



# Indicator Analysis 2025

## Annual Report of the Certified Breast Cancer Centres

Audit year 2024 / Indicator year 2023

## Table of Content

Introduction .....	3
General information .....	3
Status of the certification system: Breast Cancer Centre 2024 .....	5
Clinical sites taken into account .....	6
Tumour documentation systems in the centre's clinical sites .....	7
Basic data .....	8
Analysis of indicator.....	12
Indicator No 1: Post-operative tumour board .....	12
Indicator No 2: Pretherapeutic tumour board .....	13
Indicator No 3: Tumour board local recurrence/metastases .....	14
Indicator No 4: Radiotherapy after BCT in the case of invasive breast cancer (GL QI) .....	15
Indicator No 5: Radiotherapy after BCT in the case of DCIS .....	16
Indicator No 6: Chemotherapy in the case of rec. pos. and nodal pos. result .....	17
Indicator No 7: Endocrine therapy in the case of steroid rec. positive result (GL QI) .....	18
Indicator No 8: Trastuzumab therapy over 1 year in case of HER-2 pos. result (GL QI) .....	19
Indicator No 9: Endocrine therapy for metastasis (GL QI) .....	20
Indicator No 10: Psycho-oncological distress screening .....	21
Indicator No 11: Social service counselling .....	22
Indicator No 12: Patients enrolled in a study .....	23
Indicator No 13: Pretherapeutic histological confirmation (GL QI) .....	26
Indicator No 14a: Primary cases breast cancer .....	27
Indicator No 14b: Patients with 1st (local) recurrence and/or distant metastasis (without primary M1 patients) .....	28
Indicator No 15: Number of surgical procedures for R0-resection for BCT.....	29
Indicator No 16: Breast-conserving procedure for pT1 (incl. (y)pT1 u. (y)pT0) .....	30
Indicator No 17: Mastectomies .....	31
Indicator No 18: Lymph node removal in the case of DCIS (GL QI) .....	32
Indicator No 19: Determination of nodal status in case of invasive breast cancer .....	33
Indicator No 20a: Only sentinel lymphonodectomy (SLNE) for pN0 (women) (GL QI) .....	34
Indicator No 20b: Only sentinel lymphonodectomy (SLNE) for pN0 (men) (GL QI) .....	35
Indicator No 21: Intraoperative sample radiography / sonography (GL QI) .....	36
Indicator No 22: Revision surgeries .....	37
Indicator No 23: Therapy of the axillary lymphatic drainage for pN1mi (GL QI) .....	38
Imprint.....	39

General information

Indicator No 4:	Radiotherapy after BCT in the case of invasive breast cancer (GL QI)
Indicator No 5:	Radiotherapy after BCT in the case of DCIS
Indicator No 6:	Chemotherapy in the case of rec. pos. and nodal pos. result
Indicator No 7:	Endocrine therapy in the case of steroid rec. positive result (GL QI)
Indicator No 8:	Trastuzumab therapy over 1 year in case of HER-2 pos. result (GL QI)
Indicator No 9:	Endocrine therapy for metastasis (GL QI)
Indicator No 10:	Psycho-oncological distress screening

Quality indicators of the guidelines (GL QI):

In the table of contents and in the respective headings, the indicators which correspond to the quality indicators of the evidence-based guidelines are specifically identified. These quality indicators are based on the strong recommendations of the guidelines and were derived from the guidelines groups in the context of the German Guideline Programme in Oncology (GGPO). Further information: [www.leitlinienprogramm-onkologie.de](http://www.leitlinienprogramm-onkologie.de) \*

	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of denominator presented in the pretherapeutic tumour board	154*	23 - 1059	59835
Denominator	Primary cases	198,5*	52 - 1153	73505
Rate	Target value: ≥ 40%	91.82%	22.65% - 100%	81.40%**

Basic data indicator:

The definition of the **numerator**, **denominator** and the **target value** are taken from the data sheet.

The **median** for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

**Range** specifies the value range for the numerator, denominator and ratio of all centres.

The column **Patients Total** displays the total of all patients treated according to the indicator and the corresponding quota.

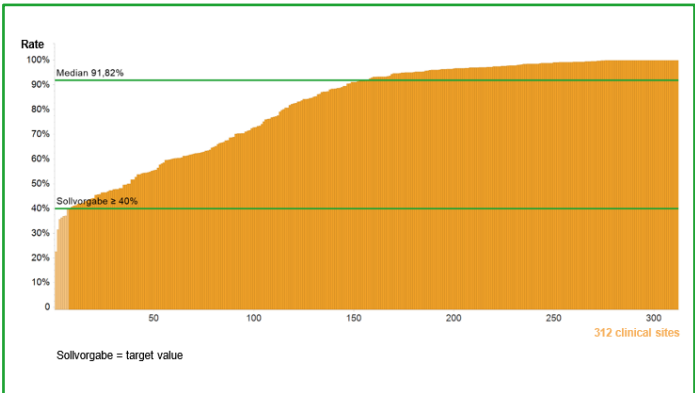
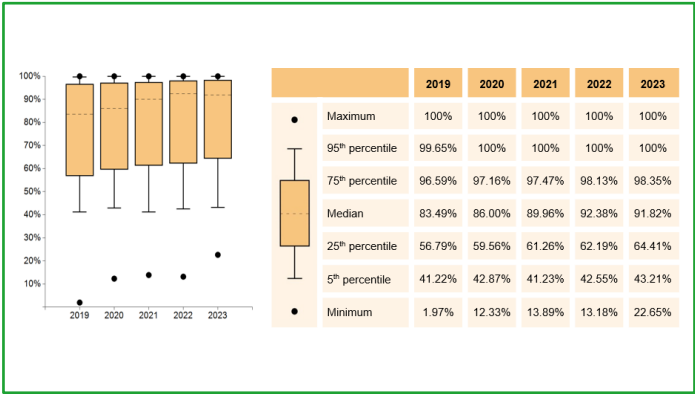


Diagram:

The x-axis indicates the number of centres and the y-axis represents the values in percent or number (e.g. primary cases). The target value is depicted as a green horizontal line. The median, which is also depicted as a green horizontal line, divides the entire group into two equal halves.

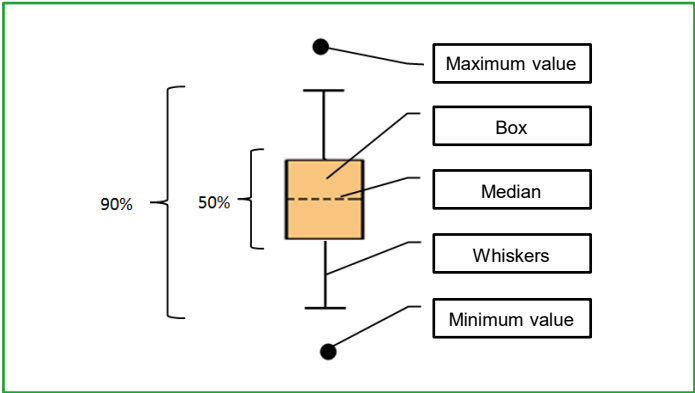
\*For further information on the methodological approach see „Development of guideline-based quality indicators“ ([https://www.leitlinienprogramm-onkologie.de/fileadmin/user\\_upload/Downloads/Methodik/QIEP\\_OL\\_Version2\\_english.pdf](https://www.leitlinienprogramm-onkologie.de/fileadmin/user_upload/Downloads/Methodik/QIEP_OL_Version2_english.pdf))

General information



Cohort development:

The **cohort development** in the years **2019, 2020, 2021, 2022** and **2023** is presented in a box plot diagram.



Boxplot:

A box plot consists of a **box with median, whiskers** and **outliers**. 50 percent of the centres are within the box. The median divides the entire available cohort into two halves with an equal number of centres. The whiskers and the box encompass a 90<sup>th</sup> percentile area/range. The extreme values are depicted here as dots.

Status of the certification system: Breast Cancer Centres 2024

	31.12.2024	31.12.2023	31.12.2022	31.12.2021	31.12.2020	31.12.2019
Ongoing certification procedures	9	11	4	5	4	2
Certified Centres	268	257	254	248	245	243
Certified clinical sites	293	289	288	286	284	282
BCC with 1 clinical site	246	229	224	214	210	209
2 clinical sites	20	26	28	32	33	31
3 clinical sites	1	0	0	0	0	1
4 clinical sites	1	2	2	2	2	2

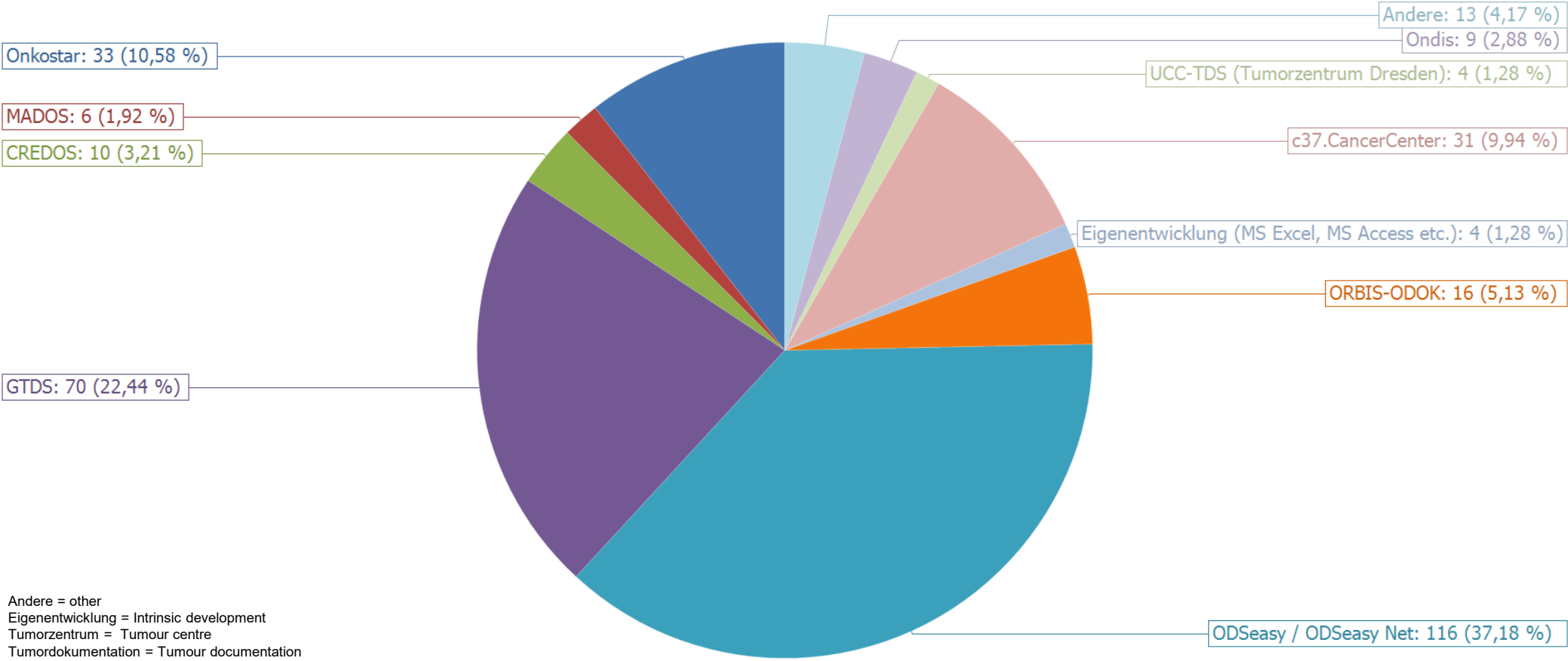
## Clinical sites taken into account

	Sites DKG & NRW	DKG Breast Cancer Centres					
	31.12.2024	31.12.2024	31.12.2023	31.12.2022	31.12.2021	31.12.2020	31.12.2019
Sites included in the Annual Report	312	290	284	282	280	280	276
Correspond to	-	98.9%	98.3%	97.9%	97.9%	98.6%	97.9%
Primary cases total*	73,505	67,656	63,441	62,100	58,331	60,752	57,589
Primary cases per site (mean)*	236	233	223	220	208	217	209
Primary cases per site (median)*	198.5	197.5	185.5	184	180	182	180.5

<b>Breast Cancer Centres North Rhine-Westphalia (NRW)</b>	31.12.2024	This Annual Report looks at the Breast Cancer Centres certified in the certification system of the German Cancer Society (DKG) and, from 2021, Breast Centres in the state of NRW that participate in the DKG's data management system. The basis for the diagrams in the annual report is the data sheet. The indicators published here refer to the indicator year 2023. They represent the assessment basis for the audits carried out in 2024.
Sites considered in the Annual Report	22	<b><u>DKG Breast Cancer Centres:</u></b> The Annual Report includes 290 of the 293 DKG-certified centre sites. Excluded are 3 clinical sites that were certified for the first time in 2024 (data mapping of complete calendar year not mandatory for first-time certifications).
Primary cases total*	5,849	<b><u>Breast Cancer Centres NRW:</u></b> Included in the Annual Report are 22 clinical sites in the state of NRW that participate in the DKG's data management. A total of 5,849 primary cases of breast cancer were treated at the 22 clinical sites.
Primary cases per site (mean)*	266	A current overview of all sites is shown at <a href="http://www.oncomap.de">www.oncomap.de</a> . Using the filter "Certificate", a common view or a view separated according to certified and recognised sites can be selected.
Primary cases per site (median)*	222	

\*The figures are based on the clinical sites listed in the Annual Report.

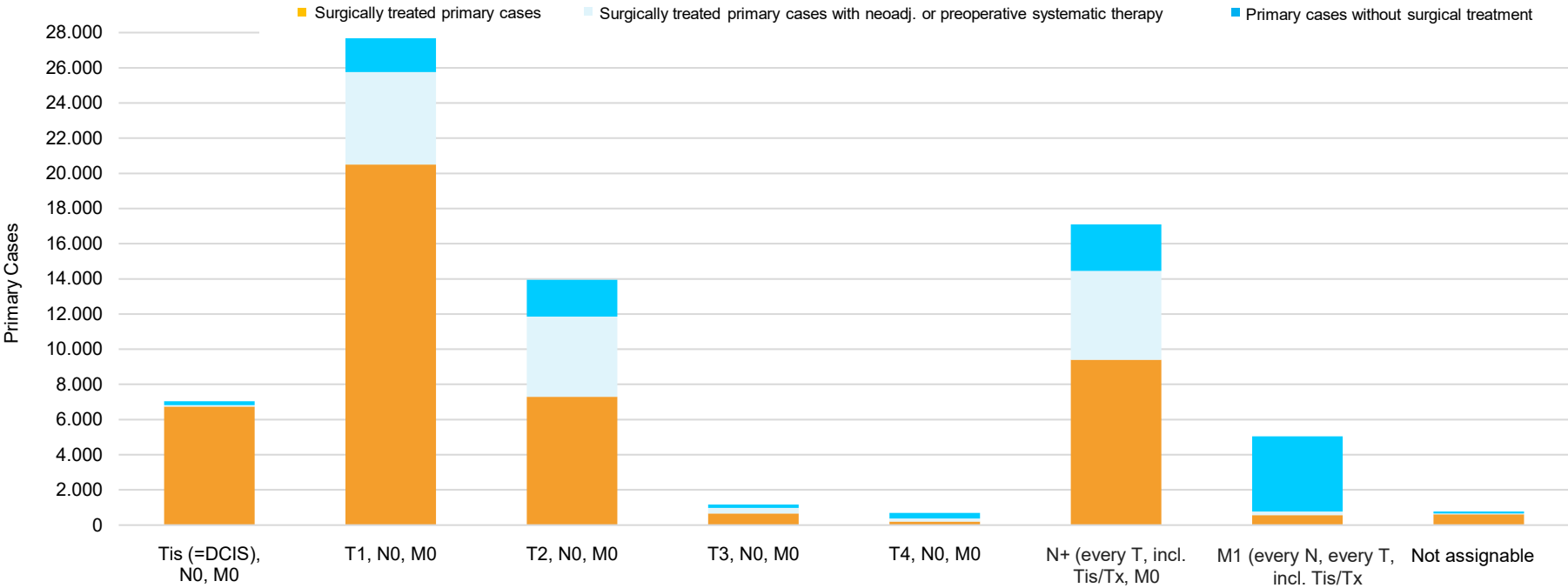
Tumour documentation systems in the centre's clinical sites



The details on the tumour documentation system was taken from the Data Sheet (Basic Data Sheet). It is not possible to use more than one system. In many cases, support is provided by the cancer registries or there may be a direct link to the cancer registry via a specific tumour documentation system.

