Conclusions of evidence from the systematic literature search for breast cancer surveillance for female CAYA cancer survivors in 2013 versus 2020

	Quality of evidence 2013	Quality of evidence 2020	
Breast cancer risk in CAYA cancer survivors			
Increased risk after ≥20 Gy chest radiation vs. no chest	Level A	Level A ^{1,5,14-18}	
radiation			
Increased risk after 10-19 Gy chest radiation vs. no chest	Level B	Level A ^{5,18-24}	
radiation			
No significant effect of <i>1-9 Gy chest radiation</i> vs. no chest radiation	Level C	Level B ^{15,18-22,25,26}	
Increased risk after TBI vs. no TBI	Level C	Level B ^{5,16,20,27}	
Increased risk after upper abdominal radiation exposing	Level C	Level B ^{5,20,23,24}	
<i>breast tissue</i> vs. none			
Decreased risk after radiation to volumes exposing the	Level B	Level of evidence	
ovaries vs. no radiation to volumes exposing the ovaries		specified by age	
Decreased risk after radiation to volumes exposing the	Level of evidence	Level A ^{3,5,14,18,21,22,33}	
ovaries vs. no radiation to volumes exposing the ovaries	not specified by		
in survivors treated with chest radiation at younger ages	age		
(<21 yr)			
Decreased risk after radiation to volumes exposing the		Level C ^{15,26,28,30-32}	
ovaries vs. no radiation to volumes exposing the ovaries			
in Hodgkin lymphoma survivors treated with chest			
radiation at older ages (21-49 yr)			
Decreased risk after alkylating agents vs. no alkylating	Level B	Level of evidence	
agents in survivors treated with chest radiation		specified by age	
Decreased risk after higher doses of alkylating agents vs.	Level of evidence	Level C ^{2,4,5,14,21,22,35}	
no alkylating agents in survivors treated with chest	not specified by		
radiation at younger ages (<21 yr)	age		
Decreased risk after higher doses of alkylating agents vs.		Level A 15 17 26 28 30 32 34	
treated with chest radiation at older ages (21.40 yr)		13,17,20,20,30,32,31	
Decreased rick in curvivers treated with chest radiation	Nostudios	Level A 14.15.28.32.38	
becreased fisk in survivors treated with chest radiation	NO studies		
Decreased rick in survivers with a charter duration of	No studios	Loval A 14,15,28,32,38	
intact ovarian function after chest radiation vs. longer	NO Studies	LeverA	
duration			
Increased risk in survivors treated with chest radiation	No studies	Level B ^{14,15,38}	
close to menarche vs. longer time from menarche			
No significant effect of treatment of early menopause vs	No studies	Level B ^{14,15,32}	
no treatment			
Increased risk after anthracyclines vs. no anthracyclines	No studies	Level A ^{16,18,21,39,40}	
in a dose-response relationship. However, the dose cut-			
off for survivors at low, moderate and high risk is difficult			
to determine.			
Increased risk after anthracyclines without chest	No studies	Level B ^{16,18,39}	

radiation vs. no anthracyclines and no chest radiation in			
survivors of Li-Fraumeni syndrome-associated childhood			
cancer types (leukemia, CNS tumor and non-Ewing			
sarcoma)			
Increased risk after high-dose alkylating agents without	No studies	Level C ^{3,16,18,39,40}	
chest radiation vs. no alkylating agents and no chest			
radiation			
Breast cancer latency time in CAYA cancer survivors			
Increased risk as early as 8 years after (high-dose) chest	Level A	Level A ^{1-5,17,20,28,30,78}	
radiation or 25 years of age			
Breast cancer risk over time in CAYA cancer survivors			
Increased risk with increasing length of follow-up in	Level A	Level A ^{1-5,17,28,30,78}	
survivors up to age 50 years			
Increased risk in survivors previously treated with (high-	Level A	Level A ^{5,17,21,30,35}	
dose) chest radiation with an attained age 50-60 years			
Increased risk in survivors previously treated with (high-	No studies	Level C ^{17,30}	
dose) chest radiation with an attained age ≥60 years			
Diagnostic value clinical breast exam, mammography and breast MRI in CAYA cancer survivors			
Diagnostic value of a breast MRI to detect breast cancer	No studies	Level B ^{21,41-45}	
in Hodgkin lymphoma survivors is moderate (sensitivity			
ranged from 67% to 100%, specificity ranged from 80% to			
94%)			
Diagnostic value of a mammogram to detect breast	No studies	Level A ^{21,41-45}	
cancer in Hodgkin lymphoma survivors is moderate			
(sensitivity ranged from 54% to 73%, specificity ranged			
from 93% to 99%)			
Diagnostic value of breast MRI and mammogram is better	No studies	Level B ^{21,41,42}	
than either test alone to detect breast cancer in Hodgkin			
lymphoma survivors (sensitivity ranged from 86% to			
100%, specificity ranged from 89% to 99.7%)			
26.8% to 75.0% of breast cancers in Hodgkin lymphoma	Level B	Level B ^{33, 45-49}	
survivors treated with chest radiation are initially			
detected by mammogram screening			

CAYA, childhood adolescent and young adult