



Center for Medical Consumers

HEALTHFACTS

For Informed Decision Making

Breast Cancer Risk Factors —A Rethink

Be skeptical whenever you see a laundry list of risk factors for a disease that's likely to kill. Be especially skeptical when it appears in the context of getting you to take a drug or have a screening test.

By now, for example, many older women are quite familiar with the list of factors that place a woman at high risk for breast cancer. *Over age 50, early menarche, delayed childbirth or no children, first-degree relative with breast cancer, one or more breast biopsies, and a diagnosis of atypical hyperplasia.*

Such risk factors are believed to be of such importance that they identify healthy women who should take the anti-breast cancer drug, tamoxifen, for five years and are featured in breast cancer awareness programs that encourage mammography screening and breast self-examination. But an editorial that appeared recently in the Journal of the National Cancer Institute identified these standard risk factors for breast cancer as “relatively weak” and not good enough at predicting who will get breast cancer.

One wonders whether anyone will let women in on the news.

This is not the first rethink about a breast cancer risk factor. Up to the 1980s, the list usually contained one risk factor that has since disappeared entirely—*benign breast disease*, also known as fibro-

cystic disease. It was considered to be a risk so major that many women lost their health insurance when their medical records showed the diagnosis.

The back peddling on that particular risk factor began in 1982 when surgeon Susan M. Love, MD, co-authored a commentary in the New England Journal of Medicine entitled, “Fibrocystic ‘disease’ of the breast—a nondisease?,” Dr. Love and colleagues asked how this condition, known colloquially as *lumpy breasts*, could be a risk factor for breast cancer when it is palpably present in about half the female population and microscopically present on autopsy in about 40% of the rest.

Fast forward to that December 2006 editorial in the Journal of the National Cancer Institute. The current breast cancer risk factors are described as “relatively weak” because they are “widely prevalent throughout the population” in the editorial by Drs. Joann G. Elmore and Suzanne W. Fletcher, whose conclusion is an understatement: “There is much work yet to do in the field of cancer risk prediction.” ±

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