Legend:	
Others	System used in < 4 clinical sites

Basic data – Primary Cases Breast Cancer

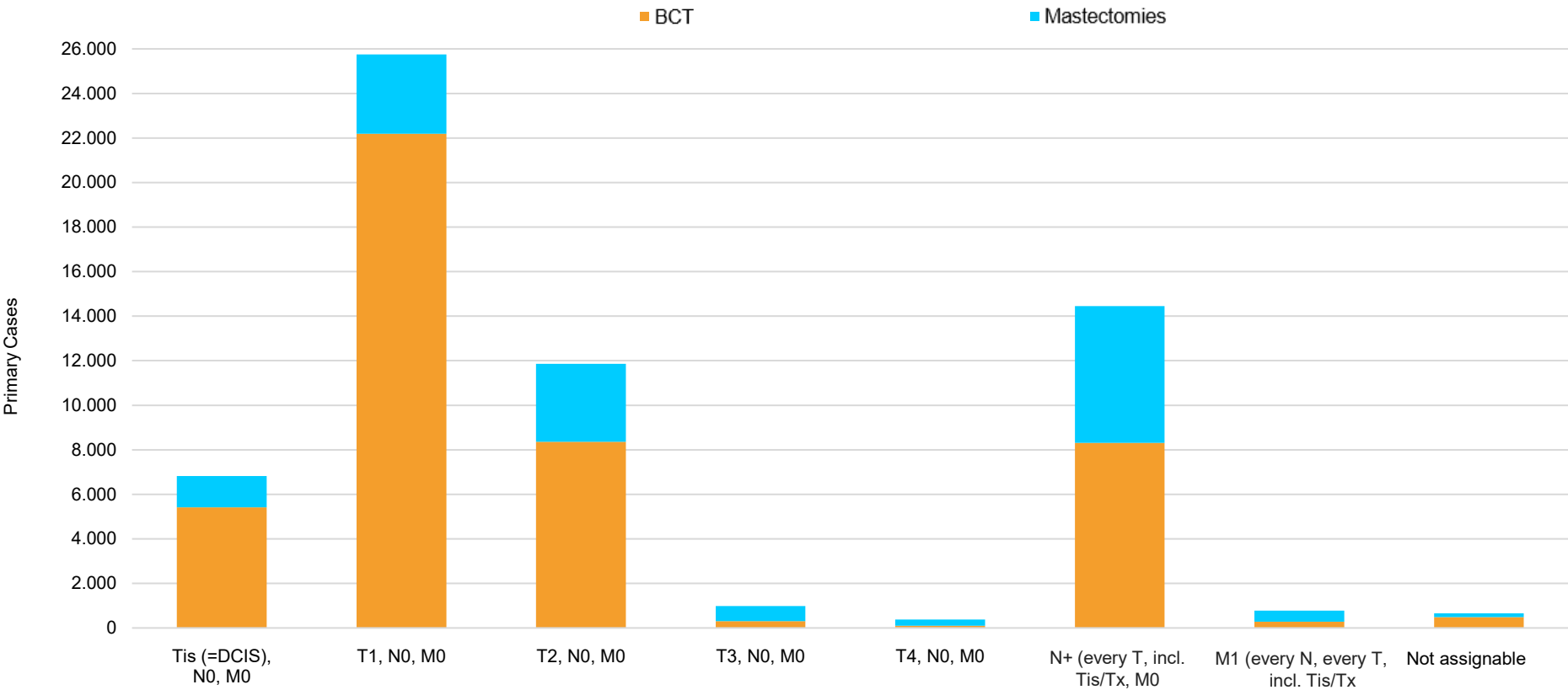


	Tis (=DCIS), N0, M0	T1, N0, M0	T2, N0, M0	T3, N0, M0	T4, N0, M0	N+ (every T incl. Tis/Tx), M0)	M1 (every N, every T incl. Tis/Tx)	Not assignable*	Total
Non-surgical primary cases	214 (3.04%)	2,009 (7.24%)	2,091 (14.99%)	177 (15.25%)	317 (45.81%)	2,644 (15.47%)	4,267 (84.63%)	111 (14.40%)	11,830
Primary cases surgery with neoadj. Th.**	90 (1.28%)	5,247 (18.90%)	4,553 (32.65%)	329 (28.34%)	171 (24.71%)	5,048 (29.53%)	212 (4.20%)	49 (6.36%)	15,699
Primary cases surgery without neoadj. Th.***	6,734 (95.68%)	20,506 (73.86%)	7,303 (52.36%)	655 (56.42%)	204 (29.48%)	9,400 (55.00%)	563 (11.17%)	611 (79.25%)	45,976
Primary cases Total	7,038	27,762	13,947	1,161	692	17,092	5,042	771	73,505

\* others: e.g. T1, N0, Mx  
\*\* primary cases operated with neo-adjuvant or pre-operative systemic therapy  
\*\*\* primary cases operated without neo-adjuvant or pre-operative systemic therapy



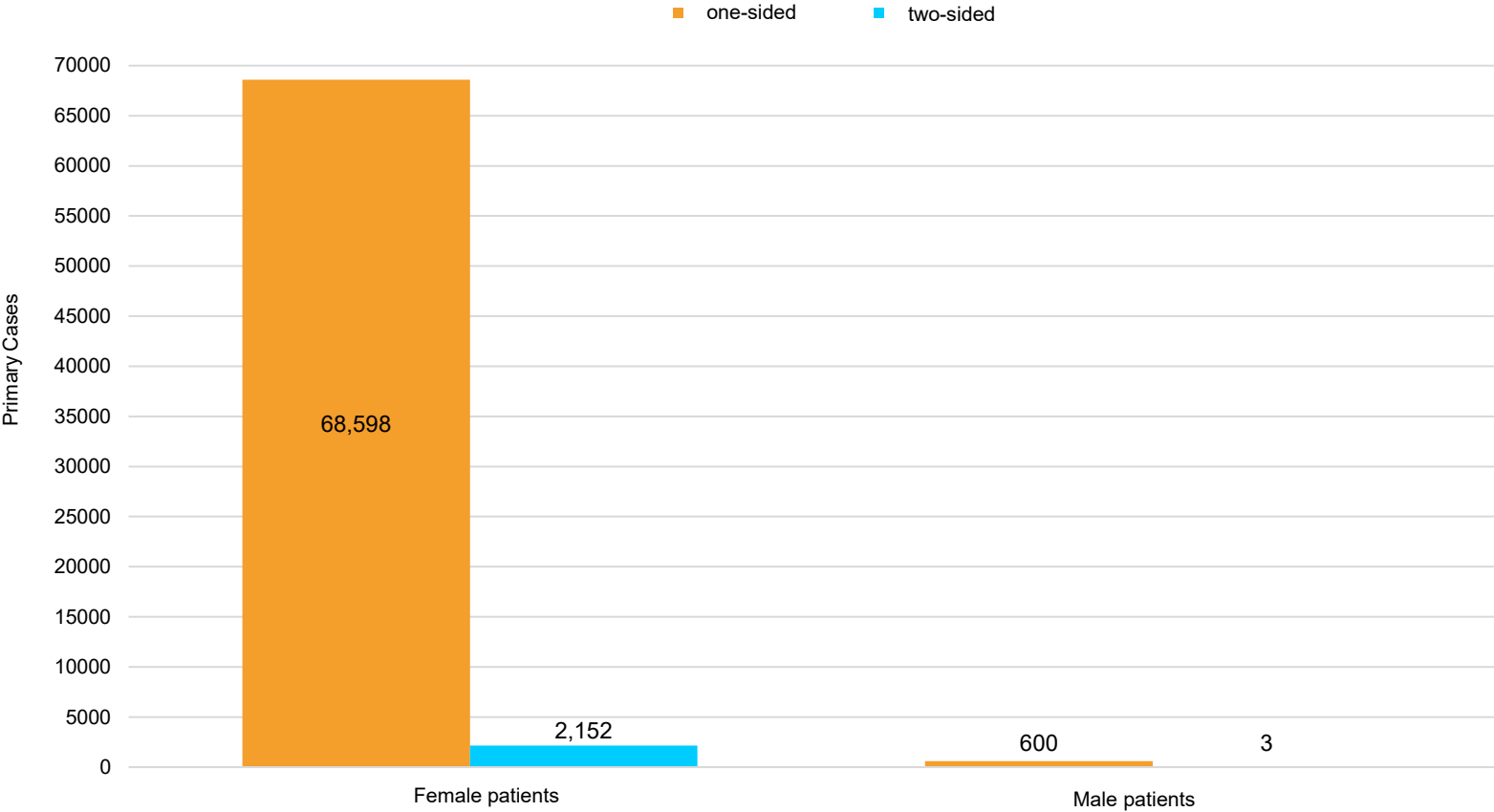
Basic data – Distribution of surgically treated primary cases



	Tis (=DCIS), N0, M0	T1, N0, M0	T2, N0, M0	T3, N0, M0	T4, N0, M0	N+ (every T incl. Tis/Tx), M0)	M1 (every N, every T incl. Tis/Tx)	Not assignable*	Total
Mastectomies	1,410 (20.66%)	3,566 (13.85%)	3,494 (29.47%)	678 (68.90%)	273 (72.80%)	6,136 (42.47%)	495 (63.87%)	168 (25.45%)	16,220
BCT	5,414 (79.34%)	22,187 (86.15%)	8,362 (70.53%)	306 (31.10%)	102 (27.20%)	8,312 (57.53%)	280 (36.13%)	492 (74.55%)	45,455
Surgically treated Primary cases Total	6,824	25,753	11,856	984	375	14,448	775	660	61,675

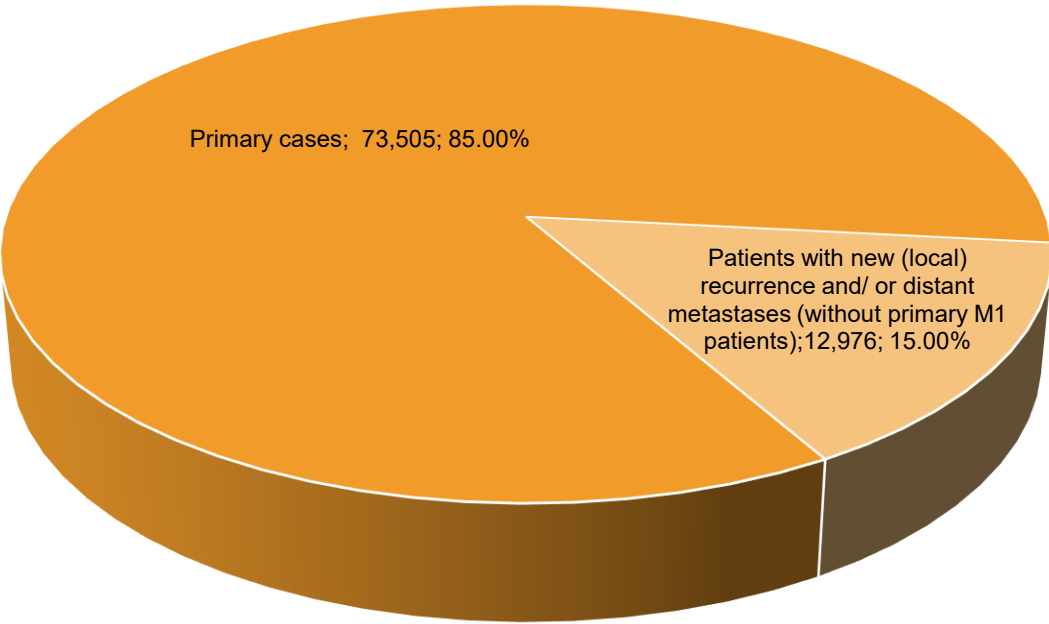
\* Not assignable: e.g. T1, N0, Mx

Basic data



	Female patients	Male patients	Primary cases Total
unilateral	68,595 (96.96%)	600 (99.50%)	69,195
bilateral (simultaneous)	2,152 (3.04%)	3 (0.50%)	4,310
			73,505
Total	70,747	603	

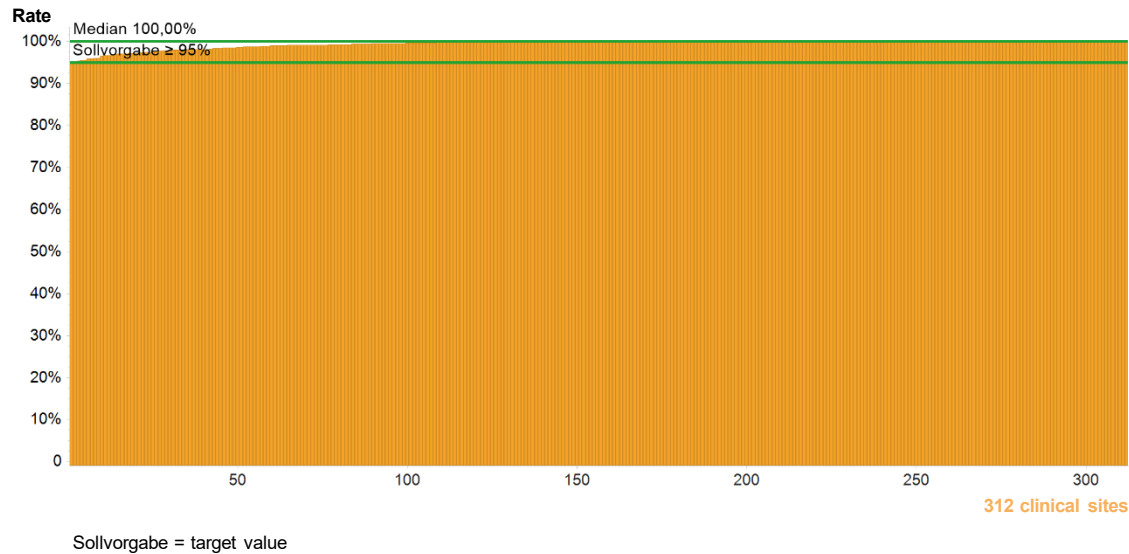
Basic data – Ratio of primary cases to recurrences / metastases breast cancer



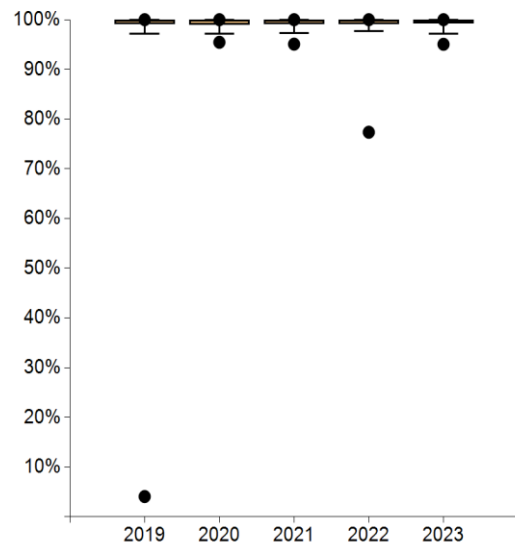
Primary cases	Patients with new (local) recurrence and/ or distant metastases (without primary M1 patients)*	Centre Cases
73,505 (85.00%)	12,976 (15.00%)	86,481 (100%)

\* Reference to indicator 14b

# 1. Post-operative tumour board



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of denominator presented in the postoperative tumour board	159,5*	42 - 1076	61313
Denominator	Surgical primary cases (primary case definition see 1.2.0a)	160,5*	42 - 1077	61675
Rate	Target value ≥ 95%	100%	95,05% - 100%	99,41%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 <sup>th</sup> percentile	99.10%	99.03%	99.11%	99.21%	99.28%
5 <sup>th</sup> percentile	97.20%	97.10%	97.26%	97.76%	97.14%
Minimum	4.08%	95.45%	95.08%	77.36%	95.05%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	312	100.00%

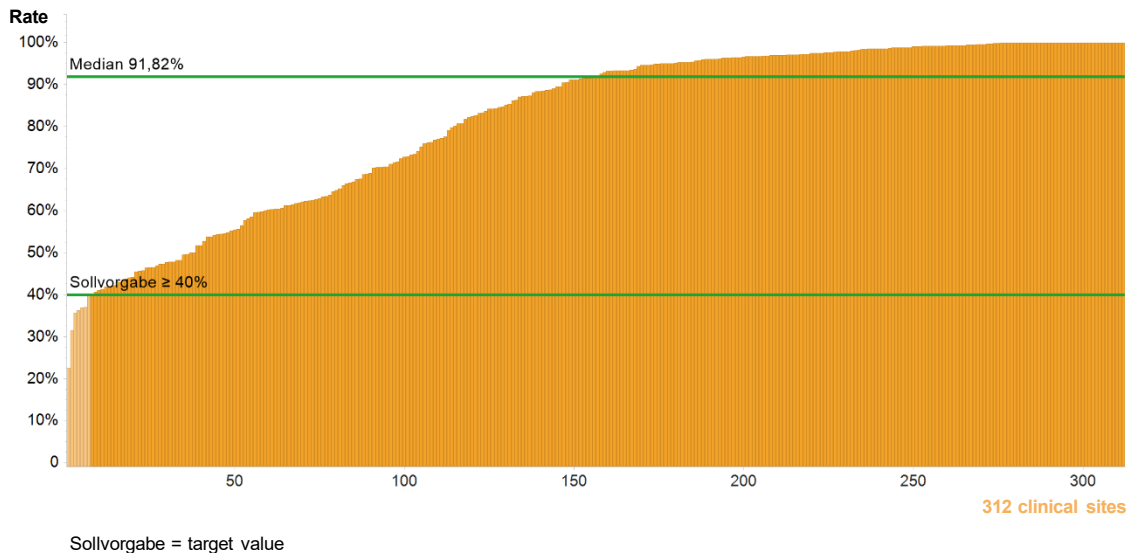
## Comments:

For years, postoperative presentation at the tumour board has been very high (median 100%). All centres have met the target value of ≥ 95%. In 201 centres (approx. 64%), all patients were discussed at the tumour board after surgery.

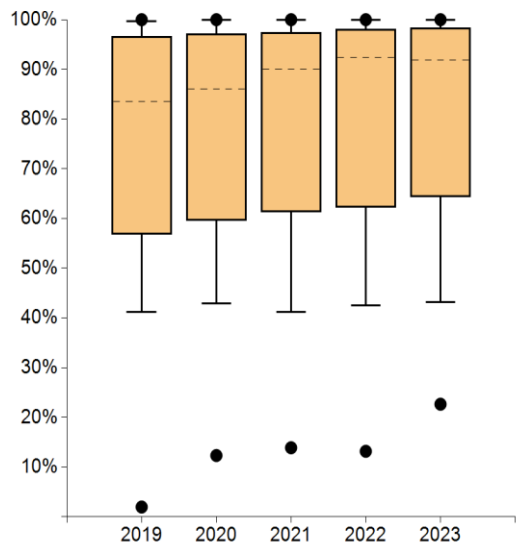
\*The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

\*\* Percentage of total patients treated in centres according to the numerator.

