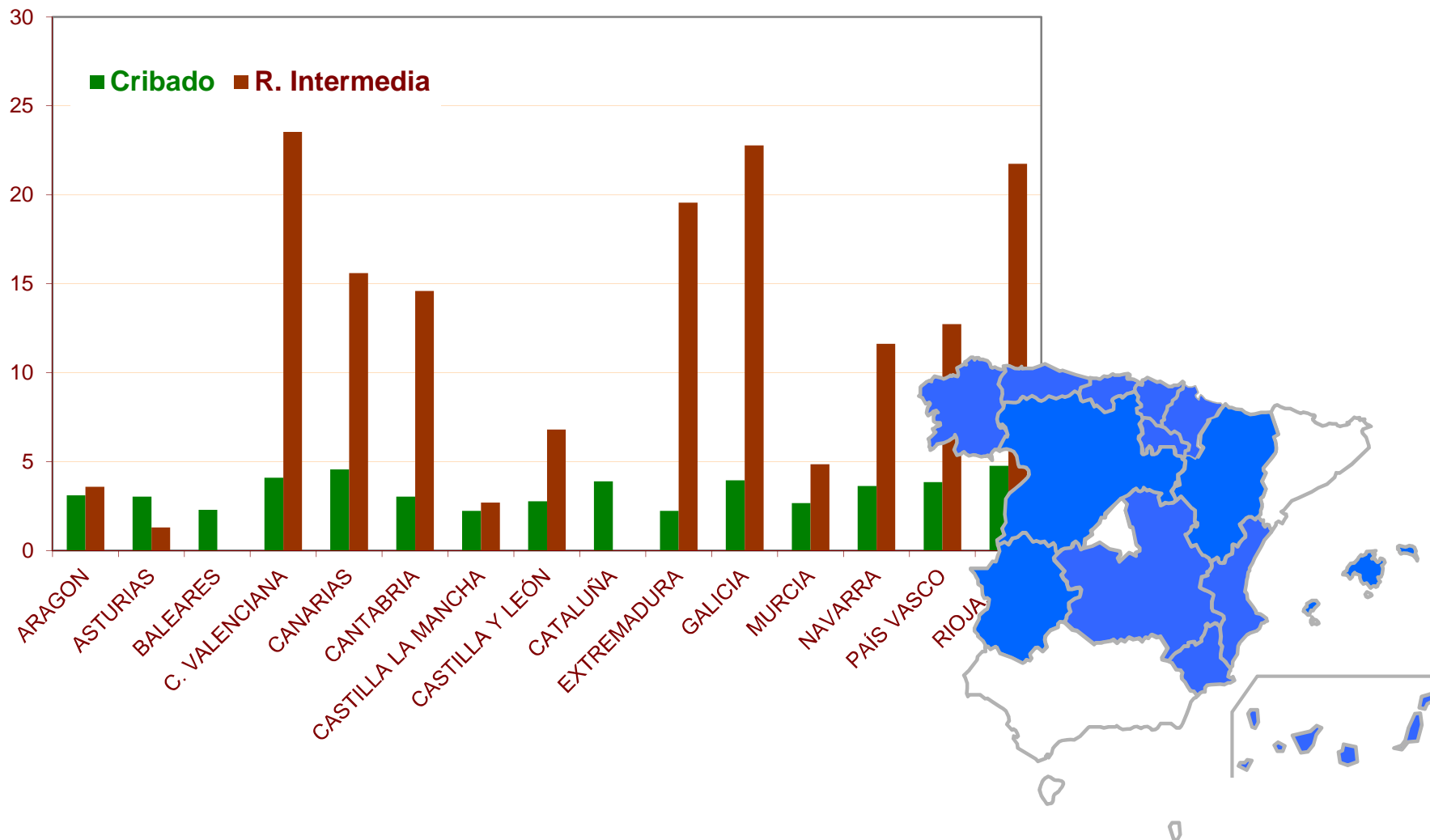
Revisiones intermedias



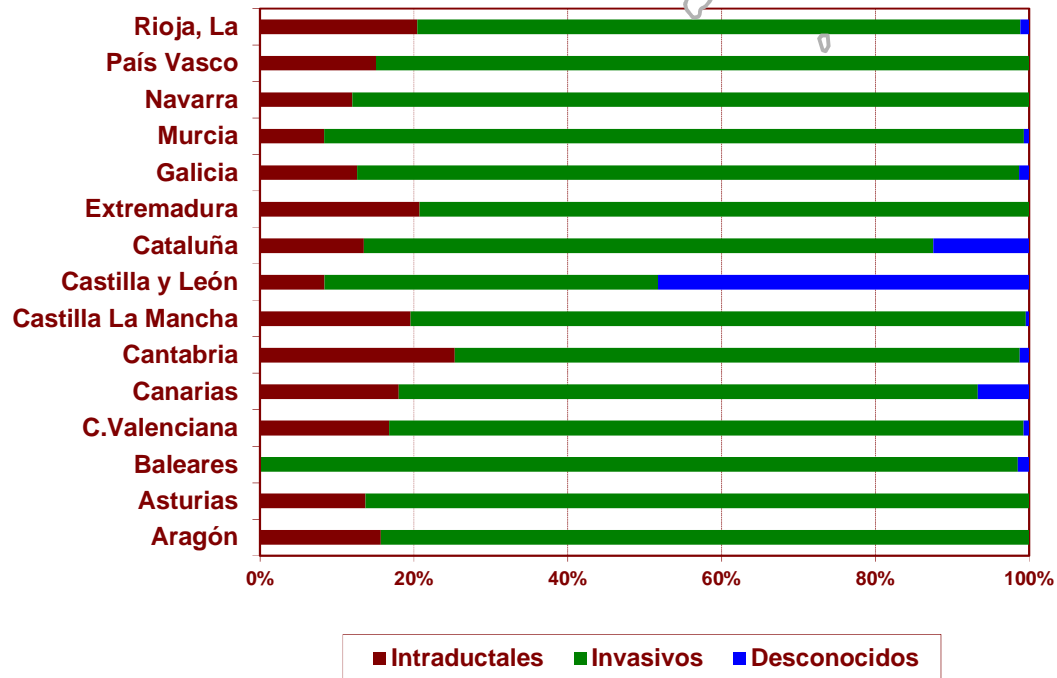
