

Taking anastrozole to reduce your chance of developing breast cancer in the future

This leaflet contains information about the medication anastrozole. Your medical team have offered you anastrozole to reduce your risk of developing breast cancer. We hope the information in this leaflet will help you to decide whether anastrozole is the right option for you.



What is my risk of breast cancer?

In the UK, about one out of every eight women will get breast cancer in their lifetime.

A specialist nurse or doctor has reviewed the information you gave them, including how many members of your family have had cancer. This information has shown that you have a higher risk of getting breast cancer in your life than the general population. Your specialist nurse or doctor will be able to give you more accurate information about your personal breast cancer risk.

The National Institute for Health and Care Excellence (NICE) says that all women with your level of risk should be offered medication to reduce their risk.

What is anastrozole?

Anastrozole is a medicine that can reduce the risk of developing breast cancer. Anastrozole is taken as one 1mg tablet a day, for five years.

Anastrozole works by lowering the levels of a hormone in your body called oestrogen. Sometimes oestrogen can cause breast tissue to grow abnormally and turn into a breast cancer. Anastrozole can stop this from happening and reduce your risk of developing breast cancer.

Anastrozole can only lower oestrogen levels of women who have gone through the menopause (post-menopausal). Anastrozole is not suitable for women who have not been through the menopause (pre-menopausal).

Around a fifth of breast cancers (1 in 5) are not affected by oestrogen. Anastrozole can only lower the risk of developing breast cancer that is caused by oestrogen.

Taking anastrozole for five years will lower your risk of getting breast cancer for the five years you take anastrozole, and for at least 7 years after you have stopped taking it.

Do I have to take anastrozole?

You do not have to take anastrozole – it is your decision.

To help you make your decision, we would like to explain the possible benefits and side effects of anastrozole.

These are the key points to think about.

- No one knows what will happen to you in the future
- If you have a higher risk of getting breast cancer it does not mean you will definitely get breast cancer
- Taking anastrozole will lower your risk of getting breast cancer in the future
- Anastrozole lowers the risk of getting breast cancer but it does not take away the risk completely
- Some women who take anastrozole will still get breast cancer
- There are sometimes side effects when taking anastrozole

How will taking anastrozole affect my risk of developing breast cancer?

If you take anastrozole, you will lower your risk of getting breast cancer by about half or fifty per cent.

Here is an example of a woman called Mary to explain what that reduction in risk means:

- Mary is 55 years old and has a 10% risk of developing breast cancer over the next 10 years
- This means that if 100 women like Mary did not take anastrozole, then 10 of them would develop breast cancer by the age of 65



• 100 women like Mary took anastrozole, then 5 of them would develop breast cancer by the age of 65

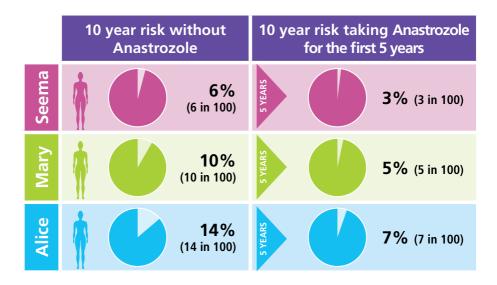


 It is likely that Mary's risk of developing breast cancer will continue to be reduced for a number of years after she has completed the five year course of anastrozole

Your breast specialist nurse or doctor will be able to tell you your personal lifetime risk of developing breast cancer and how much your risk will reduce by taking anastrozole.



Your risk of developing breast cancer will be different to other women. The diagram opposite shows how taking anastrozole lowers the risk of developing breast cancer for three different women, who all have a different level of risk.



Please remember that the benefit of taking anastrozole goes on for longer than the 5 years that the medication is taken.

What are the possible side effects of taking anastrozole?

Anastrozole can cause side effects. Many women do not experience any side effects and some women only experience mild side effects. The most common side effects that women get from taking anastrozole are similar to symptoms of the natural menopause. It is common for menopausal side effects like hot flushes to reduce or even stop after the first few months of treatment.

Whilst you are taking anastrozole you may have menopausal symptoms due to your natural menopause. These symptoms are not related to taking the medication.

Possible common side effects of taking anastrozole include:

- Hot flushes
- Night sweats that can interfere with sleep
- Vaginal dryness
- Mood swings



If you do have menopausal side effects there are ways to help reduce or control them. You can speak to the nurses or doctors in your medical team for advice about this. It is worth trying to manage your side effects to complete your course of treatment, here are some things you can try.



Hot flushes and night sweats may be improved with the following recommendations:

- Wear loose clothes, keep rooms well-ventilated, take a cool shower before bed, use light bed sheets and a cooling pillow to aid sleep
- Reducing caffeine, alcohol and spicy food and stopping smoking, as they can all trigger hot flushes
- Regular exercise and maintaining a healthy weight can reduce hot flushes and improve sleep



Vaginal dryness or discomfort is a menopausal symptom which can often be managed:

- It is safe to use vaginal moisturisers that do not contain oestrogen e.g. ReplensMD.
 These should be used regularly, not just for sexual intercourse
- If symptoms persist, despite vaginal moisturisers, most breast cancer specialists agree that a vaginal lubricant containing a low dose of oestrogen (0.005% oestriol vaginal gel) is safe to use
- You can ask your GP to prescribe these vaginal treatments

There are tablets that can also help with menopausal side effects like hot flushes, night sweats and mood swings. Your GP can prescribe these tablets (called oxybutynin and venlafaxine) if you have menopausal side effects.

If you have side effects, you can stop taking anastrozole at any time during the 5-year course and the side effects caused by anastrozole will go away.

Osteoporosis (thinning of the bones)

The hormone oestrogen helps to keep your bones strong. Anastrozole works by reducing the amount of oestrogen in your body and could make your bones thinner.



If you start taking anastrozole, your medical team will arrange for you to have a bone density scan (DEXA scan) to assess the strength of your bones.

If your bone density scan shows that you have severe osteoporosis, your medical team can offer you a different medication to reduce your risk of developing breast cancer. These medications are called tamoxifen and raloxifene.

If your bones are a bit thinner than average then you can safely take anastrozole, but you will be advised to take an additional medication, called a bisphosphonate, once a week. This will prevent further thinning of the bones and will probably make them stronger.





Breast screening

Your breast screening (regular mammograms and, for some women, MRI scans) will continue whether or not you choose to take anastrozole.

Breast screening helps to find breast cancer early which means it is easier to treat.



We hope that the information in this leaflet helps you to decide if taking anastrozole is the right option for you. This is your personal choice and your medical team will support your decision.

If you have any further questions, or wish to discuss anastrozole medication in more detail, please contact the nurses or doctors in your medical team.





This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request.

Please contact the team by email on: gmcancer.comms@nhs.net, or by writing to

The Greater Manchester Cancer Alliance, c/o The Christie NHS Foundation Trust, Wilmslow Road, Manchester M20 4BX.

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