2. Pretherapeutic tumour board



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of denominator presented in the pretherapeutic tumour board	154*	23 - 1059	59835
Denominator	Primary cases	198,5*	52 - 1153	73505
Rate	Target value ≥ 40%	91.82%	22.65% - 100%	81.40%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	99.65%	100%	100%	100%	100%
75 <sup>th</sup> percentile	96.59%	97.16%	97.47%	98.13%	98.35%
Median	83.49%	86.00%	89.96%	92.38%	91.82%
25 <sup>th</sup> percentile	56.79%	59.56%	61.26%	62.19%	64.41%
5 <sup>th</sup> percentile	41.22%	42.87%	41.23%	42.55%	43.21%
Minimum	1.97%	12.33%	13.89%	13.18%	22.65%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	305	97.76%

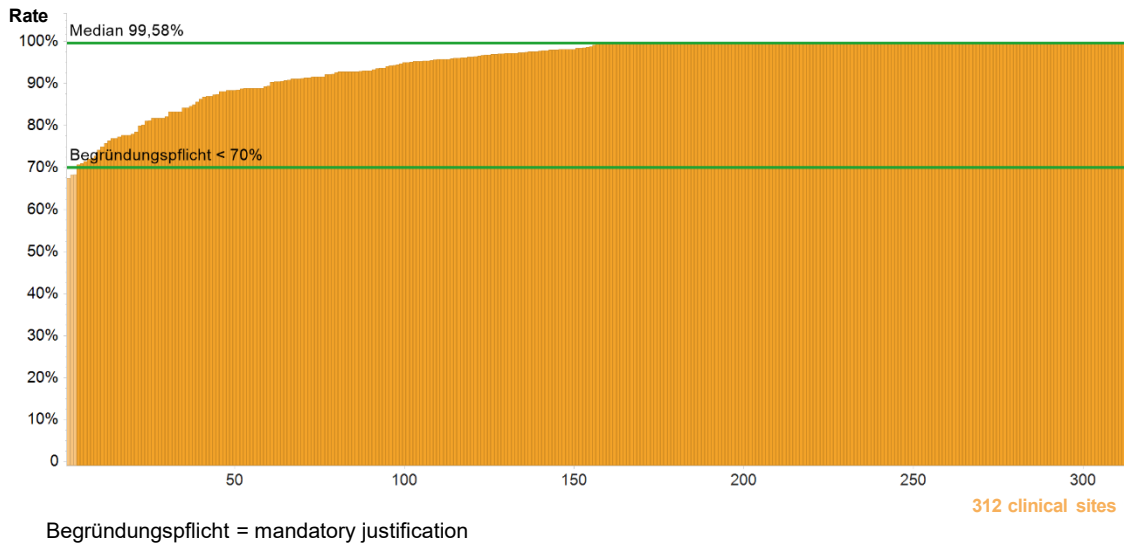
Comments:

Almost 98% of clinical sites meet the target value for this indicator. The percentage of patients referred for pre-therapy is rising steadily over the years and will be around 81% in the indicator year 2023 (previous years: 2020: approx. 77%, 2021: approx. 79%, 2022: approx. 80%). At 37 of the 312 clinical sites (approx. 12%), all primary cases were presented pre-therapy. At the seven clinical sites subject to mandatory statement of reasons, appropriate measures were initiated to increase the presentation rates. Seven remarks were made in the audits.

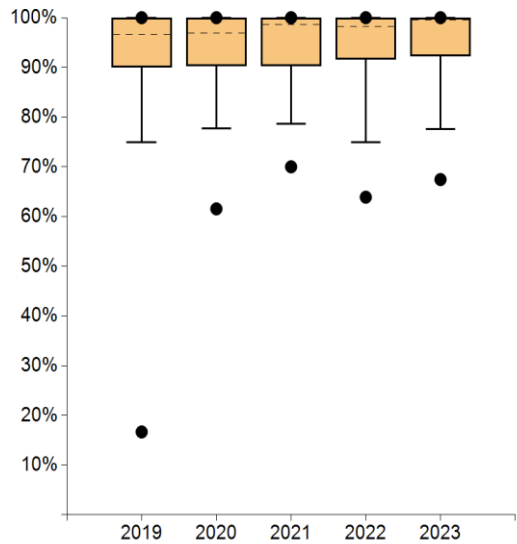
\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

\*\* Percentage of total patients treated in centres according to the numerator.

3. Tumour board local recurrence/metastases



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Nominator	Patients of the dominator presented in the tumour board	33*	1 - 188	12312
Denominator	Patients with first (local) recurrence and/or first distant metastasis (= Indicator 14b) (without primary M1 pat.)	36*	1 - 198	12976
Rate	Mandatory justification*** <70%	99.58%	67.44% - 100%	94.88%**

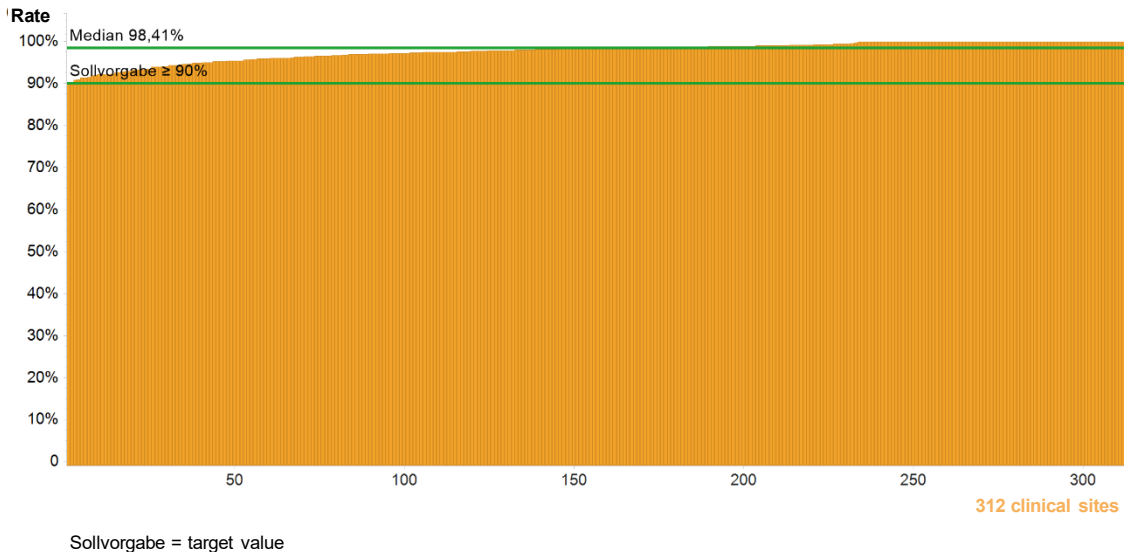


	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	100%	100%	100%	100%	100%
Median	96.67%	96.88%	98.68%	98.20%	99.58%
25 <sup>th</sup> percentile	90.00%	90.32%	90.32%	91.63%	92.26%
5 <sup>th</sup> percentile	75.00%	77.78%	78.65%	75.00%	77.59%
Minimum	16.67%	61.54%	70.00%	63.89%	67.44%

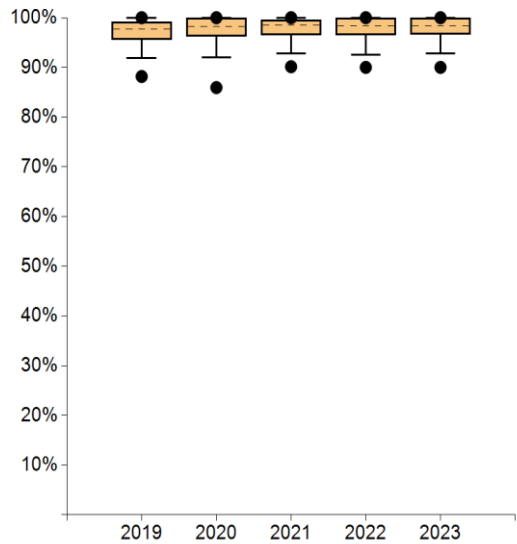
Clinical sites with evaluable data		Clinical sites meeting the plausibility limits	
Number	%	Number	%
312	100.00%	309	99.04%
<b>Comments:</b> The indicator is being implemented very well in the centres. 309 of the 312 clinical sites meet the target value for the referral of patients with newly diagnosed (local) recurrence and/or distant metastases to the tumour board (corresponding to 99%). 156 of 312 clinical sites (50%) achieved a referral rate of 100%. Three centres required clarification (centres that had not attracted attention in the previous year). Three remarks were made. At two centres, non-presentation by other clinics/cooperation partners was stated as the reason. Appropriate measures such as training courses/lectures to raise awareness among cooperation partners were initiated in the centres.			

The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator  
\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..

4. Radiotherapy after BCT in the case of invasive breast cancer (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator in which radiotherapy was recommended	100*	24 - 747	38714
Denominator	Primary cases with an invasive breast cancer and BCT (without primary M1 pat.)	103*	25 - 755	39583
Rate	Target value ≥ 90%	98.41%	90.00% - 100%	97.80%**

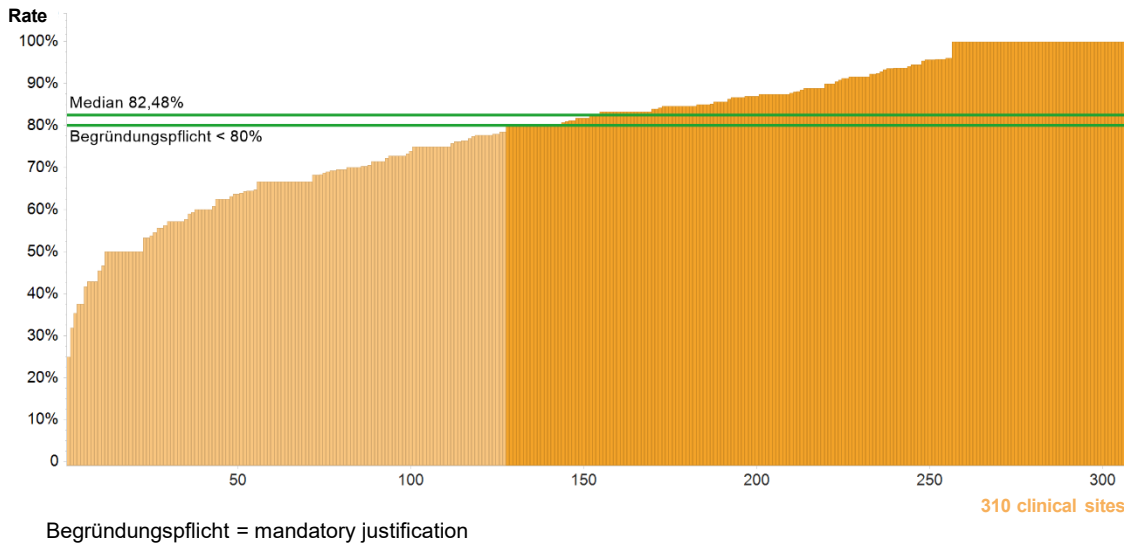


	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	99.10%	100%	99.49%	100%	100%
Median	97.67%	98.28%	98.53%	98.33%	98.41%
25 <sup>th</sup> percentile	95.60%	96.23%	96.45%	96.50%	96.66%
5 <sup>th</sup> percentile	91.89%	91.96%	92.75%	92.53%	92.75%
Minimum	88.17%	85.94%	90.14%	90.00%	90.00%

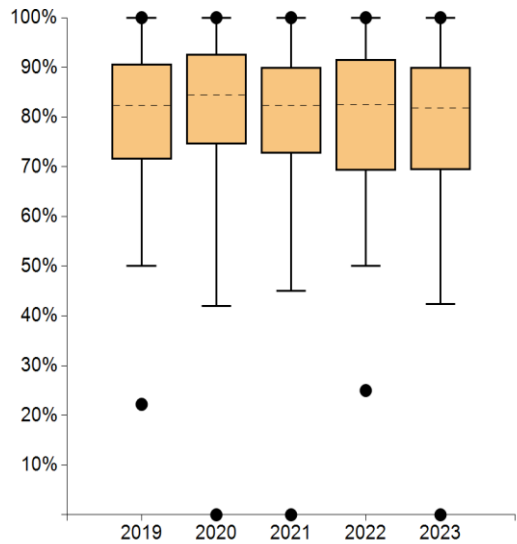
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	312	100.00%
<b>Comments:</b> The indicator 'Radiotherapy according to BET for invasive breast cancer' shows very good implementation in the centres. All centres meet the target value of ≥ 90% of this guideline QI. The median has been > 98% for years.			

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

5. Radiotherapy after BCT in the case of DCIS



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator in which radiotherapy was initiated	11*	0 - 91	4238
Denominator	Primary cases with DCIS and BCT	14*	2 - 104	5405
Rate	Mandatory justification*** <80%	81.82%	0.00% - 100%	78.41%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	90.68%	92.72%	90.00%	91.67%	90.00%
Median	82.35%	84.42%	82.35%	82.48%	81.82%
25 <sup>th</sup> percentile	71.43%	74.60%	72.73%	69.23%	69.32%
5 <sup>th</sup> percentile	50.00%	41.94%	45.00%	50.00%	42.45%
Minimum	22.22%	0.00%	0.00%	25.00%	0.00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
310	99.36%	182	58.71%

Comments:

Only data from 310 clinical sites were included in the evaluation of this indicator, as only these clinical sites treated primary cases with DCIS and BET in the indicator year under review. 182 of these 310 clinical sites (approx. 59%) achieved results  $\geq 80\%$  and were therefore not subject to mandatory statement of reasons, while 128 were  $< 80\%$ . The most common reason given was the patient's wish not to undergo radiation therapy (85 mentions). Other reasons included small size (44), radiotherapy being recommended but not yet started (28), lost to follow-up (26), older age or comorbidities (23), low grade (21) and the presence of M. Paget (13).

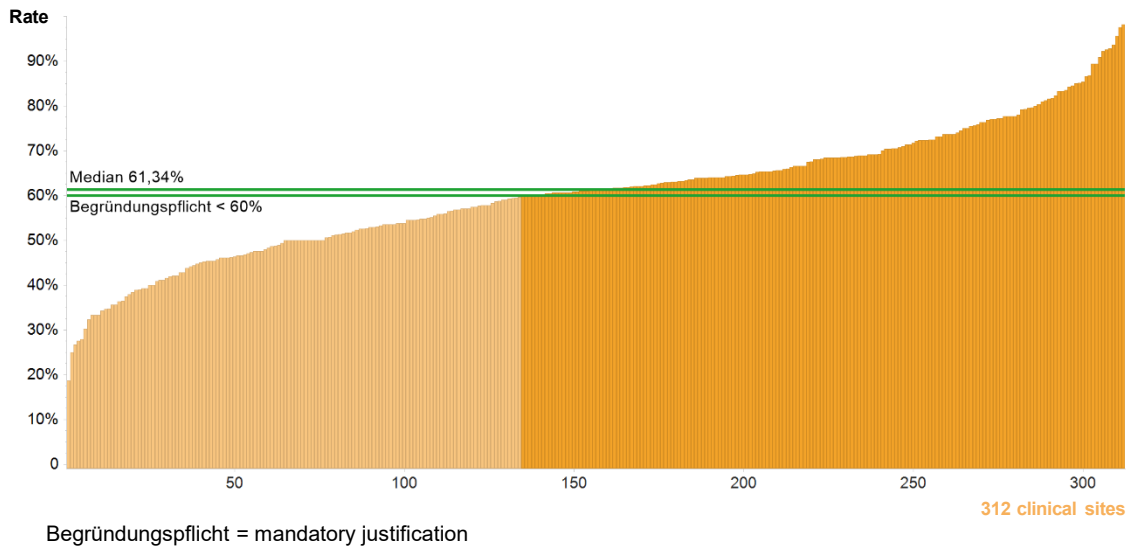
The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

\*\* Percentage of total patients treated in centres according to the numerator

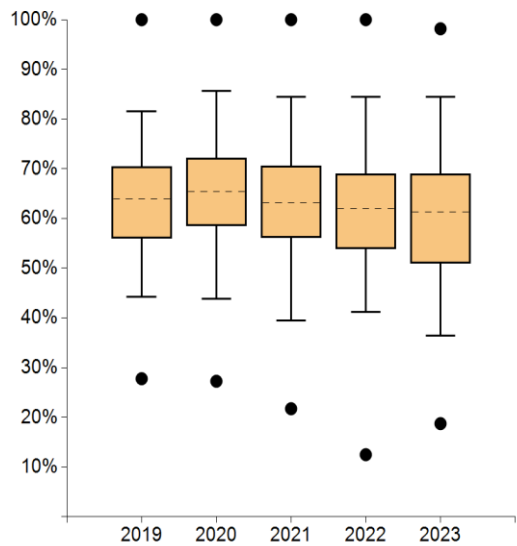
\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..