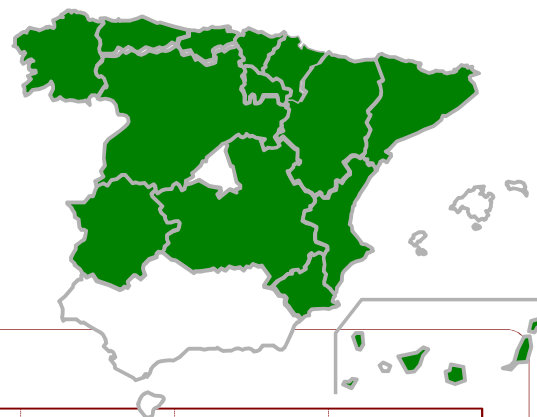
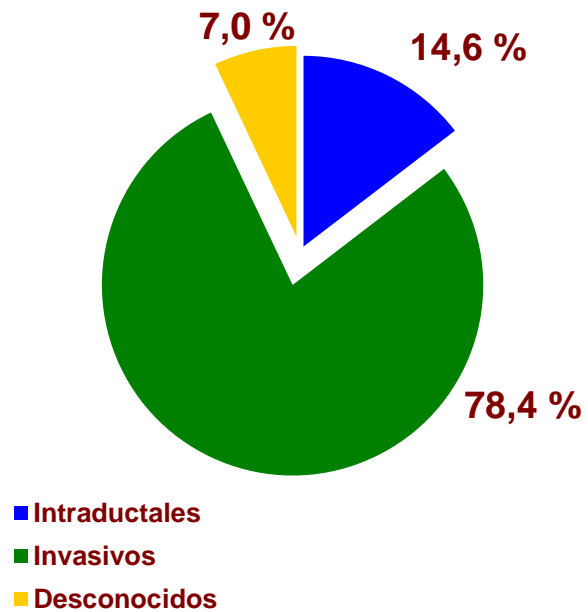
Tasa de detección



