



Endocrine and Hormone-Related Therapy

What Is It?

Endocrine or hormone-related therapy is a systemic treatment for breast cancer. Medication is taken to manipulate the function of the ovaries and/or the adrenal glands by blocking the effects of the hormone estrogen and/or progesterone or to act directly on tumor cells by inhibiting or blocking estrogen production. The goal is to interfere with the hormone factors required for the growth of breast cancer cells.

The hormone receptors (protein found on some breast cancer cells to which hormone molecules will attach) are important in determining the need for endocrine therapy. They are tested at the time of surgery to measure the presence of estrogen and progesterone in the tumor cells. Tumors that are hormone receptor-positive are more likely to respond to endocrine therapy.

How Is It Used?

It may be used alone, in combination with chemotherapy, or following chemotherapy. This treatment is referred to as adjuvant therapy when it is used in addition to surgery. It may also be used if the cancer recurs. In some high risk patients, hormone therapy has been shown to decrease the risk of developing a new cancer. A medical oncologist will outline your treatment plan.

Tamoxifen is a common type of endocrine therapy. It works by blocking the estrogen needed for cancer cells to grow. Tamoxifen has been shown to reduce the recurrence of breast cancer and may reduce the possibility of breast developing in the opposite breast.



Post-menopausal women whose breast cancer is estrogen-receptor positive may be candidates for a newer class of drugs called aromatase inhibitors. Aromatase inhibitors stop an enzyme called aromatase from turning androgen into estrogen.

If breast cancer recurs, hormone therapy may be an effective treatment especially when cancer cells test positive for hormone receptors. When resistance to one hormone-related treatment occurs, another form of endocrine therapy may be helpful. Several new types of drugs include progestins, aromatase inhibitors, and anti-estrogens to suppress the function of the ovaries and other endocrine glands or to act directly on the tumor cells.

What Questions Should I Ask My Oncologist About Endocrine and Hormone-Related Therapy?

- Why are you recommending endocrine therapy for me?
- What are the side effects of endocrine therapy?
- Can I receive endocrine therapy and chemotherapy at the same time?
- For how long will I need to take endocrine therapy?
- Are the costs of endocrine treatment covered by insurance?
- Are there any special tests I need to take while receiving endocrine treatment?