

Statement from the ABS President regarding ASPIRE – July 2023

In recent weeks we have had some confused enquiries regarding ASPIRE. This message hopes to clarify the situation.

Due to the pressures on one stop clinics (2 week wait clinics), units up and down the country started devising different methods of assessing their patients with breast pain (low risk patients) outside the normal one stop clinics. Some had methods of evaluating them and have published their data, but most have not had the opportunity to do so.

ASPIRE has been designed to evaluate the safety of each individual pathway and provide our members with a platform where they could enter their data and have the safety of their pathway evaluated. We strongly recommend “No innovation without evaluation” and hence we would encourage units to have their management pathways evaluated in a robust manner. Units managing breast pain patients via the standard one stop clinic are also encouraged to enter their data.

ABS is not promoting or endorsing any one pathway over another, nor is it planning to compare one with another. All we intend to do is to ensure that the pathways are well-designed, effective, and workable and make sure that our patients are coming to no harm. It is for individual trusts to choose how they manage their workload depending on the resources they have.

This is clear in the updated protocol which will be available on the ASPIRE study webpages. If you have any further questions, please contact Mr Rajiv Dave and/or Jennifer Hu, who are the project leads. The ABS Clinical Standards and Practice Committee are being updated regularly about the progress of the project and are providing oversight.

Kind regards

Leena Chagla

President