Villejuif, 8th October 2019

COMMUNIQUÉ DE PRESSE

BREAST CANCER

HORMONE THERAPY HAS A BIGGER IMPACT THAN CHEMOTHERAPY ON WOMEN'S QUALITY OF LIFE

Analysis of the CANTO cohort published in the journal *Annals of Oncology* will upset received wisdom on the effects that hormone therapy and chemotherapy have on the quality of life in women with breast cancer. Contrary to the commonly held view, 2 years after diagnosis, hormone therapy, a highly effective breast cancer treatment worsens quality of life to a greater extent and for a longer time, especially in menopausal patients. The deleterious effects of chemotherapy are more transient. Given that current international guidelines recommend the prescription of hormone therapy for 5 to 10 years, it is important to offer treatment to women who develop severe symptoms due to hormone antagonist medication and to identify those who might benefit from less prolonged or intensive treatment strategies.
This work was directed by Dr Inès Vaz-Luis, specialist breast cancer oncologist and researcher at Gustave Roussy in the lab "Predictive Biomarkers and Novel Therapeutic Strategies in Oncology" (Inserm/Université Paris-Sud/Gustave Roussy).

"This analysis of the CANTO cohort shows for the first time that anti-hormonal treatments do not have lesser effects than chemotherapy on women's quality of life. Quite the contrary, as the diminution in quality of life which is noted at diagnosis is still present two years later, whereas the impact of chemotherapy is more temporary," explained Dr Vaz-Luis.

In this study, researchers measured quality of life in 4,262 patients with localised breast cancer (stage I to III) at the time of diagnosis and at one and two years thereafter. Primary treatment for these patients was surgical and, for some of them, administration of chemotherapy and/or radiotherapy. About 75-80% of them then took hormone therapy for at least 5 years. Quality of life was measured using a tool which assesses general quality of life in patients with all types of cancer (EORTC QLQ-C30) combined with a tool more specifically designed for use in breast cancer (QLQ-BR23).

For the population studied as a whole there was an overall deterioration in the quality of life at two years from diagnosis. This deterioration was greater in patients who had received hormone therapy, especially after the menopause. By contrast, chemotherapy had a bigger effect on quality of life in non-menopausal patients, especially in terms of worsening of cognitive functions.

"It is important in the future that we are able to predict which women are going to develop severe symptoms with anti-hormonal treatment so that we can support them," added Dr Vaz-

Luis. While it has been shown that hormone therapy provides a real benefit in reducing the relapse rate of hormone-dependent cancers[1] which represent 75% of all breast cancers, the deterioration in quality of life may also have a negative effect on patient adherence to treatment. It is, therefore, important to offer them symptomatic treatment, in particular for menopausal symptoms, musculoskeletal pain, depression, severe fatigue and cognitive dysfunction; and to combine this with supportive measures such as physical exercise and cognitive behaviour therapy.

“It will also be important in the future to differentiate prior to treatment patients who are at high risk of relapse from those at lower risk in order to tailor hormone treatment. This may be done to avoid escalation of anti-hormonal treatment in certain patients,” concluded Dr Vaz-Luis, emphasising that “hormone therapy is extremely effective in treating breast cancer, resulting in a reduction by approximately 50% in the risk of relapse, and that the finding of adverse effects does not in any way put into question the excellent risk/benefit ratio of this treatment.”

The CANTO cohort (CANcer TOxicities) comprises 12,000 women with breast cancer treated in 26 French centres. It is sponsored by Unicancer and directed by Professor Fabrice André, specialist breast cancer oncologist at Gustave Roussy, Inserm research director and responsible of the lab “Predictive Biomarkers and Novel Therapeutic Strategies in Oncology” (Inserm/Université Paris-Sud/Gustave Roussy). Its objective is to describe adverse effects associated with treatment, to identify the populations at risk of developing them and to adjust therapy accordingly, so as to afford a better quality of life following cancer.

This research was supported by the French National Research Agency (ANR), the Susan G. Komen Association, the Foundation for Cancer Research (ARC), Odyssea and the Gustave Roussy Foundation.