6. Chemotherapy in the case of receptor pos. and nodal pos. result



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator in which chemotherapy was recommended	23*	3 - 124	8374
Denominator	Primary cases with invasive breast cancer with receptor positive and nodal positive result (without primary M1 pat.)	37,5*	9 - 202	13777
Rate	Mandatory justification*** < 60%	61.34%	18.75% - 98.17%	60.78%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	98.17%
95 <sup>th</sup> percentile	81.55%	85.65%	84.52%	84.51%	84.49%
75 <sup>th</sup> percentile	70.40%	72.16%	70.59%	68.99%	68.97%
Median	64.00%	65.45%	63.16%	62.00%	61.34%
25 <sup>th</sup> percentile	56.03%	58.48%	56.10%	53.85%	51.03%
5 <sup>th</sup> percentile	44.28%	43.82%	39.47%	41.18%	36.42%
Minimum	27.78%	27.27%	21.74%	12.50%	18.75%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
312	100.00%	178	57.05%

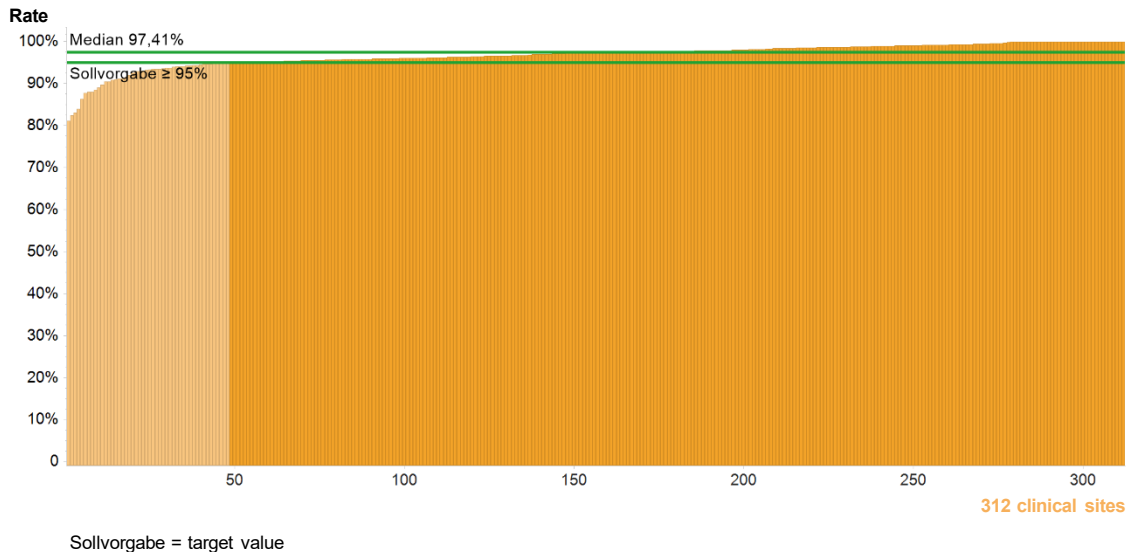
**Comments:**  
The proportion of patients in the denominator receiving chemotherapy for invasive breast cancer with receptor-positive and node-positive findings has declined slightly compared with the previous indicator year to currently approx. 61%. In comparison, there has been a continuous decline over the years in the number of clinical sites that are within the plausibility limits, which now stands at 57%. All reasons were deemed plausible in the audits. Reasons included, for example, no recommendation due to the results of gene expression analyses, no recommendation for chemotherapy due to advanced age and/or comorbidities, or treatment with CDK4/6 inhibitors.

The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

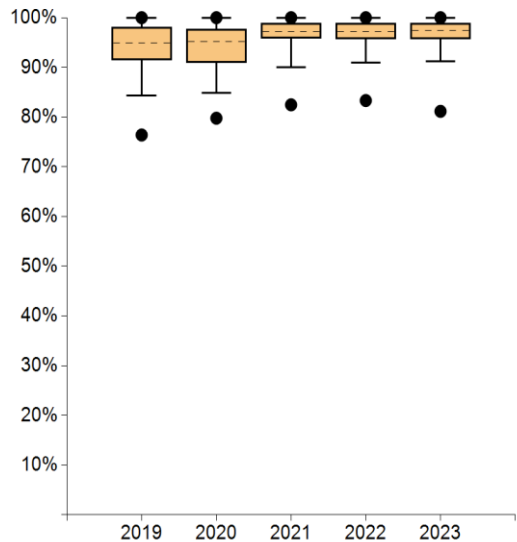
\*\* Percentage of total patients treated in centres according to the numerator

\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..

7. Endocrine therapy in the case of steroid rec. positive result (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator in which endocrine therapy was recommended	132*	38 - 825	49671
Denominator	Primary cases with invasive breast cancer in the case of steroid rec. positive result (without primary M1 pat.)	138*	40 - 855	51302
Rate	Target value ≥ 95%	97.41%	81.16% - 100%	96.82%**



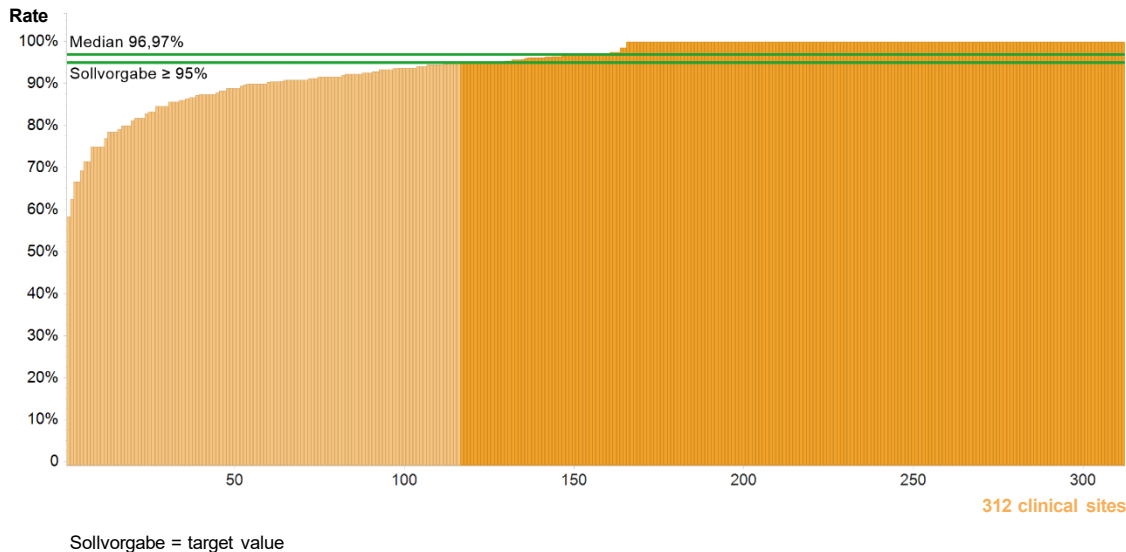
	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	98.04%	97.72%	98.84%	98.85%	98,83%
Median	94.85%	95.16%	97.20%	97.18%	97.41%
25 <sup>th</sup> percentile	91.52%	90.91%	95.78%	95.74%	95.67%
5 <sup>th</sup> percentile	84.28%	84.84%	90.00%	90.91%	91.16%
Minimum	76.40%	79.78%	82.47%	83.33%	81.16%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	264	84.62%

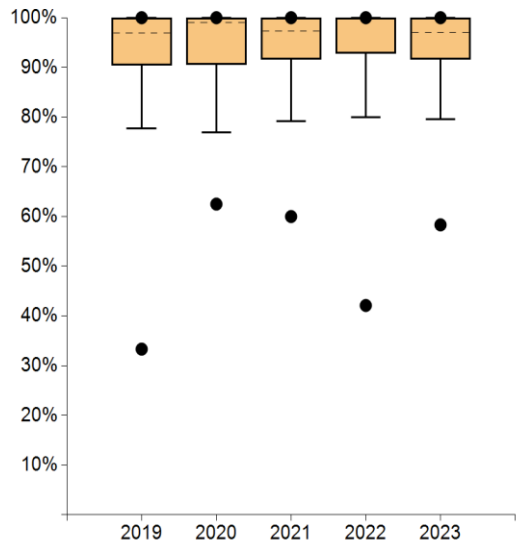
**Comments:**  
As in the previous year, approximately 85% of clinical sites met the target value. 48 clinical sites did not meet the target value. Of the clinical sites with a rate of < 95%, 39 justified this with a pending recommendation during ongoing therapy (postoperative tumour board still pending). Other common reasons were: only weak hormone receptor positivity (20x), advanced age/contraindications or comorbidities (including other prognostic oncological diseases (17x), patients who died before therapy (4x), refusal by patients (4x) or external follow-up treatment (5x).

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

8. Trastuzumab therapy over 1 year in the case of HER-2 pos. result (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator for which trastuzumab therapy over 1 year was recommended	15,5*	2 - 110	5834
Denominator	Primary cases with invasive breast cancer with HER-2 pos. result ≥ pT1c (in neoadj. pre-treated and in non-operated patients: ≥ cT1c) (without primary M1 patients)	16*	2 - 112	6139
Rate	Target value ≥ 95%	96.97%	58.33% - 100%	95.03%**

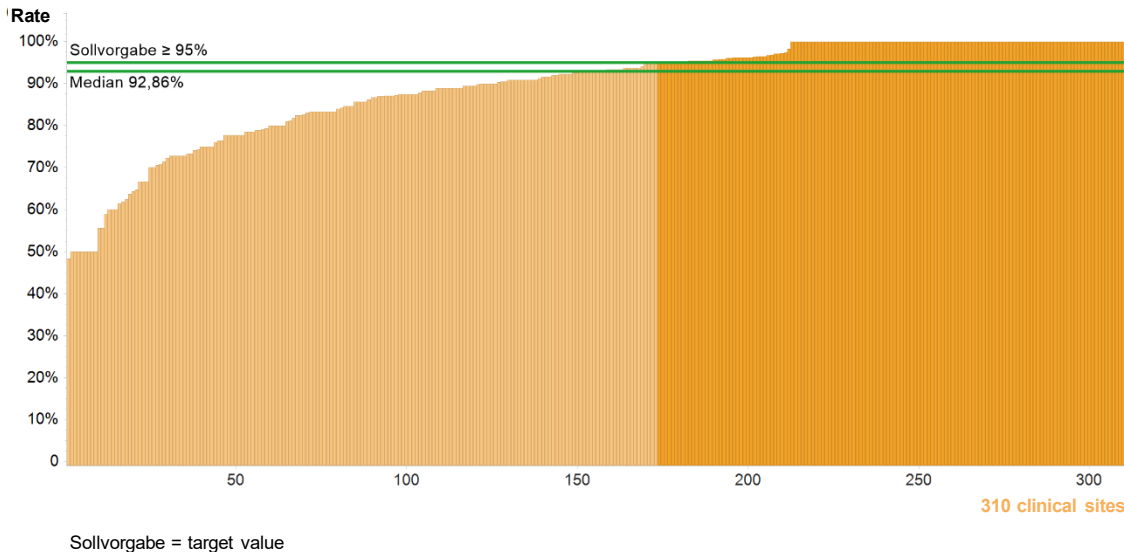


	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	100%	100%	100%	100%	100%
Median	96.88%	99.02%	97.26%	100%	96.97%
25 <sup>th</sup> percentile	90.48%	90.52%	91.67%	92.86%	91.67%
5 <sup>th</sup> percentile	77.78%	76.96%	79.21%	80.00%	79.63%
Minimum	33.33%	62.50%	60.00%	42.11%	58.33%

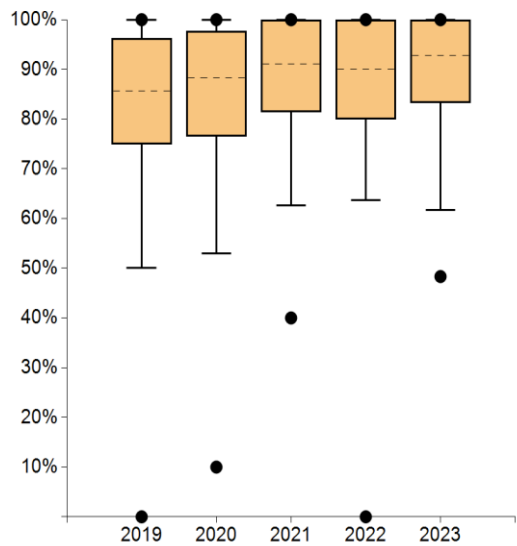
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	196	62.82%
<b>Comments:</b> 196 clinical sites (approx. 63%) achieved the target value of ≥ 95% for trastuzumab therapy. The most frequently cited reasons for sites < 95% (n = 116) were co-morbidity/multi-morbidity (e.g. concomitant cardiac disease) (89x) and/or high patient age (45x). Another reason was consideration of the patient's wishes (refusal of therapy) (13x).			

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

9. Endocrine therapy for metastasis (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Patients of the denominator, who were started on endocrine based therapy in the metastasised stage as first-line therapy	13*	1 - 73	4914
Denominator	Patients with steroid rec. pos. and HER2-negative inv. breast cancer with 1st Remote metastasis (incl. primary M1 pat.)	15*	1 - 75	5495
Rate	Target value ≥ 95%	92.86%	48.33% - 100%	89.43%**



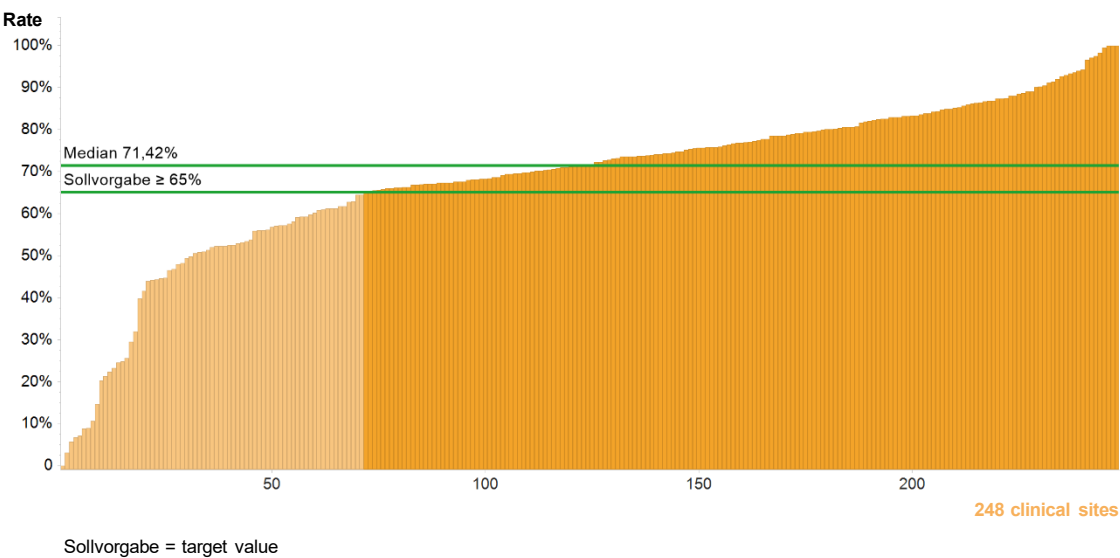
	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	96.23%	97.67%	100%	100%	100%
Median	85.71%	88.24%	91.11%	90.00%	92.86%
25 <sup>th</sup> percentile	75.00%	76.47%	81.42%	80.00%	83.33%
5 <sup>th</sup> percentile	50.00%	52.94%	62.60%	63.64%	61.70%
Minimum	0.00%	10.00%	40.00%	0.00%	48.33%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
310	99.36%	137	44.19%

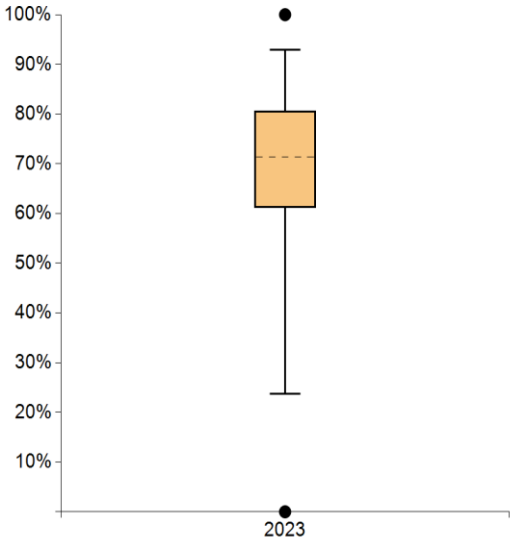
**Comments:**  
44% of clinical sites met the target value of ≥ 95% (compared to 37% in the previous year). The reasons given by the centres were found to be plausible in the audits. The reasons given by the 173 sites with rates < 95% were patients who died before the start of therapy (78x), rejection of endocrine therapy by the patient (59x), initiation of chemotherapy in cases of high therapy pressure (57x), best supportive care (20x), and other reasons (10x). (78x), refusal of endocrine therapy by the patient (59x), initiation of chemotherapy in cases of high treatment pressure (57x), best supportive care (20x) and/or only very weakly hormone receptor-positive tumours (9x).

