Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force’s (Task Force) draft recommendation statement on medication use to reduce risk of breast cancer. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from January 15, 2019 to February 11, 2019. The Task Force welcomes your comments.

Medication Use to Reduce Risk of Breast Cancer

The Task Force issued a draft recommendation statement on Medication Use to Reduce Risk of Breast Cancer. The Task Force found that there are medications that can reduce a woman’s risk of getting breast cancer. However, these medications are not for everyone. While they can help lower a woman’s chances of getting breast cancer, they also can lead to serious harms, some of which can be life-threatening.

Therefore, the Task Force recommends:
• For women at increased risk for breast cancer, the Task Force recommends that clinicians offer medications that can reduce a woman’s chance of getting breast cancer.
• For women who are not at increased risk, the Task Force recommends against regularly using these medications. The harms of these medications are greater than the potential benefits for women who are not at increased risk of developing breast cancer.

This recommendation does not apply to women who have breast cancer now or previously had breast cancer.

What are medications to reduce breast cancer risk?

There are medications available that can reduce a woman’s risk of getting breast cancer. These medications include tamoxifen, raloxifene, and aromatase inhibitors. However, these medications are not for everyone. They have both benefits and harms.

Facts about Breast Cancer and Breast Cancer Risk

Breast cancer occurs when a harmful growth (also known as a tumor) forms in the breast. Breast cancer is the second leading cause of cancer death in women after lung cancer, and an estimated 1 in 8 women will develop breast cancer at some point in their lifetime.

Breast cancer risk means how likely you are to develop the condition. Some women are more likely to develop breast cancer than other women because of risk factors such as:
• family history
• older age
• abnormal finding on prior breast tissue testing
• exposure to high amounts of radiation from prior medical treatments

There are several ways clinicians can determine if a woman is at increased risk for breast cancer. Clinicians may use one of several tools that calculate how likely a woman will develop breast cancer or look at combinations of a few key risk factors. Women who are concerned about their risk for breast cancer should talk to their clinician about their level of risk.

Facts about Medication Use to Reduce Risk of Breast Cancer

There are medications available that can reduce a woman’s risk of getting breast cancer, including tamoxifen, raloxifene, and aromatase inhibitors. More specifically:
Tamoxifen and raloxifene work by blocking estrogen (a hormone) in the breast. Since estrogen can fuel the growth of breast cancer, blocking it can help lower the chances that a woman will develop breast cancer.

Aromatase inhibitors lower estrogen levels in women who have been through menopause by stopping an enzyme that helps make estrogen.

**Potential Benefits and Harms of Medication Use to Reduce Risk of Breast Cancer**

The Task Force looked at evidence on the potential benefits and harms of using medications to reduce the risk of breast cancer.

The Task Force found that tamoxifen, raloxifene, and aromatase inhibitors can reduce a woman's chance of developing invasive breast cancer.

However, taking these medications can also be harmful. These harms can vary, but some can be life-threatening. The chance for these harmful events depends on the medication and a woman's risk factors for these specific harms. Many women experience hot flashes as a side effect of these medications. Tamoxifen and raloxifene were found to increase the risk of developing blood clots, especially in older women. Tamoxifen can increase the risk for cancer of the uterus (endometrial cancer) and the risk for cataracts (clouding of the eye which can lead to blindness). Aromatase inhibitors can cause muscle pain and digestive issues. These medications might also increase risk of fractures.

**The Draft Recommendations on Medication Use to Reduce Risk of Breast Cancer: What Do They Mean?**

Here are the Task Force's draft recommendations on medication use to reduce risk of breast cancer. They are based on the quality and strength of the evidence about the potential benefits and harms of medication for this purpose. They are also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **B Grade**, it recommends preventive medication because it has more potential benefits than harms.

When the Task Force issues a **D Grade**, it recommends against preventive medication because the harms outweigh the benefits.

Before you send comments to the Task Force, you may want to read the draft recommendation statement. The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An evidence document provides more detail about the scientific studies the Task Force reviewed.

**Notes**

1. The chance of getting something, such as breast cancer. Women at increased risk have a greater chance of getting breast cancer.

2. Negative health affects (harms) that occur as a result of taking medication.

1. Risk

2. Routine use

The USPSTF recommends that clinicians offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, to women who are at increased risk for breast cancer and at low risk for adverse medication effects. **B Grade**

The USPSTF recommends against the routine use of risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, in women who are not at increased risk for breast cancer. **D Grade**
What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the Task Force Web site.

### USPSTF Recommendation Grades

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
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<tbody>
<tr>
<td>A</td>
<td>Recommended.</td>
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<tr>
<td>B</td>
<td>Recommended.</td>
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<tr>
<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<tr>
<td>D</td>
<td>Not recommended.</td>
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<tr>
<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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Click Here to Comment on the Draft Recommendation

The Task Force welcomes comments on this draft recommendation.

Comments must be received between January 15, 2019 and February 11, 2019.

All comments will be considered for use in writing final recommendations.