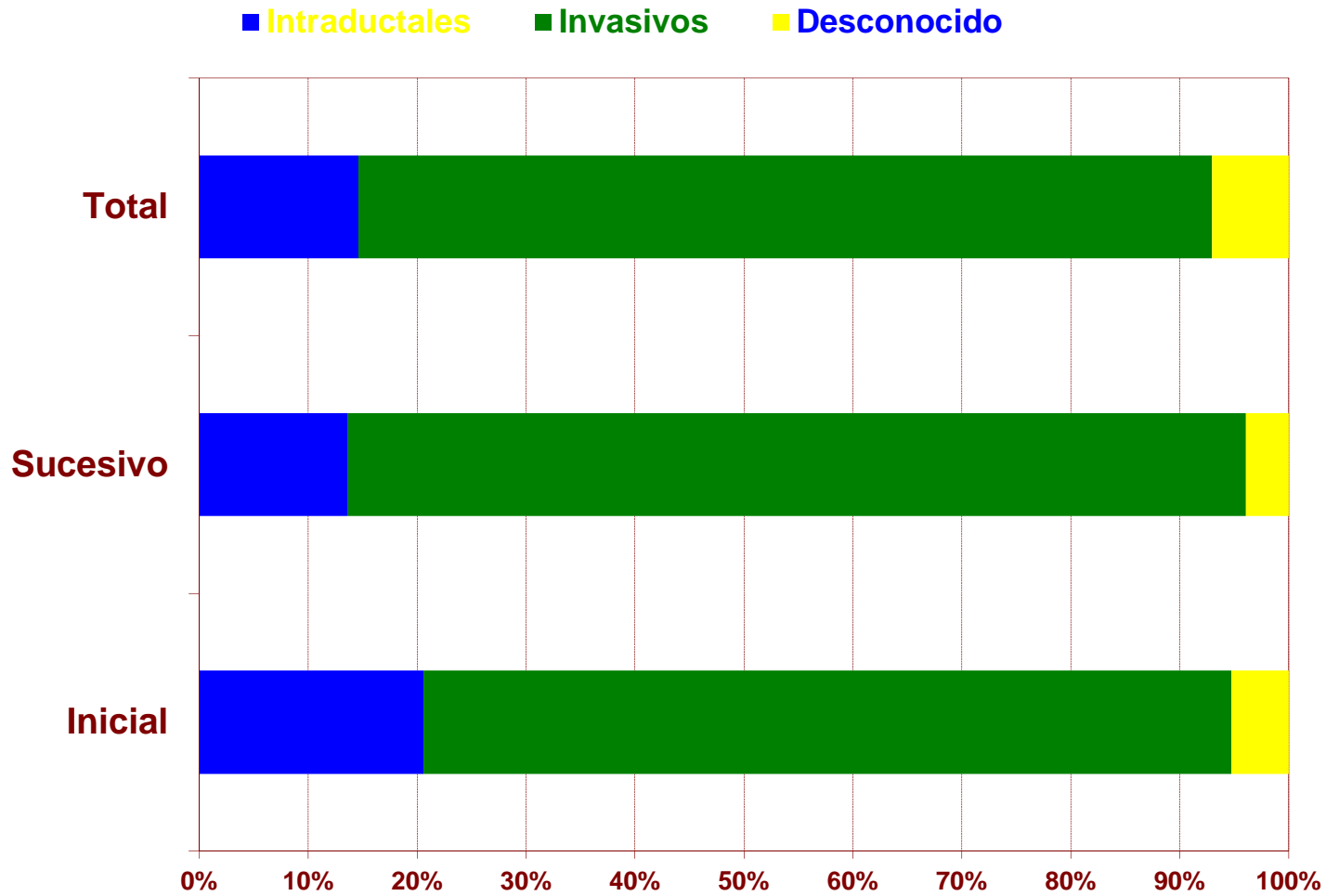
Tasa de detección (‰) Cribado / R. intermedia



