

American Society of Clinical Oncology Clinical Practice Guideline: Update on Adjuvant Endocrine Therapy for Women With Hormone Receptor–Positive Breast Cancer

RECOMMENDATIONS

Recommendation

1

Conditional: The Update Committee recommends, on the basis of data from randomized, controlled trials, that most postmenopausal women consider taking an AI during the course of adjuvant treatment to lower recurrence risk, either as primary therapy or after 2 to 3 years of tamoxifen—strategies that yield equivalent outcomes in prospective studies. Duration of AI therapy should not exceed 5 years.

{Rec_1:Cond_ 15}

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{Rec_1:Cond_ 14}

Recommendation

2

Conditional: The Update Committee recommends that patients who are initially treated with an AI but discontinue treatment before 5 years of therapy consider taking tamoxifen for a total of 5 years of adjuvant endocrine therapy.

{Rec_4:Cond_ 7}

Conditional: Therapy with an AI should not extend beyond 5 years in either the primary or extended adjuvant settings outside the clinical trials setting.

{Rec_4:Cond_ 9}

Recommendation

3

Conditional: The Update Committee recommends that women who are pre- or perimenopausal at the time of breast cancer diagnosis be treated with 5 years of tamoxifen.

{Rec_1:Cond_ 1}

Recommendation

4

Conditional: The Update Committee suggests that clinicians consider recommending that patients change treatment if adverse effects are intolerable or if patients are persistently noncompliant with therapy

{Rec_6:Cond_ 12}

Conditional: The Update Committee recommends that clinicians consider adverse effect profiles, patient preferences, and pre-existing conditions when recommending an adjuvant endocrine strategy for postmenopausal women.

{Rec_6:Cond_ 16}

Conditional: Clinicians should discuss adverse effect profiles when presenting available treatment options.

{Rec_6:Cond_ 17}

Recommendation

5

Conditional: In the clinical opinion of the Update Committee (rather than direct evidence from randomized trials), postmenopausal patients intolerant of one AI but who are still candidates for adjuvant endocrine therapy may be advised to consider tamoxifen or a different AI.

{Rec_7:Cond_ 13}