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

10. Psycho-oncological distress screening



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Patients of the denominator who were psycho-oncologically screened	152,5*	0 - 1202	44665
Denominator	Primary case pat. (= indicator 14a) + patients with new (local) recurrence and/or distant metastases (= indicator 14b) (without primary M1 patients, as already included in the primary cases)	226*	64 - 1341	66737
Rate	Target value ≥ 65%	71.42%	0.00% - 100%	66.93%**



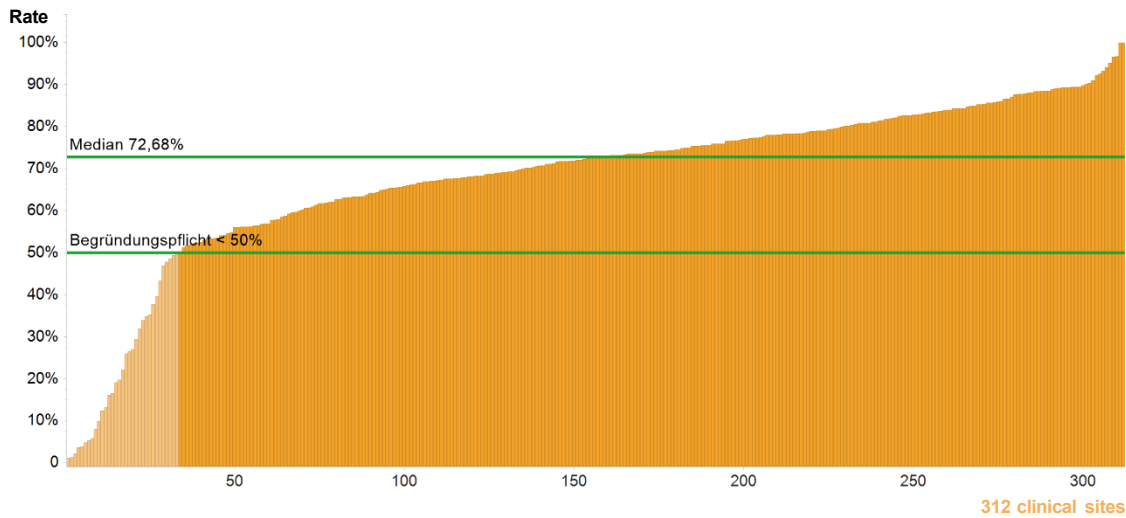
	2019	2020	2021	2022	2023
Maximum	----	----	----	----	100%
95 <sup>th</sup> percentile	----	----	----	----	92.87%
75 <sup>th</sup> percentile	----	----	----	----	80.68%
Median	----	----	----	----	71.42%
25 <sup>th</sup> percentile	----	----	----	----	61.13%
5 <sup>th</sup> percentile	----	----	----	----	23.70%
Minimum	----	----	----	----	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
248	79.49%	177	71.37%

**Comments:**  
The indicator was changed in the indicator year from “psycho-oncological counselling (consultation ≥ 25 min)” to “psycho-oncological distress screening” and was still collected on an optional basis in the indicator year 2023. Data for this indicator are available from 248 clinical sites (corresponding to 79.5%). Of the data from the 248 evaluable clinical sites, approximately 71% achieved the target value. Challenges in implementing/converting the process or recording were frequently cited as reasons for not achieving the target value.

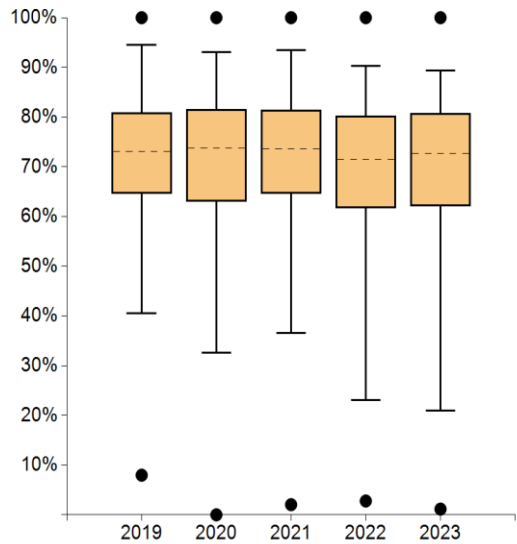
\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

11. Social service counselling



Begründungspflicht = mandatory justification

	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Patients of the denominator who received counselling by social services in an in- or outpatient setting	161*	2 - 1185	59475
Denominator	Primary case Patients (= indicator 14a) + Patients with new (local) recurrence and/or distant metastases (= indicator 14b) (without primary M1 pat., since already included in the primary cases)	233*	64 - 1341	86481
Rate	Mandatory justification*** <50%	72.68%	1.15% - 100%	68.77%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	94.52%	93.12%	93.45%	90.28%	89.40%
75 <sup>th</sup> percentile	80.85%	81.50%	81.38%	80.27%	80.82%
Median	73.03%	73.71%	73.66%	71.44%	72.68%
25 <sup>th</sup> percentile	64.68%	62.99%	64.61%	61.77%	62.11%
5 <sup>th</sup> percentile	40.59%	32.54%	36.57%	23.02%	21.02%
Minimum	7.97%	0.00%	2.04%	2.78%	1.15%

Clinical sites with evaluable data		Clinical sites meeting the plausibility limits	
Number	%	Number	%
312	100.00%	279	89.42%

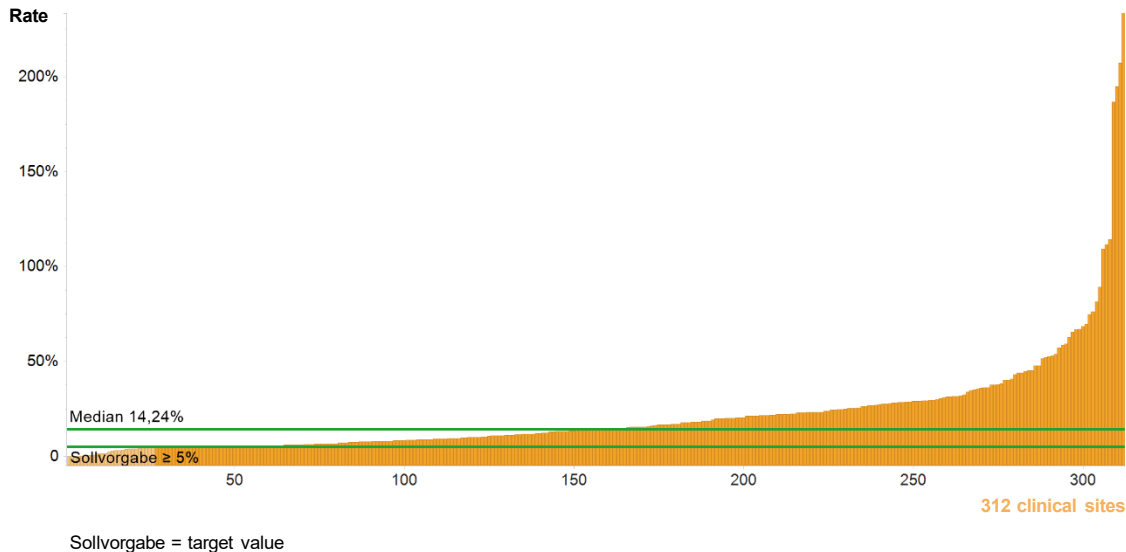
**Comments:**  
Approximately 89% of centres have counselling rates above 50%. On average, just under 73% of patients received counselling from social services, with a wide range (1.15-100%). It should be noted that 17 of the centres with counselling rates of less than 50% (1.15-34.8%) are located in Switzerland or Austria, where different regulations apply with regard to social counselling. In Germany, 16 clinical sites were required to provide a mandatory statement of reasons and cited the patient's lack of desire for counselling despite the offer, staff shortages or organisational challenges as reasons.

The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

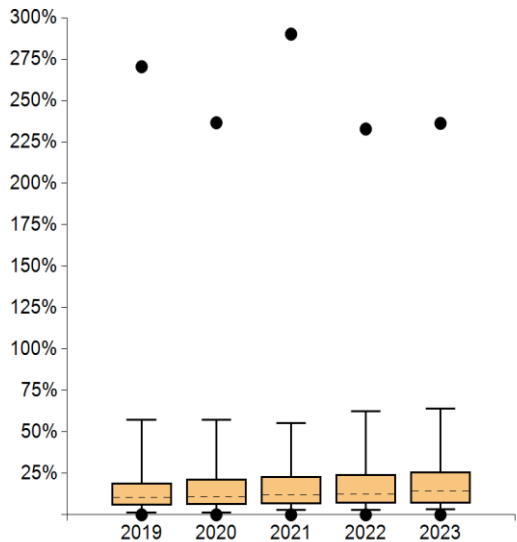
\*\* Percentage of total patients treated in centres according to the numerator

\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..

12. Patients enrolled in a study



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Patients who were included in a study with an ethical vote	27*	0 - 1268	17867
Denominator	Primary cases	198,5*	52 - 1153	73505
Rate	Target value ≥ 5%	14.24%	0.00% - 236.22%	24.31%**



	2019	2020	2021	2022	2023
Maximum	270.40%	236.58%	290.07%	232.80%	236.22%
95 <sup>th</sup> percentile	57.35%	57.36%	55.51%	62.33%	64.02%
75 <sup>th</sup> percentile	19.04%	21.45%	23.07%	24.45%	25.83%
Median	10.37%	10.74%	11.87%	12.38%	14.24%
25 <sup>th</sup> percentile	5.71%	6.17%	6.65%	6.98%	6.77%
5 <sup>th</sup> percentile	1.30%	1.25%	2.85%	2.78%	3.33%
Minimum	0.00%	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	286	91.67%

**Comments:**  
Just under 92% of clinical sites met the study quota of ≥ 5% (previous year: 90%). There were 18 remarks and 4 deviations. Reasons included delayed study start, screening completed but inclusion not possible due to existing exclusion criteria, patient refusal, no suitable studies, and staff shortages. Measures taken included increasing staff numbers, collaborating with external partners, and establishing new studies.

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.



Individual Annual Report - Benchmark

Individual Annual Report - Evaluation of site-specific key figures

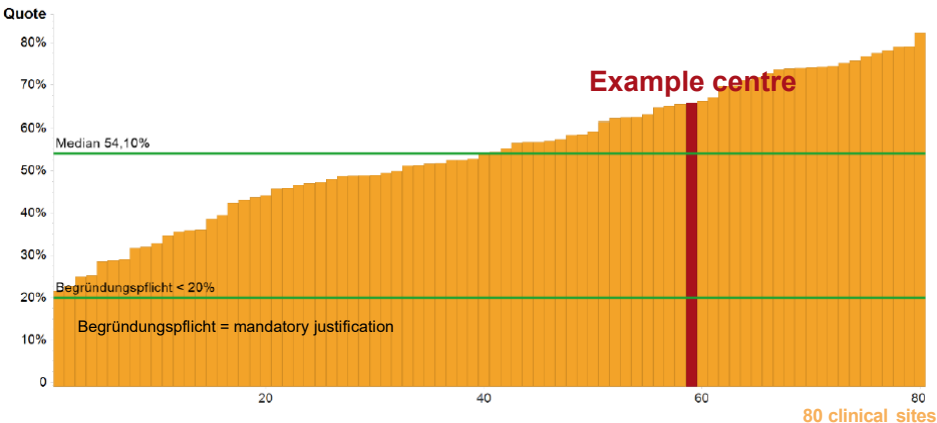
What is the individual Annual Report?

In the individual annual report, the site-specific centre data is shown and compared to the other certified centres in the respective certification system of the German Cancer Society. In addition, the individual development of the centre is presented over the course of time.

The content and design of an individual Annual Report are based on the general Annual Reports. An example of an individual Annual Report is available at [www.onkoziert.de](http://www.onkoziert.de) under General Information / Annual Reports.

Who can receive the individual Annual Report?

The prerequisite for the preparation of the individual annual report is the publication of the general annual report (announcement on [www.onkoziert.de](http://www.onkoziert.de)) as well as the depiction of the own centre in the general Annual Report (for example, centres with initial certification are not depicted in the audit year). In the case of multi-site centres, each site is shown in its own individual Annual Report. Only the general Annual Report is currently available for oncology centres.



Example centre (red bar) compared to the other certified centres

	Indicator definition	Example centre				
		2019	2020	2021	2022	2023
Numerator	Patients referred by the denominator who received inpatient or outpatient counselling from social services	219	263	220	240	237
Denomintor	Primary cases (= indicator 1a) + patients with newly occurring recurrence (local, regional LN metastases) and/or distant metastases (= indicator 1b)	321	362	331	355	360
Rate	Mandatory justification*** <20%	68,22%	72,65%	66,47%	67,61%	65,83%

Individual development of the example centre over time

Extract from an individual Annual Report  
(indicator counselling social service)



## Individual Annual Report - Benchmark

---

### How can I receive the individual Annual Report?

The individual Annual Report is made available for download as an electronic PowerPoint file on the [Data-WhiteBox](#) platform.

Access to an individual Annual Report differs depending on the certification system:

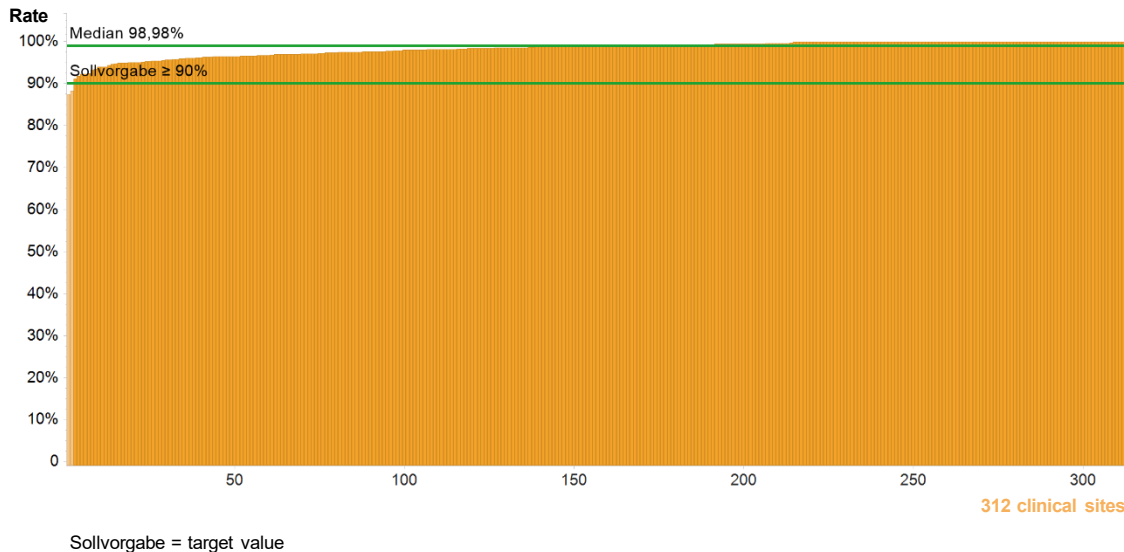
#### **Colorectal, Prostate and Gynaecological Cancer Centres**

- The individual Annual Report is made available for all Colorectal, Prostate and Gynaecological Cancer Centres by decision of the respective Certification Commission.
- The centres (centre management and centre coordination) are informed by email by OnkoZert about the availability of the respective individual Annual Report.
- The centres (centre management and centre coordination) are informed by email by OnkoZert about the availability of the respective individual Annual Report.

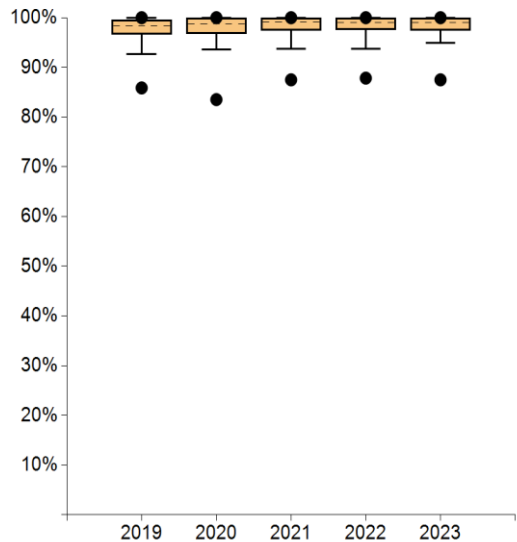
#### **All other Organ Cancer Centres / Modules**

- The centres (centre management and centre coordination) are informed by email by OnkoZert about the basic availability of the individual Annual Reports. From this point onwards, an individual Annual Report can optionally be ordered for a fee.
- The 'Individual Annual Report Order Form' is available at [www.onkozert.de](http://www.onkozert.de) under General Information / Annual Reports. Orders can only be placed by persons who are registered with OnkoZert as contact persons (e.g. centre management, centre coordination, QMB, etc.)
- The costs for the respective individual Annual Reports are listed on the form.
- The preparation time is approx. 3 weeks after receipt of order.

13. Pretherapeutic histological confirmation (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with pretherapeutic histological diagnosis confirmation by punch or vacuum-assisted biopsy	157,5*	42 - 1076	60624
Denominator	Primary cases with initial surgery and histology of invasive breast cancer or DCIS	160,5*	42 - 1077	61675
Rate	Target value ≥ 90%	98.98%	87.50% - 100%	98.30%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	99.59%	100%	100%	100%	100%
Median	98.41%	98.78%	99.13%	99.04%	98.98%
25 <sup>th</sup> percentile	96.63%	96.74%	97.41%	97.57%	97.39%
5 <sup>th</sup> percentile	92.66%	93.53%	93.75%	93.74%	94.94%
Minimum	85.87%	83.52%	87.50%	87.84%	87.50%

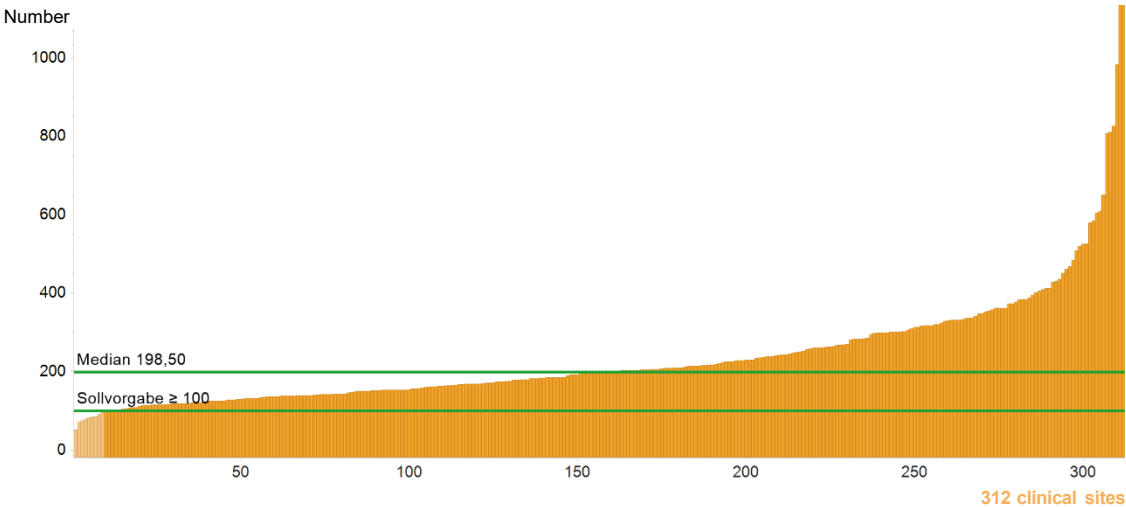
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	310	99.36%

**Comments:**  
As in previous years, the indicator shows a very high compliance rate. 99% of clinical sites meet the target value of ≥ 90%. Two centres fall slightly short of the target value, at approximately 88% each. The reasons given by the centres were critically examined by the auditors during the audits and were found to be comprehensible and plausible.