Source

Differential impact of endocrine therapy and chemotherapy on quality of life of breast cancer survivors: a prospective patient-reported outcomes analysis

Annals of oncology, 8 octobre 2019
https://doi.org/10.1093/annonc/mdz298

A. R. Ferreira[1,2], A. Di Meglio[1], B. Pistilli[3], A. S. Gbenou[1], M. El-Mouhebb[1], S. Dauchy[4], C. Charles[4], F. Joly[5], S. Everhard[6], M. Lambertini[7,8], C. Coutant[9], P. Cottu[10], F. Lerebours[11], T. Petit[12], F. Dalenc[13], P. Rouanet[14], A. Arnaud[15], A. Martin[6], J. Berille[16], P. A. Ganz[17], A. H. Partridge[18], S. Delaloge[3], S. Michiels[19,20], F. Andre[1] & I. Vaz-Luis[1]

1INSERM Unit 981, Gustave Roussy, Cancer Campus, Villejuif, France;
2Breast Unit, Champalimaud Clinical Center, Champalimaud Foundation, Lisbon, Portugal;
3Medical Oncology, Gustave Roussy, Cancer Campus, Villejuif;
4Department of Supportive Care, Gustave Roussy, Cancer Campus, Villejuif;
5Medical Oncology, Centre François Baclesse Caen, Caen;
6Unicancer, Paris, France;
7Department of Medical Oncology, U.O.C. Clinica di Oncologia Medica, IRCCS Ospedale Policlinico San Marti-

[1] [1] *J Clin Oncol*. 2019 Feb 10;37(5):423-438 : https://doi.org/10.1200/JCO.18.01160

no, Genova;
8Department of Internal Medicine and Medical Specialties (DiMI), School of Medicine, University of Genova, Genova, Italy;
9Surgical Oncology, Centre Georges-François Leclerc, Dijon;
10Medical Oncology, Institut Curie, Paris;
11Medical Oncology, Institut Curie, Hôpital René Huguenin, Saint-Cloud;
12Department of Medicine, Paul Strauss Cancer Center and University of Strasbourg, Strasbourg;
13Department of Medical Oncology, Institut Claudius Regaud, Institut Universitaire du Cancer – Oncopole, Toulouse;
14Surgical Oncology, C.R.L.C Val d'Aurelle, Montpellier;
15Radiotherapy Department, Clinique Sainte Catherine Avignon, Avignon;
16Ministry of Higher Education and Research, Ministere de l'Enseignement Superieur et de la Recherche, Paris, France;
17Medical Oncology, Ronald Reagan UCLA Medical Center, Los Angeles;
18Women's Cancers, Dana-Farber Cancer Institute, Boston, USA;
19Service de Biostatistique et d'Epidémiologie, Gustave Roussy, University Paris-Sud, University Paris-Saclay, Villejuif;
20CESP, INSERM, U1018 ONCOSTAT, Université Paris-Saclay, Univ. Paris-Sud, Villejuif, France

/ About Gustave Roussy

Gustave Roussy, the leading cancer center in Europe, is a comprehensive hub of expertise in oncology, entirely devoted to patients. It employs 3,100 professional staff engaged in patient care, research and teaching – www.gustaveroussy.fr/en

/ About Unicancer

Unicancer is the only French hospital network 100% dedicated to the fight against cancer and the only national hospital federation dedicated to oncology.

Unicancer is also the leading national academic sponsor of clinical trials in oncology in Europe. Its Research and Development Department is responsible for implementing its overall research strategy. She is ISO 9001 certified for her clinical research.

Key figures 2018: 18 French Cancer Comprehensive Centers (FCCC), private non-profit health establishments, spread over 20 hospital sites in France, also certified for their clinical research; 540,000 patients per year (short-stay, HAH and external procedures); 1/3 of French international publications in the field of oncology (source: bibliometric study/ Thomson Reuters); 90 active clinical trials promoted by Unicancer's R&D, 54 of which are in recruitment, involving more than 6,300 patients included in 200 research centres, 40 of which are abroad; more than 40,000 patients registered in the ESME real life data programme - www.unicancer.fr

/ About Inserm

Founded in 1964, Inserm is a public scientific and technological institute which operates under the joint authority of the French Ministries of Health and Research. The institute is dedicated to biomedical research and human health, and is involved in the entire range of activities from the laboratory to the patient's bedside. It also partners with the most prestigious research institutions in the world that are committed to scientific challenges and progress in these fields – www.inserm.fr/en

CONTACT PRESSE

GUSTAVE ROUSSY :
Claire Parisel – Tél. 01 42 11 50 59 – 06 17 66 00 26 – claire.parisel@gustaveroussy.fr