

A tablet a day can keep breast cancer at bay

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(Medical Xpress)—Women who stop taking their prescribed hormone tablets after surgery to treat breast cancer are almost three times more likely to have their cancer reoccur than those who stick with the treatment and take their medication every day, according to new research by scientists from Trinity College Dublin. The findings have just been published in the *British Journal of Cancer*.

"Our analysis, which takes into account records of almost 1400 women with breast cancer, clearly shows that recurrence rates of breast cancer are lowest among the women who stick to prescribed medications after other interventions such as surgery", explained Dr Kathleen Bennett, from the Department of Pharmacology & Therapeutics, Trinity College Dublin. "When you either stop taking your hormonal treatments completely (known as non-persistence), or you take them inconsistently (known as non-compliance), the evidence points to an increased risk of your breast cancer coming back."

Dr Ian Barron, lead author on the paper from the Department of Pharmacology & Therapeutics, Trinity College Dublin, and now working at Johns Hopkins said, "The study shows that simply prescribing hormonal treatment after surgery (for those cancers that are responsive to hormone therapy) is not enough. The side effects of the drugs can be powerful enough to turn people off taking the medication. Other studies have shown that up to 30% of women will discontinue hormone treatment, with another 20% not taking as many as one in five of their doses. Our data is the first to show conclusively that those who do stick with taking the drugs have a lower chance of their breast cancer coming



back."

"Hence a structured approach to interventions, such as, the early identification of women experiencing side-effects, the availability of effective supportive pharmacologic and psychological care, and the timely switching to alternative hormonal therapies could make a significant impact on patients adhering to their medication, and thereby improve their chances of living longer". The TCD research team plan to do a detailed cost benefit analysis of what interventions might make the most impact and at the lowest cost and hope to present those findings later in the year at the International Society for Pharmacoeconomics and Outcomes Research (ISPOR) Conference in Dublin in November. The study was conducted using patient records from the National Cancer Registry Ireland (NCRI), which are linked to prescription dispensing data from Ireland's Health Services Executive (HSE) Primary care reimbursement services (PCRS) pharmacy claims database. The research involved 1,376 women with stage I-III oestrogen receptor positive breast cancer.

More information: <u>www.nature.com/bjc/journal/vao ...</u> <u>ull/bjc2013518a.html</u>

Provided by Trinity College Dublin

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