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

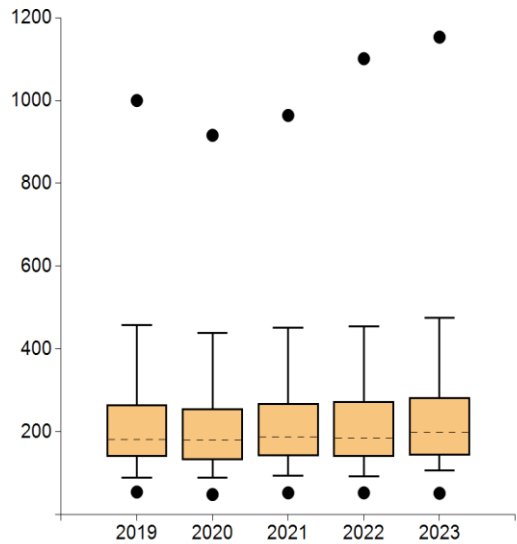
\*\* Percentage of total patients treated in centres according to the numerator.

14a. Primary cases breast cancer



Sollvorgabe = target value

	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Number	Primary Cases	198,5	52 - 1153	73505
	Target value $\geq 100$			

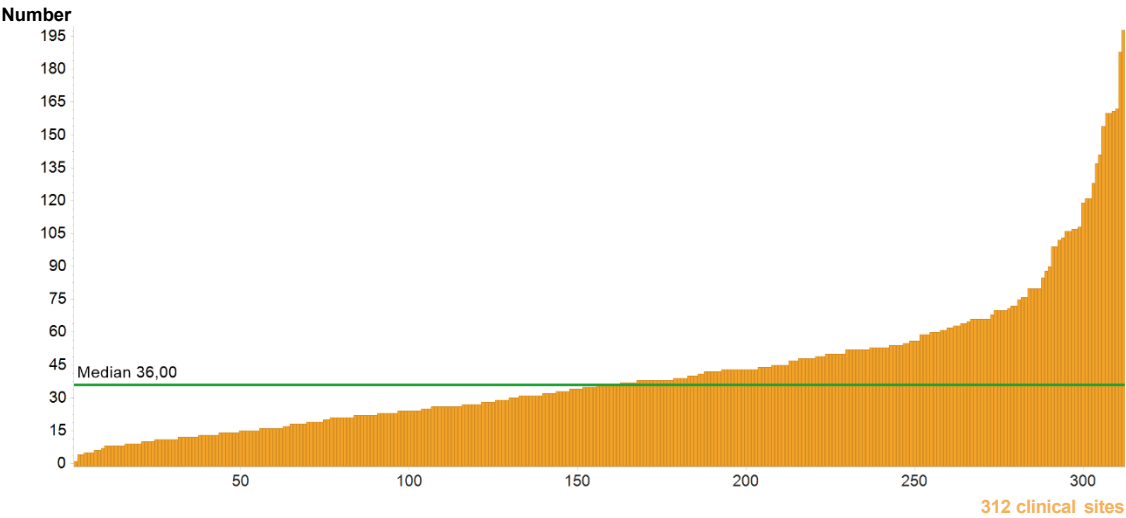


		2019	2020	2021	2022	2023
	Maximum	1000,00	916,00	964,00	1101,00	1153,00
	95 <sup>th</sup> percentile	457,80	439,30	451,50	454,30	475,65
	75 <sup>th</sup> percentile	265,50	256,50	269,25	273,25	283,25
	Median	182,00	180,00	187,50	185,50	198,50
	25 <sup>th</sup> percentile	140,00	132,50	142,00	140,75	143,00
	5 <sup>th</sup> percentile	90,00	89,10	94,50	92,35	106,55
	Minimum	55,00	49,00	53,00	53,00	52,00

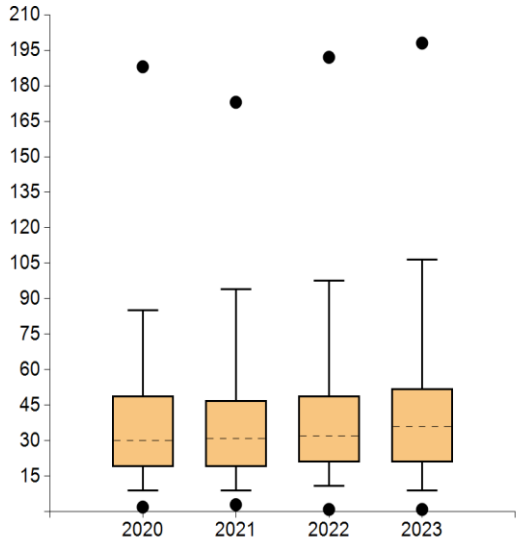
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	303	97.12%

**Comments:**  
Approximately 97% of clinical sites achieve the target value of  $\geq 100$  primary cases (previous indicator year: 94.5%). In centres with multiple locations, the number of clinical sites with  $< 100$  primary cases has fallen to a total of 5 (previous year: 11). Based on the current incidence rate for 2022 of 81,206 (Centre for Cancer Registry Data at the Robert Koch Institute), the coverage of primary cases treated in German centres (= 69,205) is 85.2%.

14b. Patients with 1st (local) recurrence and/or distant metastases (without primary M1 patients)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Number	Patients with new (local) recurrence and/or distant metastases (without primary M1 Pat.)	36	1 - 198	12976
	No target value			

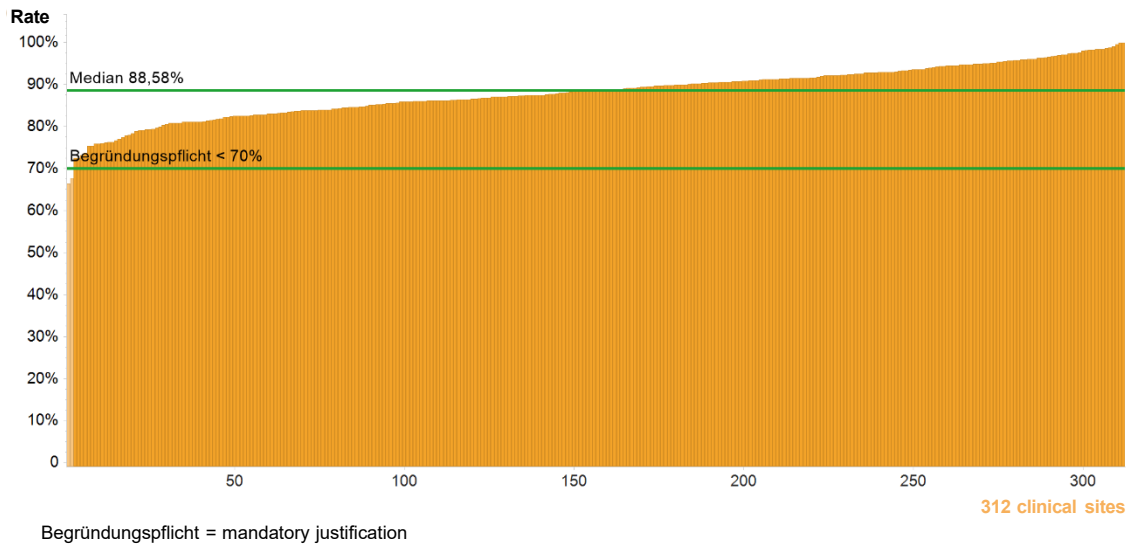


		2019	2020	2021	2022	2023
Maximum		-----	188,00	173,00	192,00	198,00
95 <sup>th</sup> percentile		-----	85,00	94,00	97,65	106,45
75 <sup>th</sup> percentile		-----	49,00	47,00	49,00	52,00
Median		-----	30,00	31,00	32,00	36,00
25 <sup>th</sup> percentile		-----	19,00	19,00	21,00	21,00
5 <sup>th</sup> percentile		-----	9,00	9,00	11,00	9,00
Minimum		-----	2,00	3,00	1,00	1,00

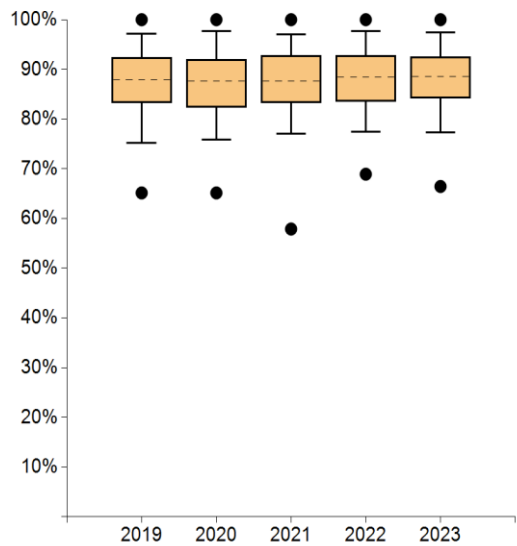
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100,00%	-----	-----

**Comments:**  
On average, 36 patients with newly occurring (local) recurrence and/or distant metastases were treated in the certified centres in the indicator year. Over the years, a continuous, slight increase has been recorded for the median and the upper percentiles.

15. Number of surgical procedures for R0 resection for Breast Conserving Procedure (BCT) Certification



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with only one surgical procedure up to final surgical condition BCT	102,5*	23 - 814	39730
Denominator	Surgical primary cases with BCT and R0	118*	29 - 883	44881
Rate	Mandatory justification*** < 70%	88.58%	66.45% - 100%	88.52%**



	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	97.11%	97.73%	97.09%	97.70%	97.44%
75 <sup>th</sup> percentile	92.45%	91.97%	92.78%	92.73%	92.55%
Median	87.95%	87.62%	87.60%	88.50%	88.58%
25 <sup>th</sup> percentile	83.24%	82.35%	83.33%	83.57%	84.16%
5 <sup>th</sup> percentile	75.23%	75.87%	77.05%	77.40%	77.34%
Minimum	65.15%	65.15%	57.89%	68.92%	66.45%

Clinical sites with evaluable data		Clinical sites meeting the plausibility limits	
Number	%	Number	%
312	100.00%	310	99.36%

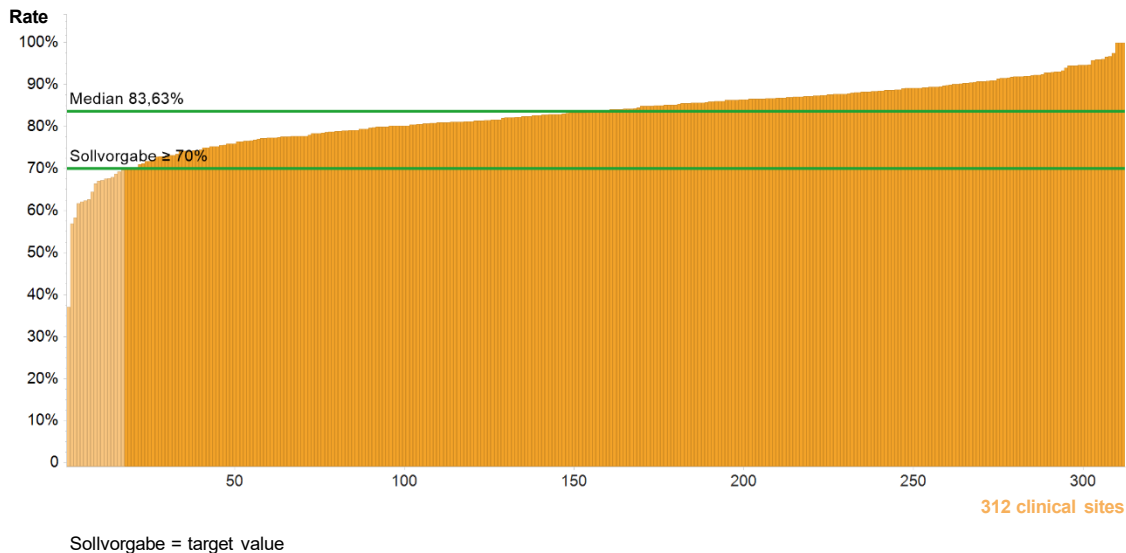
**Comments:**  
310 of 312 clinical sites achieve R0 resection with only one procedure using breast-conserving therapy. The proportion of patients who achieved R0 status with the first procedure using BET is 88.5%. Two centres with a rate of < 70% (66.45% and 67.68%) were unremarkable in the previous year; the reasons given by the two centres were critically examined by the auditors during the audits.

The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

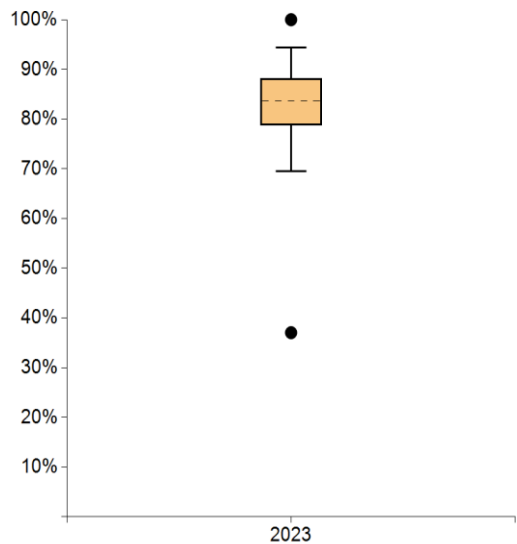
\*\* Percentage of total patients treated in centres according to the numerator

\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..

16. Breast-conserving procedure for pT1 (incl. (y)pT1 u. (y)pT0)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with BCT (final surgical condition)	74*	20 - 645	28831
Denominator	Surgical primary cases with pT1 (incl. (y)pT1) a. (y)pT0)	91*	25 - 744	34987
Rate	Target value ≥ 70 %	83.63%	37.04% - 100%	82.40%**



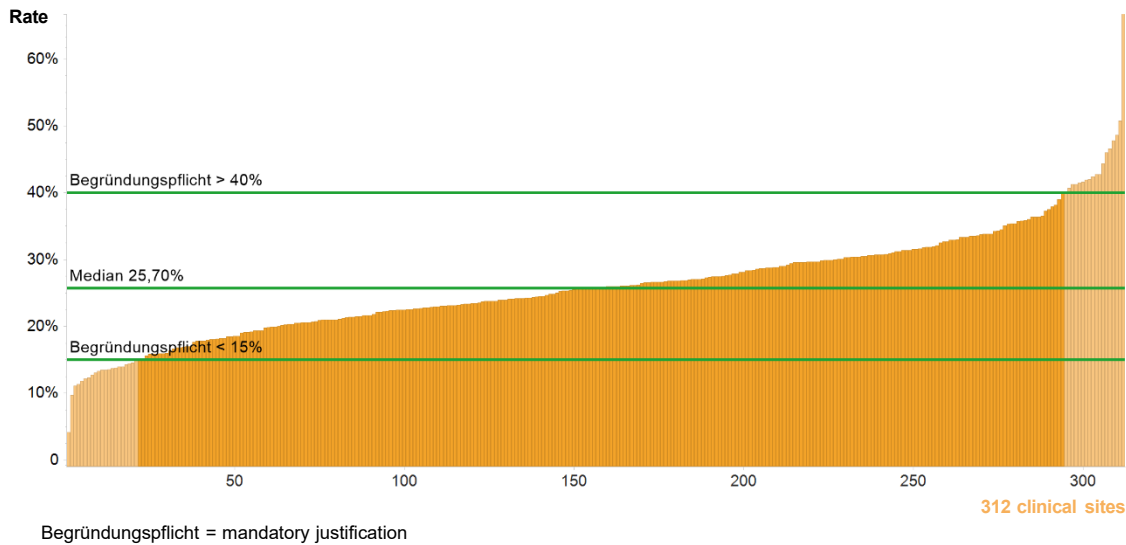
	2019	2020	2021	2022	2023
Maximum	----	----	----	----	100%
95 <sup>th</sup> percentile	----	----	----	----	94.44%
75 <sup>th</sup> percentile	----	----	----	----	88.17%
Median	----	----	----	----	83.63%
25 <sup>th</sup> percentile	----	----	----	----	78.80%
5 <sup>th</sup> percentile	----	----	----	----	69.50%
Minimum	----	----	----	----	37.04%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	295	94.55%

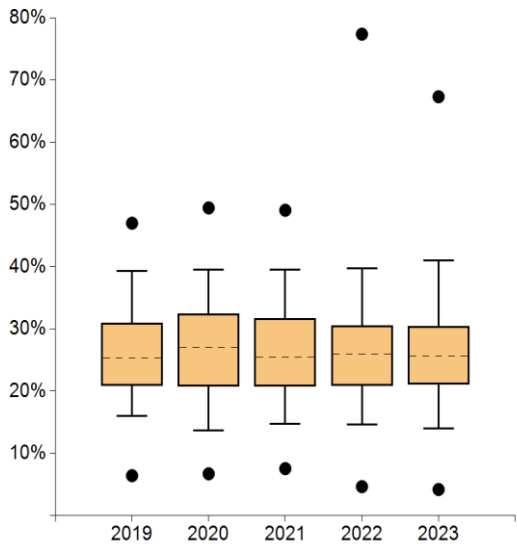
**Comments:**  
Due to a modification of the denominator (extension to include operated PC with (y)pT0), the results of this indicator are no longer directly comparable with the results of previous indicator years. 94.5% of clinical sites meet the target value of ≥ 70%. Approximately 82% of the primary cases considered in the denominator underwent breast-conserving surgery. 17 centers were required to provide a mandatory statement of reasons because they fell short of the target value. 11 remarks were made. In the vast majority of cases, the reasons given by the centers were found to be plausible in the audits and were due to the presence of a gene mutation, multifocal growth, and the patient's wishes in cases where a mastectomy had already been performed on the contralateral breast before.

