

Embargoed for Release: 7:30 a.m. CT, Dec. 7, 2017

To interview Michael Gnant, contact Julia Gunther at julia.gunther@aacr.org or 770-403-7690. For a photo of Gnant, click [here](#).

Two Years of Extended Anastrozole Therapy Proved as Effective as Five Years in Clinical Trial

Reducing the duration of treatment with the aromatase inhibitor could spare patients from side effects

SAN ANTONIO — Postmenopausal women with hormone-receptor positive (HR-positive) breast cancer who took the aromatase inhibitor anastrozole for two years after an initial five years of adjuvant endocrine therapy received an equal benefit to those who took the drug for five additional years. The trial results suggest that a shorter duration of treatment may provide sufficient benefits while protecting women from harmful side effects, according to data from the [ABCSG-16 phase III trial](#) presented at the 2017 [San Antonio Breast Cancer Symposium](#), held Dec. 5–9.

“In early-stage HR-positive breast cancer, the risk of relapse persists despite many advances in treatment,” said Michael Gnant, MD, FACS, director and chairman of the Department of Surgery, Comprehensive Cancer Center, at the [Medical University of Vienna](#). “Adjuvant treatment with aromatase inhibitors has been demonstrated to improve disease-free survival of postmenopausal women with this subtype of breast cancer. However, the optimal duration of extended AI has previously been unknown. Because this treatment leads to prolonged side effects and impacts quality of life, it is important to establish how long the treatment should be given.”

In this trial, between February 2004 and June 2010, 3,484 postmenopausal women with HR-positive early-stage breast cancer were randomized in 71 centers in Austria to receive either two years or five years of extended adjuvant therapy. All had undergone an initial five years of adjuvant endocrine treatment, either tamoxifen or other regimens containing aromatase inhibitors.

The trial’s primary endpoint was disease-free survival. Secondary endpoints included overall survival, contralateral breast cancer (cancer in the opposite breast), fractures, and toxicity.

As of June 30, 2016, 757 women had disease-free survival: 377, or 22 percent, of the women in the two-year group and 380, or 22 percent, of the women in the five-year group had disease-free survival.

There was also no significant difference in overall survival or time to contralateral breast cancer. Bone fractures were more likely in years three to five after randomization, suggesting that a longer duration of anastrozole treatment may be a risk factor for fractures.

Gnant said the trial results suggest that clinicians should consider a two-year course of anastrozole sufficient for most patients.

“I believe that these trial results should be implemented into daily practice at once,” Gnant said. “There is simply no rationale to keep most patients on extended AI for longer than two years. This result can help save a lot of unnecessary side effects for many women around the world.”

In addition to bone fractures, other side effects of prolonged AI therapy include bone fractures, hot flashes, arthralgia, sexual dysfunction, and hair loss.

Gnant cautioned that researchers cannot rule out benefits for some patients who take anastrozole for longer periods. He said future translational research using data and biomaterial from the patients in the ABCSG-16 trial could be useful to characterize potential molecular factors that influence patients’ response to anastrozole.

The study was funded by AstraZeneca. Gnant has received honoraria, travel or accommodations funding, and research funding from AstraZeneca.

###

Follow the meeting on Twitter: [#SABCS17](https://twitter.com/SABCS17)

About SABCS:

The mission of the 2017 San Antonio Breast Cancer Symposium is to produce a unique and comprehensive scientific meeting that encompasses the full spectrum of breast cancer research, facilitating the rapid translation of new knowledge into better care for patients with breast cancer. The [UT Health San Antonio Cancer Center](http://www.utmsd.edu/UTHealthSanAntonioCancerCenter), the [American Association for Cancer Research](http://www.aacr.org) (AACR), and [Baylor College of Medicine](http://www.baylor.edu) are joint sponsors of the San Antonio Breast Cancer Symposium. This collaboration utilizes the clinical strengths of the UT Health San Antonio Cancer Center and Baylor and the AACR’s scientific prestige in basic, translational, and clinical cancer research to expedite the delivery of the latest scientific advances to the clinic. For more information about the symposium, please visit www.sabcs.org.