

Hydrochlorothiazide may up basal, squamous cell cancer risk

6 January 2018



category (>200,000 mg). There was no [correlation](#) for use of other diuretics and antihypertensives with NMSC.

"Hydrochlorothiazide use is associated with a substantially increased risk of NMSC, especially SCC," the authors write.

Two authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#) ([subscription or payment may be required](#))

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(HealthDay)—Hydrochlorothiazide use is associated with an increased risk of non-melanoma skin cancer (NMSC), with evidence of a dose-response relationship, according to a study published online Dec. 3 in the *Journal of the American Academy of Dermatology*.

Sidsel Arnspang, M.D., from Odense University Hospital in Denmark, and colleagues examined the correlation between hydrochlorothiazide use and the risk of [basal cell carcinoma](#) (BCC) and [squamous cell carcinoma](#) (SCC). Patients with NMSC were identified from the Danish Cancer registry during 2004 to 2012. They were matched in a 1:20 ratio by age and sex with controls.

The researchers found that higher use of hydrochlorothiazide (>50,000 mg) was associated with odds ratios of 1.29 and 3.98 for BCC and SCC, respectively. There were clear dose-response correlations for hydrochlorothiazide use with BCC and SCC; the odds ratios were 1.54 and 7.38, respectively, for the highest cumulative dose

APA citation: Hydrochlorothiazide may up basal, squamous cell cancer risk (2018, January 6) retrieved 16 May 2021 from <https://medicalxpress.com/news/2018-01-hydrochlorothiazide-basal-squamous-cell-cancer.html>

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