\*The median for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

17. Mastectomies



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the nominator with mastectomies (final surgical stage)	43*	4 - 283	16220
Denominator	Surgical primary cases	160,5*	42 - 1077	61675
Rate	Mandatory justification*** <15% and >40%	25.70%	4.21% - 67.31%	26.30%**



	2019	2020	2021	2022	2023
Maximum	46.99%	49.45%	49.07%	77.36%	67.31%
95 <sup>th</sup> percentile	39.26%	39.51%	39.51%	39.70%	40.98%
75 <sup>th</sup> percentile	30.94%	32.43%	31.68%	30.56%	30.43%
Median	25.38%	27.03%	25.48%	25.95%	25.70%
25 <sup>th</sup> percentile	20.94%	20.75%	20.82%	20.88%	21.05%
5 <sup>th</sup> percentile	16.00%	13.69%	14.78%	14.70%	14.01%
Minimum	6.43%	6.73%	7.56%	4.67%	4.21%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
312	100.00%	273	87.50%

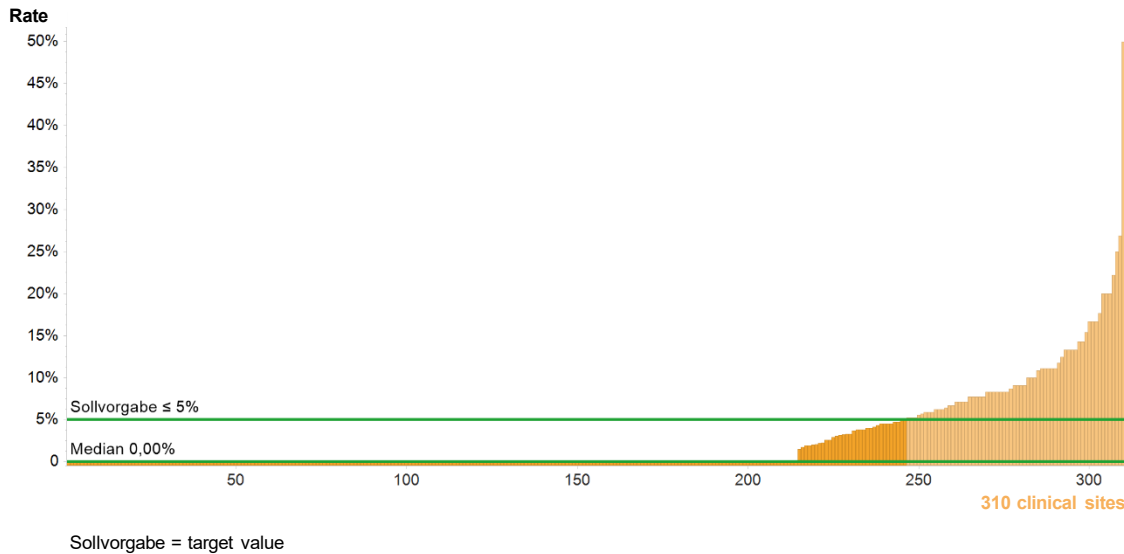
**Comments:**  
In the indicator year 2023, 16,220 mastectomies were performed on primary cases in the certified centers. As in the previous indicator year, this represents around 26% of the total number of primary cases operated on. 87.5% of the centers are within the plausibility corridor (> 15% - < 40%). Twenty-one centers fell below the 15% rate, while 18 centers achieved results > 40%. Reasons included patient request, multifocal/multicentric findings, presence of a gene mutation, male gender, and exulcerating breast cancer. Remarks were made in the audits, but no deviations were noted.

The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

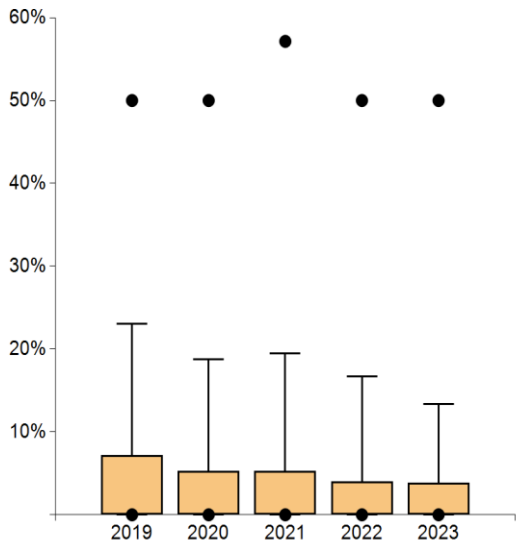
\*\* Percentage of total patients treated in centres according to the numerator

\*\*\* For values outside the plausibility limit(s), the centres are required to provide a justification..

18. Lymph node removal in the case of DCIS (GL QI)



	Kennzahlendefinition	All clinical sites 2023		
		Median	Range	Patienten Gesamt
Numerator	Primary cases of the denominator with axillary lymph node removal (primary axillary lymph node removal or sentinel lymph node removal)	0*	0 - 7	132
Denominator	Primary cases DCIS with completed surgical therapy and BCT	14*	2 - 103	5314
Rate	Target value ≤ 5%	0.00%	0.00% - 50.00%	2.48%**



	2019	2020	2021	2022	2023
Maximum	50.00%	50.00%	57.14%	50.00%	50.00%
95 <sup>th</sup> percentile	23.08%	18.75%	19.48%	16.67%	13.33%
75 <sup>th</sup> percentile	7.14%	5.26%	5.26%	4.00%	3.85%
Median	0.00%	0.00%	0.00%	0.00%	0.00%
25 <sup>th</sup> percentile	0.00%	0.00%	0.00%	0.00%	0.00%
5 <sup>th</sup> percentile	0.00%	0.00%	0.00%	0.00%	0.00%
Minimum	0.00%	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
310	99.36%	246	79.35%

Comments:

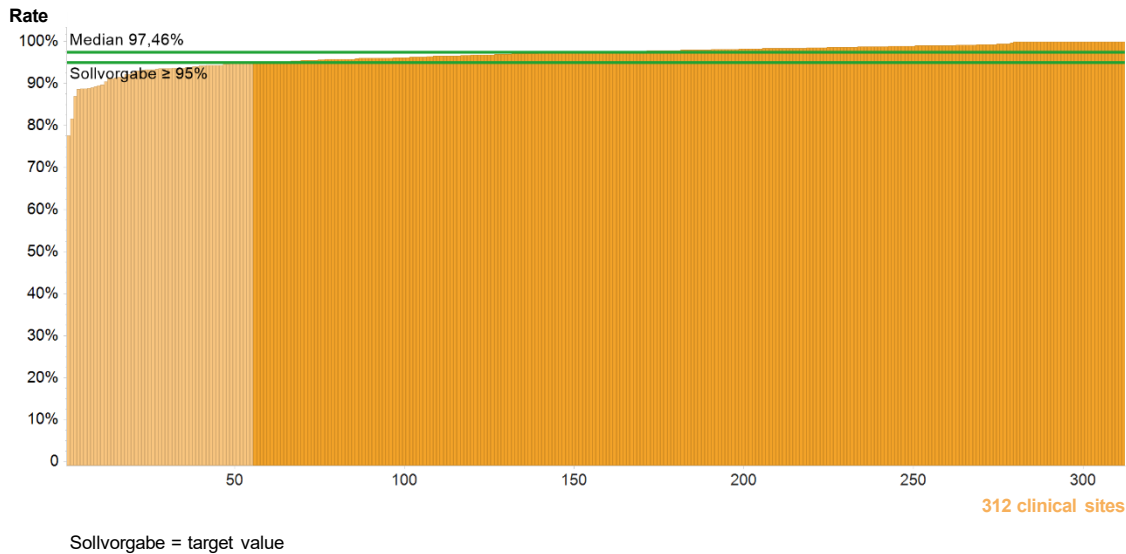
As in the previous year, the target value of ≤ 5% was achieved by approximately 79% of the certified centres. 69% of the clinical sites achieved a rate of 0% for this indicator (n = 214 of 310 clinical sites). In 2.5% of the primary cases in the denominator, a primary axillary dissection was performed (n = 132 of n = 5314). At 64 clinical sites, the target value was exceeded and LN removal was justified by suspected invasiveness in pre-therapeutic punch biopsies/intraoperative frozen section examinations, size and location of DCIS, and the presence of Paget's disease. Sentinel lymph node biopsy (SLB) was also performed in isolated cases at the express request of the patient. Remarks were made, but no deviations were noted. The reasons given in the majority of cases were considered plausible.

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

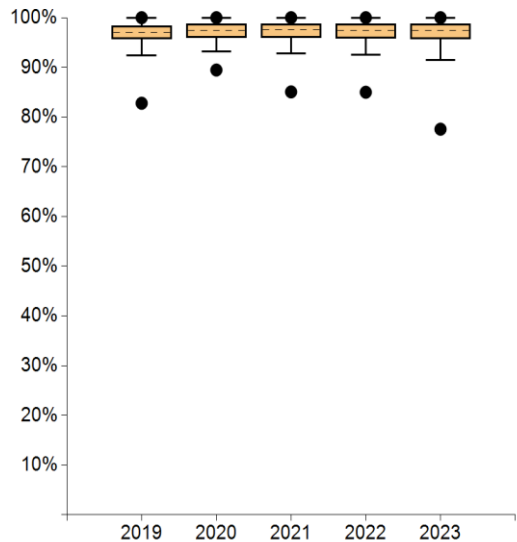
\*\* Percentage of total patients treated in centres according to the numerator.



19. Determination of nodal status in case of invasive breast cancer



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator for which nodal status was determined	135*	40 - 883	51993
Denominator	Surgical primary cases with invasive breast cancer (without primary M1)	138*	40 - 943	53800
Rate	Target value ≥ 95%	97.46%	77.57% - 100%	96.64%**



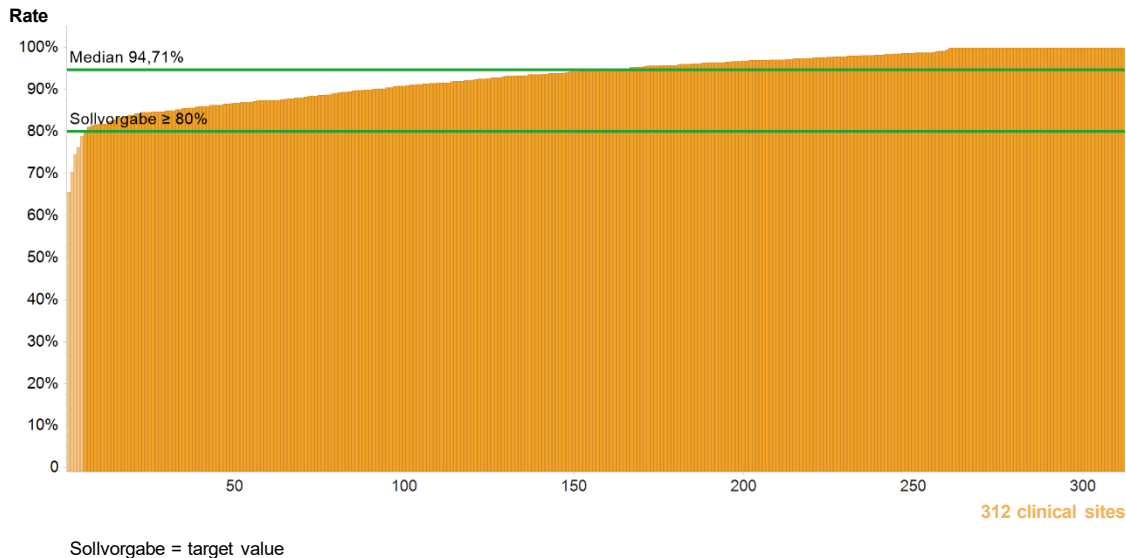
	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	98.32%	98.81%	98.80%	98.71%	98.78%
Median	97.07%	97.48%	97.55%	97.47%	97.46%
25 <sup>th</sup> percentile	95.70%	95.91%	96.00%	95.88%	95.75%
5 <sup>th</sup> percentile	92.36%	93.16%	92.79%	92.55%	91.46%
Minimum	82.79%	89.47%	85.07%	85.00%	77.57%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	257	82.37%
<b>Comments:</b> Approximately 82% of the centres meet the target value of ≥ 95% for the indicator "Determination of nodal status in operated primary cases with invasive carcinoma". The centres with lower rates (n = 55) justified this on the grounds of a lack of therapeutic consistency due to age and/or comorbidities (44x) or consideration of the patient's wishes (30x). Other reasons included participation in studies/procedures in accordance with study protocols (e.g., EUBREAST, SOUND, INSEMA) (14x). In 9 cases, it was stated that the sentinel LN could not be identified. No deviations were noted in the audits.			

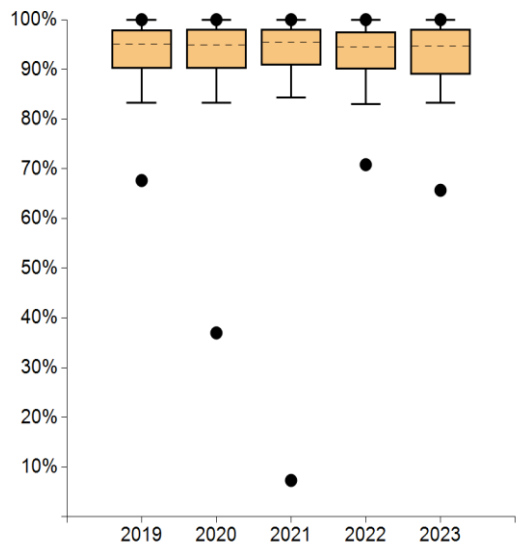
\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

\*\* Percentage of total patients treated in centres according to the numerator.

20a. Only sentinel lymphonodectomy (SLNE) for pN0 (women) (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with only sentinel lymph node removal (SNB)	70*	7 - 474	26156
Denominator	Female primary cases of invasive breast cancer with negative pN staging and without preoperative tumour-specific therapy	75*	7 - 512	28098
Rate	Target value $\geq 80\%$	94.71%	65.69% - 100%	93.09%**

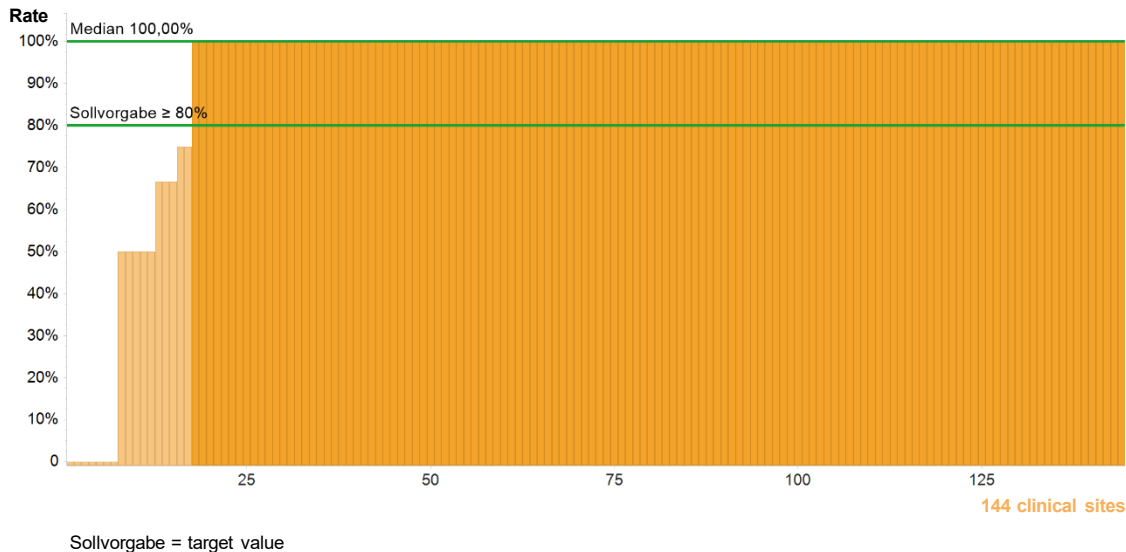


	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	97.96%	98.15%	98.10%	97.50%	98.03%
Median	95.05%	94.87%	95.49%	94.50%	94.71%
25 <sup>th</sup> percentile	90.11%	90.14%	90.85%	90.00%	88.94%
5 <sup>th</sup> percentile	83.30%	83.33%	84.37%	83.04%	83.33%
Minimum	67.65%	36.99%	7.32%	70.83%	65.69%

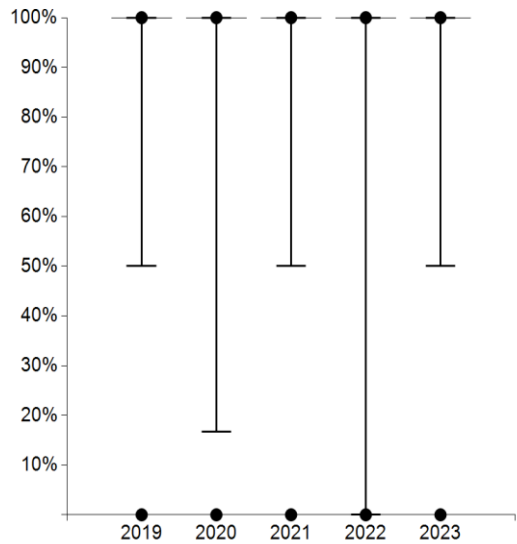
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	307	98.40%
<b>Comments:</b> 307 of the 312 clinical sites (98%) meet the target value of $\geq 80\%$ of the guideline QIs, which has been consistently high for years. Five centres (previous year: four) did not meet the target value (with results ranging from 65.7% to 78.9%). The results were reviewed and discussed in the audits and classified as medically plausible and comprehensible. The reasons given included age/comorbidity (4x), patient refusal (3x), and procedures in accordance with ASCO guidelines or study protocol/study participation (SOUND, EUBREAST). In one case, the reason given was that the sentinel LN could not be identified.			