Tipo de tumores detectados

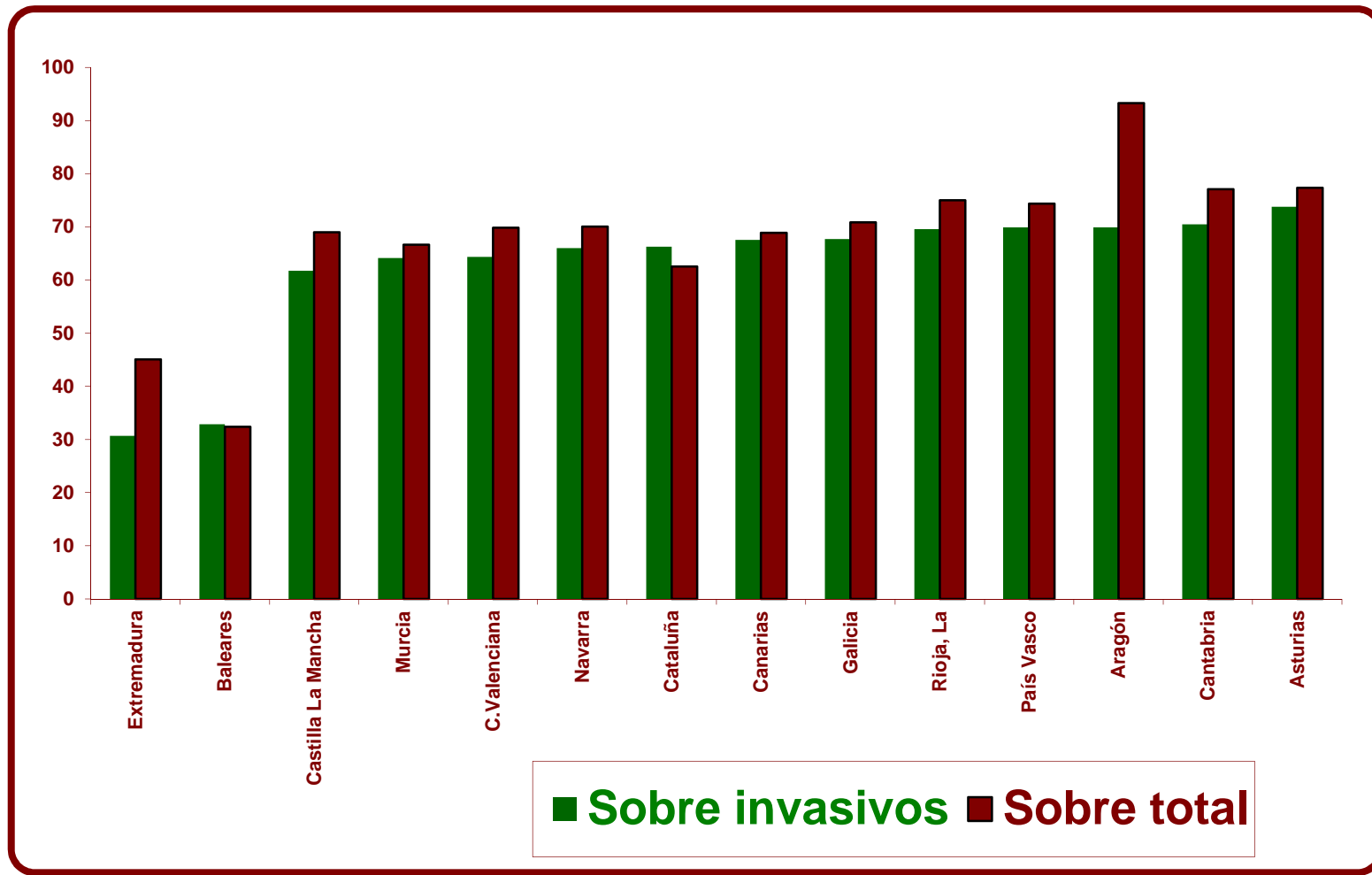


Tipo de tumores detectados según tipo exploración

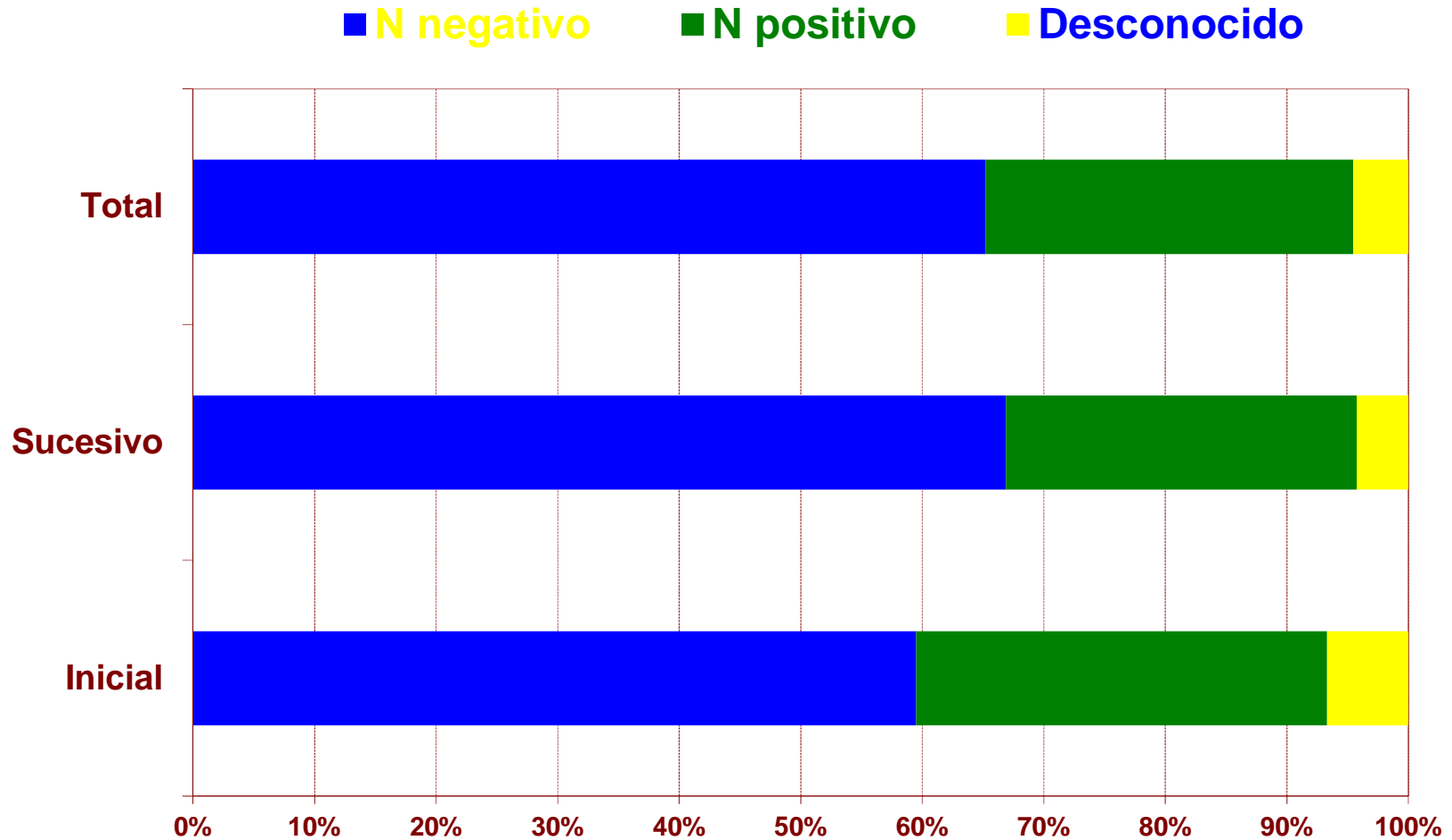


Resultados de Programas de Cribado de Cáncer de Mama. 2011

N(-)



Afectación ganglionar según tipo exploración



Clasificación molecular



special article

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Published online 27 June 2011

