

Clinical Summary: Medication Use to Reduce Risk of Breast Cancer

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| Population | Women aged ≥35 y at increased risk for breast cancer | Women aged ≥35 y not at increased risk for breast cancer |
| Recommendation | Offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors Grade: B | Do not routinely use risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors Grade: D |

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| Risk Assessment | <p>Various methods are available to identify women at increased risk for breast cancer, including formal clinical risk assessment tools or assessing breast cancer risk factors without using a formal tool.</p> <p>The USPSTF does not endorse any particular risk-prediction tool. The National Cancer Institute Breast Cancer Risk Assessment Tool and the Breast Cancer Surveillance Consortium Risk Calculator are based on models tested in US populations and are publicly available. There is no single cutoff for defining increased risk for all women.</p> <p>Alternatively, clinicians may use combinations of risk factors to identify women at increased risk. Some examples of combinations of multiple risk factors in women at increased risk include (but are not limited to): age 65 years or older with 1 first-degree relative with breast cancer; age 45 years or older with more than 1 first-degree relative with breast cancer or 1 first-degree relative who developed breast cancer before age 50 years; age 40 years or older with a first-degree relative with bilateral breast cancer; presence of atypical ductal or lobular hyperplasia or lobular carcinoma in situ on a prior biopsy.</p> <p>When considering prescribing breast cancer risk-reducing medications, the potential benefit of risk reduction of breast cancer must be balanced against the potential harms of adverse medication effects.</p> |
| Risk-Reducing Medications | Tamoxifen, raloxifene, and aromatase inhibitors all reduce primary breast cancer risk in post-menopausal women. Use of raloxifene and aromatase inhibitors is indicated only in postmenopausal women; only tamoxifen is indicated for risk-reduction of primary breast cancer in premenopausal women. |
| Relevant USPSTF Recommendations | The USPSTF has made recommendations on screening for breast cancer and for risk assessment, genetic counseling, and genetic testing for <i>BRCA</i> genetic mutations. |

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to <https://www.uspreventiveservicestaskforce.org>.