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

20b. Only sentinel lymphonodectomy (SLNE) for pN0 (men) (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with only sentinel lymph node removal (SNB)	1*	0 - 4	200
Denominator	Male primary cases of invasive breast cancer with negative pN staging and without preoperative tumour-specific therapy	1*	1 - 4	217
Rate	Target value ≥ 80%	100%	0.00% - 100%	92.17%**



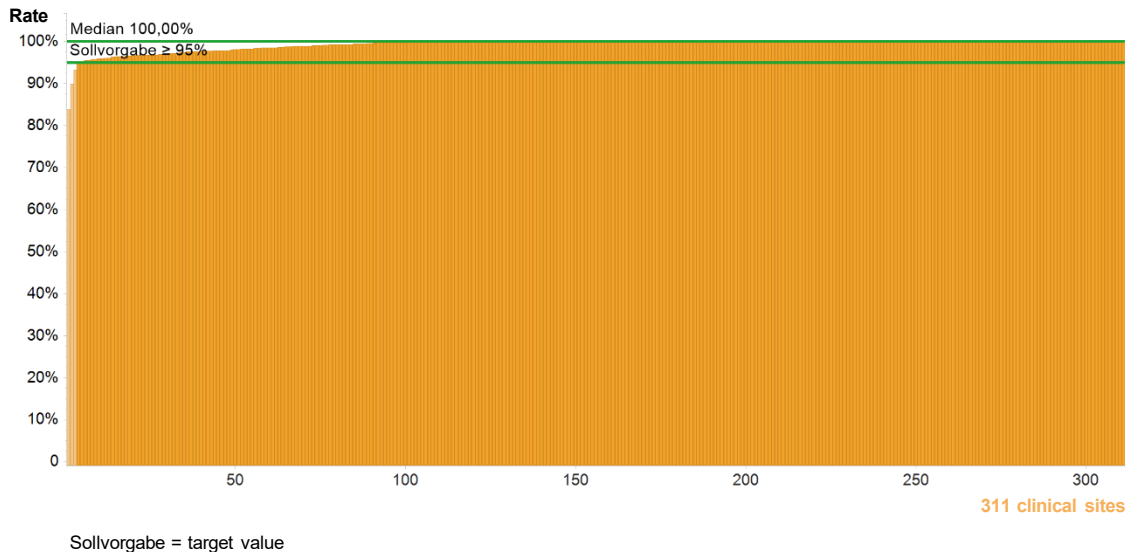
	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 <sup>th</sup> percentile	100%	100%	100%	100%	100%
5 <sup>th</sup> percentile	50.00%	16.67%	50.00%	0.00%	50.00%
Minimum	0.00%	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
144	46.15%	127	88.19%

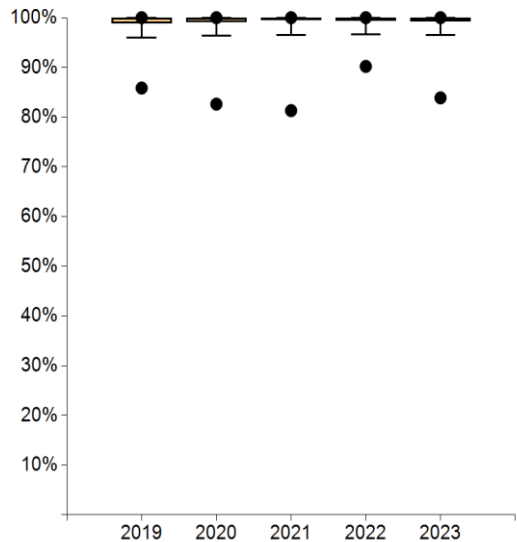
**Comments:**  
In the indicator year, no male primary cases of invasive breast cancer with negative pN staging and without preoperative tumour-specific therapy were treated at 168 clinical sites. Of the 144 clinical sites to be considered, 127 (88%) met the target value. 17 clinical sites fell short of the target value and justified this with, among other things, advanced age/comorbidities (6x), patient refusal (3x), intraoperatively conspicuous lymph nodes (histological evidence of lymphoma) (1x), large ulcerated breast cancer (1x), and renunciation due to microcarcinoma.

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

21. Intraoperative sample radiography / sonography (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Surgical procedures of the denominator with intraoperative sample x-ray or with intraoperative sample sonography	93*	9 - 678	35730
Denominator	Surgical procedures with preoperative wire marking guided by mammography or sonography	93*	9 - 679	36004
Rate	Target value $\geq 95\%$	100%	83.87% - 100%	99.24%**

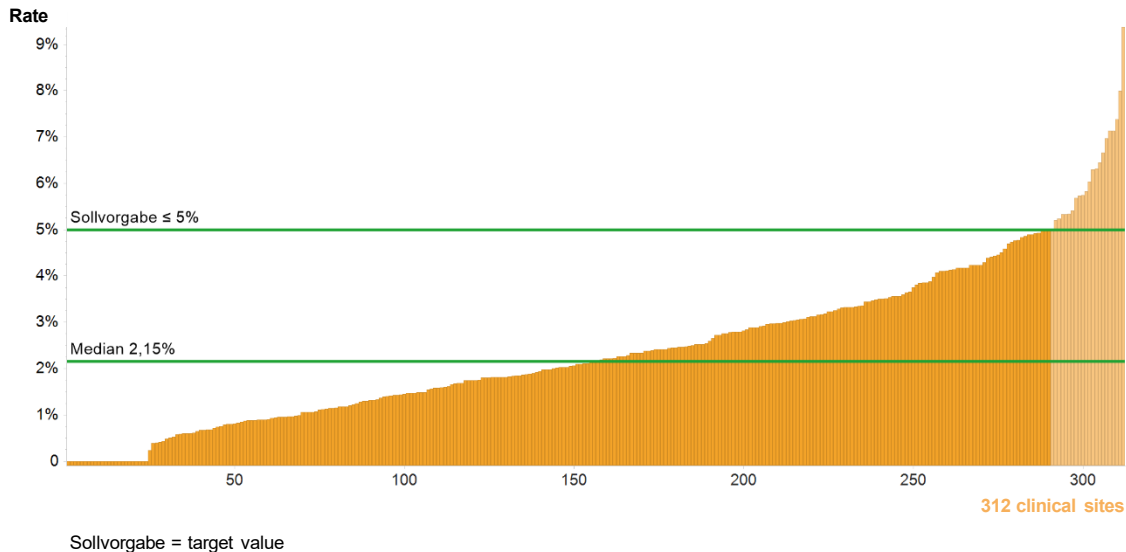


	2019	2020	2021	2022	2023
Maximum	100%	100%	100%	100%	100%
95 <sup>th</sup> percentile	100%	100%	100%	100%	100%
75 <sup>th</sup> percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 <sup>th</sup> percentile	98.84%	99.17%	99.57%	99.41%	99.30%
5 <sup>th</sup> percentile	95.97%	96.37%	96.51%	96.61%	96.48%
Minimum	85.85%	82.61%	81.31%	90.20%	83.87%

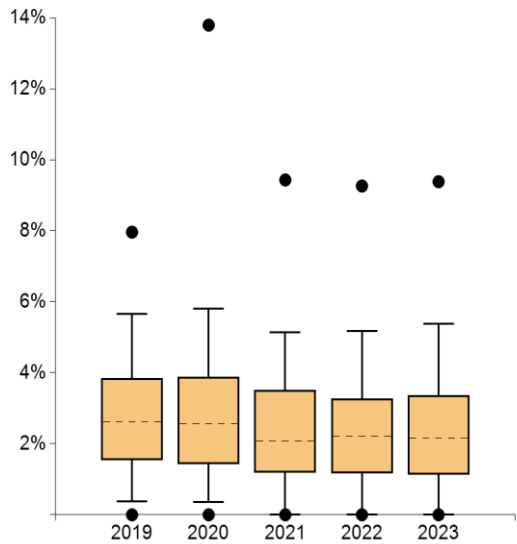
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
311	99.68%	308	99.04%
<b>Comments:</b> As in previous years, the target value was achieved at a high level in the centres. 99% of clinical sites achieved rates of $\geq 95\%$ . Three centres fell short of the target value, citing the use of magnetic clips instead of wire markers as one of the reasons. Two centres reported documentation problems, for which improvement measures have already been initiated.			

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

22. Revision surgeries



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with revision surgeries as a consequence of postoperative complications (only surgical primary cases)	4*	0 - 41	1474
Denominator	Primary cases who underwent surgery	160,5*	42 - 1077	61675
Rate	Target value ≤ 5%	2.15%	0.00% - 9.38%	2.39%**



	2019	2020	2021	2022	2023
Maximum	7.96%	13.79%	9.43%	9.26%	9.38%
95 <sup>th</sup> percentile	5.65%	5.80%	5.14%	5.18%	5.37%
75 <sup>th</sup> percentile	3.85%	3.88%	3.51%	3.27%	3.35%
Median	2.61%	2.56%	2.08%	2.22%	2.15%
25 <sup>th</sup> percentile	1.54%	1.44%	1.19%	1.18%	1.14%
5 <sup>th</sup> percentile	0.38%	0.36%	0.00%	0.00%	0.00%
Minimum	0.00%	0.00%	0.00%	0.00%	0.00%

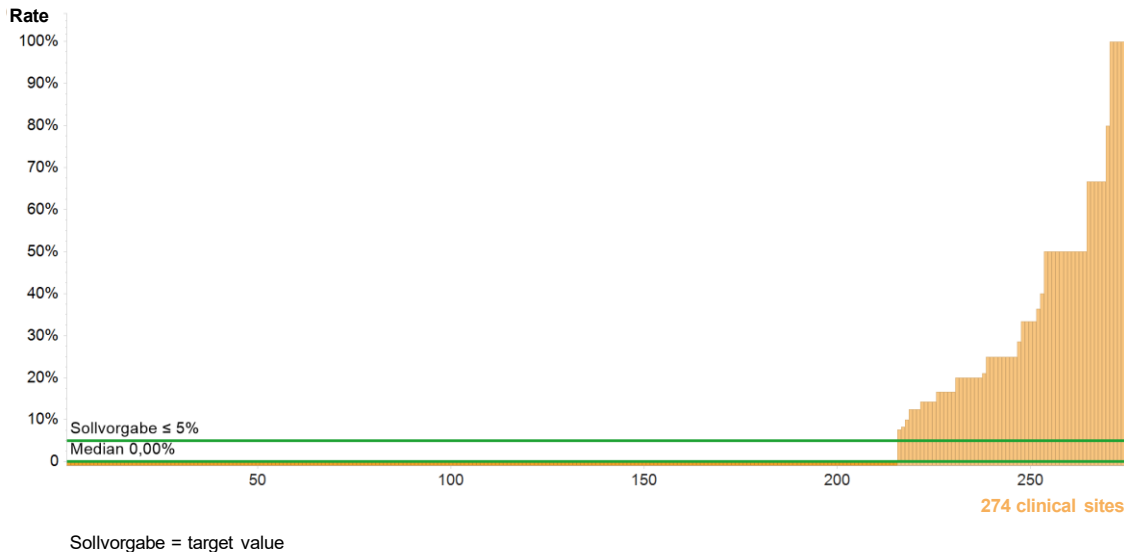
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
312	100.00%	290	92.95%

**Comments:**  
The revision rate has been low for years, with a median of approximately 2.2%. Approximately 93% of centres remain below the target value of ≤ 5%. At 24 centres (7.7%), no revision surgery was necessary as a consequence of postoperative complications in primary cases that had undergone surgery. 22 clinical sites had a revision rate > 5%. The main indications for revision were secondary bleeding/haematomas, particularly in cases of ongoing therapeutic anticoagulation, as well as wound healing disorders and/or local wound infections. The cases were reviewed and discussed in the audits. The centres had already discussed the cases in M&M conferences and/or Quality (Q)-circles and initiated quality improvement measures, e.g. adjustments to perioperative/intraoperative management, the use of haemostatic agents and the application of compression bandages. Q-circles and quality improvement measures had been initiated, e.g. through adjustments to perioperative/intraoperative management, the use of haemostatic agents, the application of compression dressings, changes to drainage management and postoperative blood pressure management, some of which were documented in the form of new SOPs.

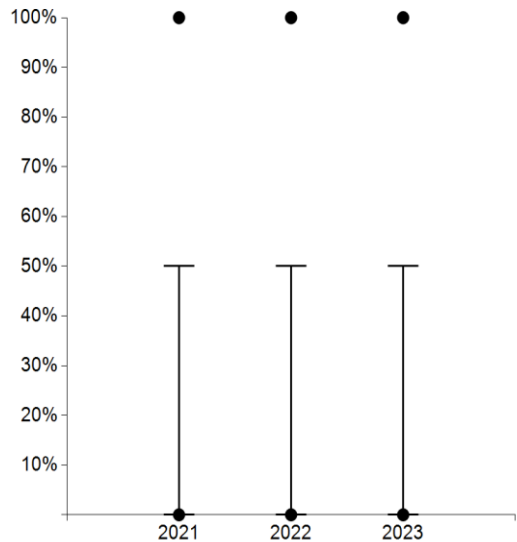
\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

\*\* Percentage of total patients treated in centres according to the numerator.

23. Therapy of the axillary lymphatic drainage for pN1mi (GL QI)



	Definition of indicator	All clinical sites 2023		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with therapy (axillary dissection or radiotherapy) of the axillary lymphatic drainage	0*	0 - 4	84
Denominator	Primary cases invasive breast cancer, pN1mi without neoadj. chemotherapy)	3*	1 - 33	1146
Rate	Target value ≤ 5%	0.00%	0.00% - 100%	7.33%**



	2019	2020	2021	2022	2023
Maximum	-----	-----	100%	100%	100%
95 <sup>th</sup> percentile	-----	-----	50.00%	50.00%	50.00%
75 <sup>th</sup> percentile	-----	-----	0.00%	0.00%	0.00%
Median	-----	-----	0.00%	0.00%	0.00%
25 <sup>th</sup> percentile	-----	-----	0.00%	0.00%	0.00%
5 <sup>th</sup> percentile	-----	-----	0.00%	0.00%	0.00%
Minimum	-----	-----	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
274	87.82%	215	78.47%

**Comments:**  
In the indicator year, no primary cases of the population considered in the indicator (invasive breast cancer, pN1mi without neoadjuvant chemotherapy) were treated at 38 clinical sites. Of the other 274 clinical sites, 78.5% met the target value of ≤ 5%, with 215 clinical sites (78%) achieving a rate of 0%. 59 clinical sites had rates > 5% and the results were discussed in the audits. Reasons included patient preference (6x), multicentric findings (4x), capsular invasion (4x), comorbidities (4x), initiation of radiation with high tangent (6x), and initially different results in the rapid section (2x). Contrary to the tumour board recommendation, radiation of the lymph drainage areas was performed at two clinical sites. M&M conferences were held at both clinical sites to discuss this.

\*The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.  
\*\* Percentage of total patients treated in centres according to the numerator.

# WISSEN AUS ERSTER HAND (FIRST-HAND KNOWLEDGE)



Find out more on [www.krebsgesellschaft.de](http://www.krebsgesellschaft.de)

## Authors

German Cancer Society (DKG)  
German Society for Senology (DGS)  
Certification Committee Breast Cancer Centres  
Jens-Uwe Blohmer, Spokesman Certification Committee  
Anton Scharl, Spokesman Certification Committee  
Martin Utzig, German Cancer Society (DKG)  
Birgit Klages, German Cancer Society (DKG)  
Ellen Griesshammer, German Cancer Society (DKG)  
Nele Grapentin, German Cancer Society (DKG)  
Agnes Bischofberger, OnkoZert  
Florina Dudu, OnkoZert

## Imprint

Publisher and responsibility regarding content:  
Deutsche Krebsgesellschaft (DKG)  
Kuno-Fischer-Straße 8  
DE 14057 Berlin, Germany  
Tel: +49 (030) 322 93 29 0  
Vereinsregister Amtsgericht Charlottenburg,  
Vereinsregister-Nr.: VR 27661 B  
V.i.S.d.P.: Dr. Johannes Bruns

in cooperation with:  
OnkoZert, Neu-Ulm  
[www.onkozert.de](http://www.onkozert.de)

Version e-A1-de; 05.06.2025

ISBN: 978-3-910336-91-9