Strategies for subtypes—dealing with the diversity of breast cancer: highlights of the St Gallen International Expert Consensus on the Primary Therapy of Early Breast Cancer 2011

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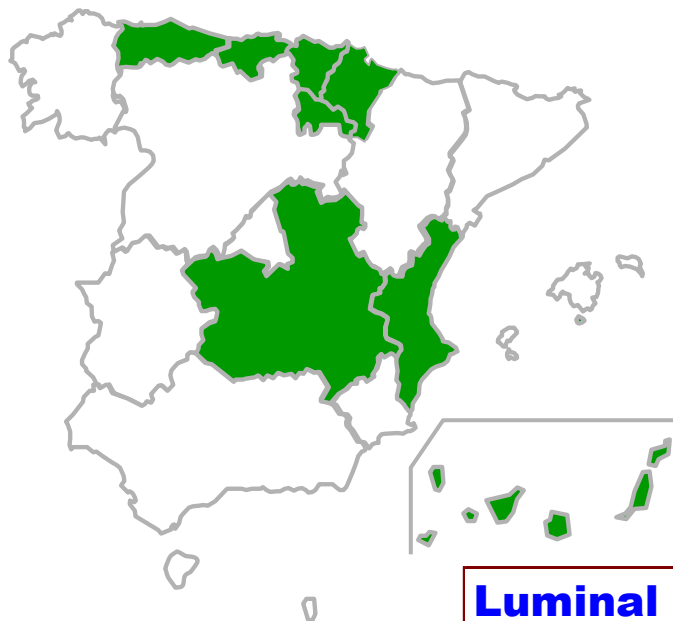
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Received 21 April 2011; accepted 23 May 2011

