Patients With ADVANCED/METASTATIC Breast Cancer

This information has been prepared by the BCCA Breast Tumour Group to help you understand the risks and benefits of tamoxifen.

Your doctor has recommended tamoxifen therapy for you because there is clear evidence that it can control breast cancer that has spread beyond the breast to a distant site for a prolonged period of time in many women who take it. Your doctor feels that this is a good choice among several possible options for you at this time in your cancer care.

How Tamoxifen Works
Tamoxifen has been used to treat breast cancer for more than 30 years. One of the main ways it works is by binding to estrogen (female hormone) receptors on breast cancer cells. For this reason it is often called an “anti-estrogen”, but you may also hear it referred to as “hormone therapy”, or “hormone blocking therapy”. Breast cancer cells can use estrogen to help them grow. Tamoxifen prevents this “growth stimulus” by binding to the cells where estrogen ordinarily would. In this way it can cause shrinkage of already established tumors. Tamoxifen also works in other ways to prevent growth and survival of breast cancer cells. Tamoxifen is only for cancers that express (or have) either or both estrogen or progesterone receptors (ER positive and/or PR positive).

Tamoxifen is taken by mouth once a day as a 20 mg tablet.

Benefits of Tamoxifen in Patients with Advanced Breast Cancer
Advanced breast cancer means the cancer has spread beyond the breast and underarm lymph nodes to other organs in the body, such as bone, liver, or lung. Tamoxifen is one of a number of treatment options for advanced breast cancer. The choice of treatment depends on a number of factors and will be discussed individually between a patient and her (his) oncologist. Tamoxifen can cause existing tumors to shrink or stabilize (not grow) and can improve symptoms caused by breast cancer. It may also delay the time until symptoms (for example, pain) from breast cancer develop.
How Long will I take Tamoxifen?
Treatment usually continues until the Tamoxifen is no longer controlling the cancer growth, at which point another medication will be recommended.

A recommendation to take tamoxifen always takes into consideration the potential risks and benefits that come with the medication. The bothersome and potentially serious side effects of tamoxifen are described in the Cancer Drug Manual tamoxifen patient handout, which you should also receive along with this breast cancer specific information.

If you are not sure how long you will stay on tamoxifen, or if you wonder whether another treatment might be better for you, ask your doctor. Anyone on tamoxifen should feel free to get in touch with their physician to discuss their drug therapy or questions arising from this information package.

Side-Effects of Tamoxifen
Please refer to the Cancer Drug Manual tamoxifen patient handout for a list of possible side effects and how to manage any problematic symptoms you experience while taking tamoxifen.

Medication Interactions

Drugs such as warfarin (COUMADIN®), rifampin may interact with tamoxifen and you may need extra blood tests or your doses may need to be changed.

Some drugs should be used with caution during tamoxifen treatment. These drugs include fluoxetine, paroxetine, chlorpromazine, miconazole, quinine, buproprion, ketoconazole, trazodone, sertraline and amiodarone.

You will need to talk with your doctor if you are taking any of these medications prior to starting tamoxifen or if you start taking them while on tamoxifen.

Breast Tumour Group
B.C. Cancer Agency