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## Breast Cancer Follow-up Options

After treatment for breast cancer, you have a decision to make: do you take the medication to prevent recurrence? The decision always lies with the individual after considering all options; my role is to explain the options based on the current research. It goes without question that everyone should try to have the healthiest lifestyle possible including diet, exercise, and supplements. Those will help improve the outcome, medication or not, but this is about whether to take the medication, so here we go.

### The Medication Option

Basing the decision on current research, taking the letrozole would seem to make sense. It reduces the recurrence for up to 10 years in post-menopausal women with an early diagnosis of breast cancer when taken regularly—even if it's started up to five years after treatment. Taking the medication is the most conservative approach.



There are side effects, but research hasn't examined whether other interventions could reduce the side effects; for example, exercise and calcium supplementation to reduce fractures or primrose oil to reduce the hormonal effects. Those are just some of the ways that the side-effects could be dealt with.

### The No-Medication Option

The difference in recurrence rates at 10 years was only 4% (the difference between 95% and 91%) in this most recent study. With those odds, you could roll the dice and wager you wouldn't need that extra protection the medication may provide—your odds are still nine out of ten of remaining cancer free. Those seem like good odds, and there's no dealing with side-effects.

A confounding variable is that the women in the latest study had taken at least one drug for a few years after the original treatment. The protection was extended in those that took letrozole for an additional five years. The reduction on recurrence between letrozole and a placebo when taken immediately after treatment is about 5 to 7%, so taking nothing still provides a reasonable option.

### No Do-overs

Here is where things get interesting when it comes to whether to use the medication or not: there are no do-overs. You can't go back and change your mind five or ten years from now; you have to live with the decision you make. To top it off, we don't have all the information at this point. There may be some side effects that haven't been discovered yet. Or it may be that taking the medication will increase survival rates after 15 or 20 years, even if a woman took the medication for only the first five years. It's a very difficult decision.

As I said, Paula takes letrozole and has had no side effects. Her mom was one of the women in the original clinical trial for letrozole, and although she has since died, she did not die from breast cancer. To us, it made sense for Paula to take the medication and she appears to be doing well on it.

We all must make decisions based on the best information today. The goal should be to live as long as we can until better treatment options become available. That's all anyone can do. After you weigh all your options, you must make the right decision for you.

What are you prepared to do today?

**Dr. Chet**

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