Intrinsic Subtype (1)	Clinico-pathologic definition	Notes
Luminal A	‘Luminal A’ ER and/or PgR positive(76) HER2 negative (77) Ki-67 low (<14%) [*]	This cut-point for Ki-67 labelling index was established by comparison with PAM50 intrinsic subtyping (7). Local quality control of Ki-67 staining is important.
Luminal B**	‘Luminal B (HER2 negative)’ ER and/or PgR positive HER2 negative Ki-67 high ‘Luminal B (HER2 positive)’ ER and/or PgR positive Any Ki-67 HER2 over-expressed or amplified	Genes indicative of higher proliferation are markers of poor prognosis in multiple genetic assays (78). If reliable Ki-67 measurement is not available, some alternative assessment of tumor proliferation such as grade may be used to distinguish between ‘Luminal A’ and ‘Luminal B (HER2 negative)’. Both endocrine and anti-HER2 therapy may be indicated.
Erb-B2 overexpression	‘HER2 positive (non luminal)’ HER2 over-expressed or amplified ER and PgR absent	
‘Basal-like’	‘Triple negative (ductal)’ ER and PgR absent HER2 negative	Approximately 80% overlap between ‘triple negative’ and intrinsic ‘basal-like’ subtype but ‘triple negative’ also includes some special histological types such as (typical) medullary and adenoid cystic carcinoma with low risks of distant recurrence. Staining for basal keratins (79) although shown to aid selection of true basal-like tumors, is considered insufficiently reproducible for general use.

	RE	RP	HER2	Ki 67
Luminal				
Luminal A	RE y/o RP positivo		Negativo	Bajo (<14%)
Luminal B				
HER 2 neg	RE y/o RP positivo		Negativo	Alto (≥14%)
HER 2 pos	RE y/o RP positivo		Positivo	Cualquier valor
Tipo HER 2	Negativo	Negativo	Positivo	
Triple negativo	Negativo	Negativo	negativo	

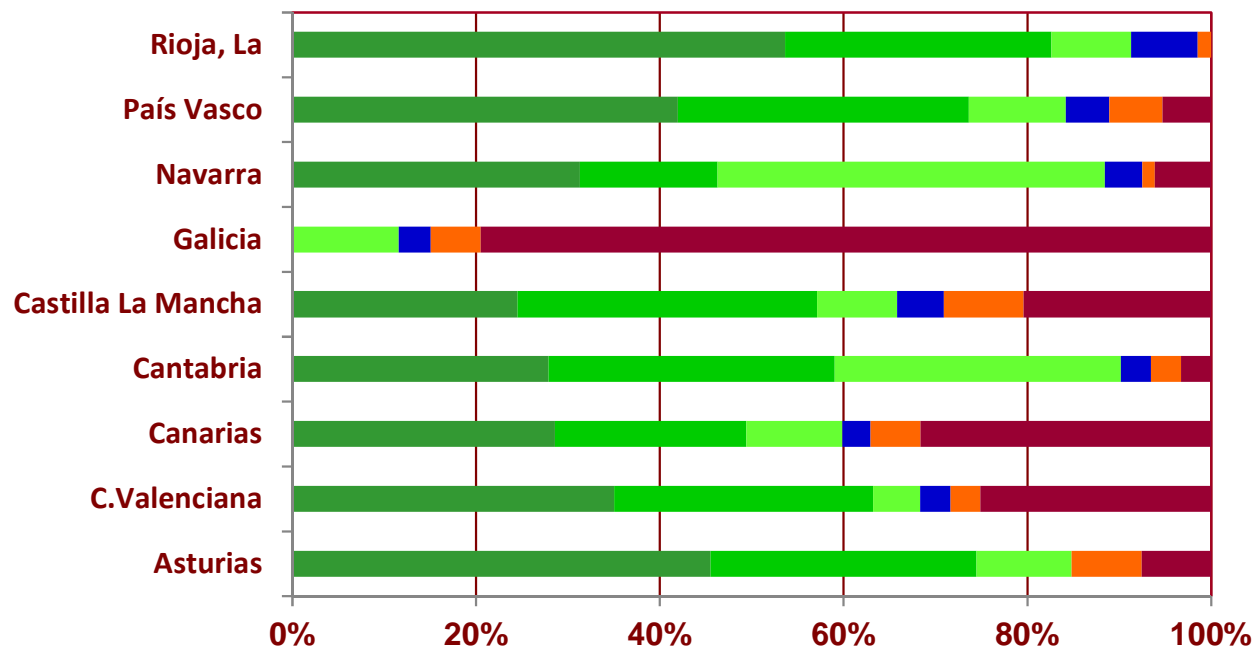
	RE	RP	HER2	Ki 67
Luminal	RE y/o RP positivo		neg / pos	desc



