

USPSTF recommends risk-reducing meds for breast cancer

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(HealthDay)—The U.S. Preventive Services Task Force (USPSTF)



recommends risk-reducing medications for women at high risk for breast cancer who are at low risk for adverse events, but medications are not recommended for routine use. These recommendations form the basis of a draft recommendation statement published online Jan. 15 by the task force.

Heidi D. Nelson, M.D., M.P.H., from the Oregon Health & Science University in Portland, and colleagues updated the 2013 USPSTF systematic review on the use of medications to reduce primary breast cancer risk. Data from 24 studies were evaluated.

The researchers found that for women without preexisting breast cancer, tamoxifen, raloxifene, and the aromatase inhibitors exemestane and anastrozole reduce invasive breast cancer but cause <u>adverse events</u>, which vary by medication. Thromboembolic events were reported with tamoxifen and raloxifene but not <u>aromatase inhibitors</u>; increased endometrial cancer and cataracts were seen with tamoxifen. Based on these findings, the USPSTF recommends that clinicians offer to prescribe risk-reducing medications for women who are at increased risk for breast cancer and have low risk for adverse medication events (B recommendation). Risk-reducing medications should not be used routinely for women who are not at increased risk for cancer (D recommendation).

The draft recommendation statement is available for public comment from Jan. 15 to Feb. 11, 2019.

More information: Draft Recommendation Statement
Draft Evidence Review
Comment on Recommendation

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