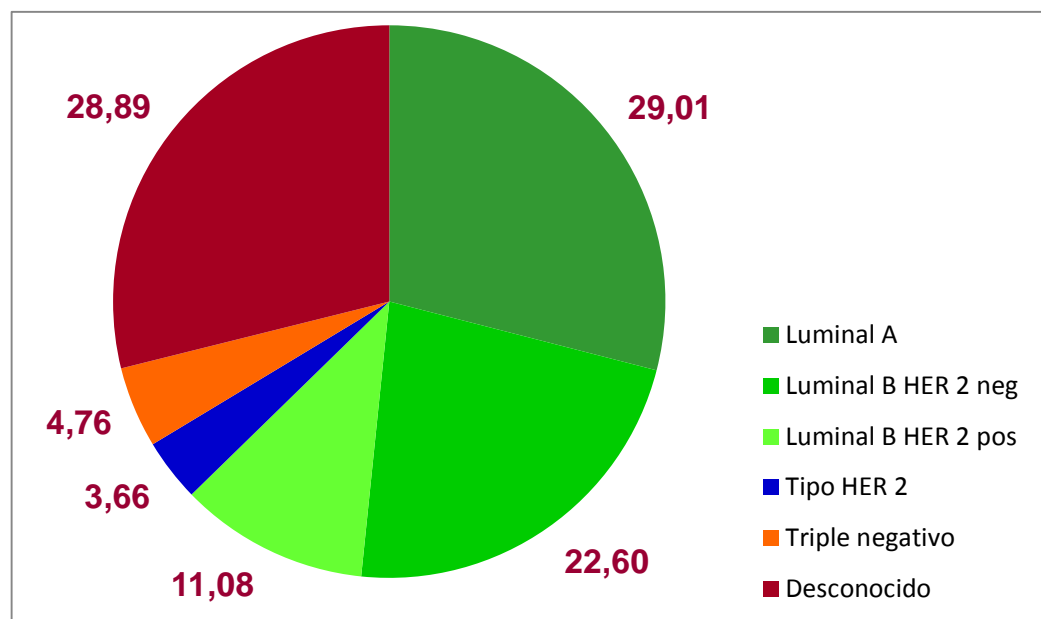
**2.086 tumores
invasivos**

	Nº tumores	%	
Luminal			
Luminal A	738	35,38	73,92
Luminal B			
HER 2 neg	575	27,56	
HER 2 pos	229	10,98	
38,54			
Tipo HER 2	77	3,69	
Triple negativo	96	4,60	
Desconocido	371	17,79	

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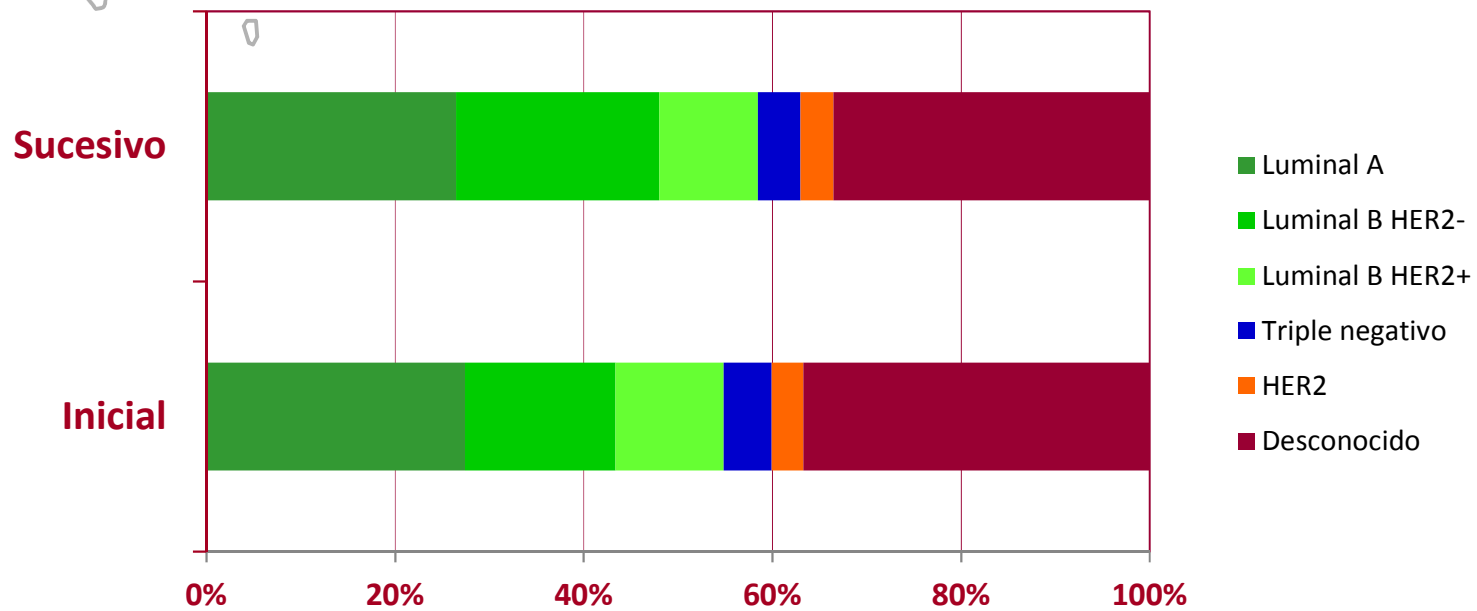
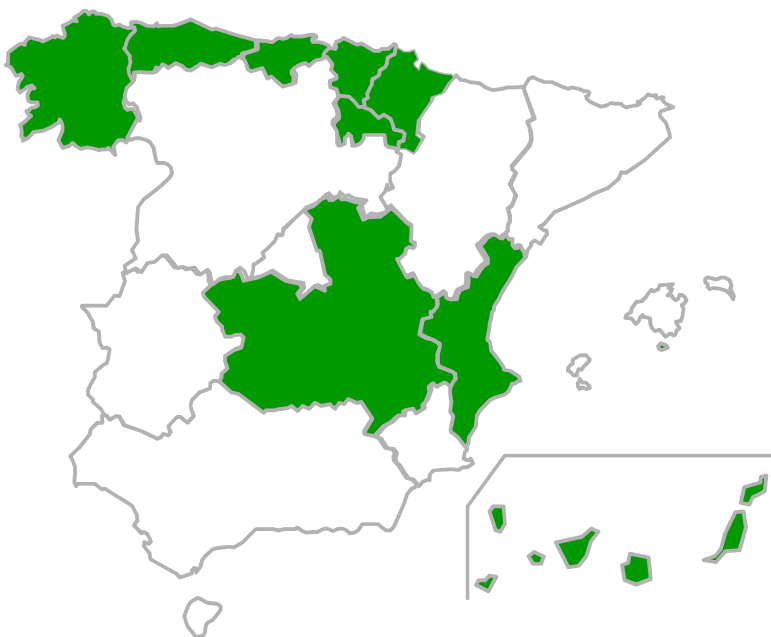


- Luminal A
- Luminal B HER2-
- Luminal B HER2+
- HER" +
- Triple -
- Desconocido



- Luminal A
- Luminal B HER 2 neg
- Luminal B HER 2 pos
- Tipo HER 2
- Triple negativo
- Desconocido

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