

Data, data, and more data. The information is valuable, but only meaningful if we have it at our fingertips. We have begun our efforts in data collection. By design, our unique program is specifically to mine data for our breast cancer patients. The data and information gleaned from this will allow us a better means of research and education. We will keep you informed as data becomes pertinent to our mutual patients. This data collection is a matter of patient safety, and that's our priority.

Sandy Schwark, R.N., BSN

Newsweek Examines Emerging Field of Oncofertility

Newsweek recently examined the "bourgeoning world of oncofertility," which specializes in assisted reproduction for women who are undergoing radiation or chemotherapy. According to Newsweek, increasing cancer survival rates are causing patients to focus more on "quality-of-life issues," such as fertility, and are causing the "two very different medical specialties" of oncology and assisted reproduction to "come together." There are now at least 50 centers that provide oncofertility services, and more oncologists are beginning to acknowledge, and in some cases, alter treatment to aid fertility.

Of the 125,000 people under age 45 diagnosed with cancer annually, about 50% will receive treatments that will affect their fertility, Newsweek reports.

Nancy Lin, an oncologist at Dana-Farber Cancer Institute in Boston, said that assisted reproduction among cancer patients is "being talked about more." She added, "there's a growing awareness among doctors, and patients are more proactive." Teresa Woodruff of Northwestern University's Feinberg School of Medicine -- who received a \$21 million N1H grant last year to develop ways to protect cancer patients' reproductive health -- said, "the narrative of cancer is no longer that it's a death sentence; it's a bump in your medical history that you overcome and go back to what we hope is a healthy lifestyle". (Kuchment, Newsweek, 8/4).

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Fertility Preservation and Cancer Treatment

Safety of Fertility Preservation by Ovarian Stimulation with Letrozole and Gonadotropins in Patients with Breast Cancer: A Prospective Controlled Study

From the Department of Obstetrics and Gynecology, New York Medical College, Valhalla; and the Institute for Fertility Preservation, Center for Human Reproduction, New York, NY.

Purpose: Because of the accompanying increase in estrogen levels, safety of performing in vitro fertilization (IVF) in women with breast cancer is unknown. The goal was to determine the effect of controlled ovarian stimulation (COS) using a combination of Letrozole with standard fertility medications on disease-free survival in women undergoing embryo or oocyte cryopreservation before adjuvant chemotherapy.

Patients and Methods: A total of 215 women with breast cancer were prospectively evaluated for fertility preservation before adjuvant chemotherapy. Of those, 79 elected to undergo COS with Letrozole and gonadotropins for embryo or oocyte cryopreservation. The remaining 136 patients underwent no fertility-preserving procedure and served as controls.

Results: Study and control groups were similar at enrollment except for a trend for higher estrogen-receptor positivity in the COS group ($P = .08$). Time between surgery and chemotherapy was longer for IVF patients (45.08 v 33.46 days; $P < .01$). Peak estradiol levels ranged from 58.4 to 1,166 pg/mL (mean, 405.94 $P \pm 256.64$ pg/mL or 1,486.76 ± 942.13 pmol/L) in COS patients. The median follow-up after chemotherapy was 23.4 months (range, 7.5 to 63.6 months) in the COS group and 33.05 months (range, 4.5 to 63.6) in the control group. The hazard ratio for recurrence after IVF was 0.56 (95% CI, 0.17 to 1.9), and the survival was not compromised compared with controls ($P = .36$).

Conclusion: Ovarian stimulation with gonadotropins and Letrozole for the purpose of fertility preservation is unlikely to cause substantially increased recurrence risk. Further research, including longer-term follow-up, is needed to confirm these findings.

Amr A. Azim, Maria Costantini-Ferrando, Kutluk Oktay

It's already known that having a baby by the age of 20 cuts by half a woman's risk of breast cancer. There's more good news in the fight against the dreaded disease. U.S. researchers say the hormone HCG, which heralds pregnancy, could prevent breast cancer. In tests conducted at the Chase Cancer Center in Philadelphia, it was found that HCG, which is produced by the placenta during pregnancy, offers women protection against the cancer. The tests involving rats showed how HCG changes breast cells' DNA to make them more resilient to cancerous changes. That's because breast cells do not reach full maturity until a woman has had a full-term pregnancy, the scientists told an annual meeting of the American Association for Cancer Research. Their study confirmed that the protection conferred was specific to HCG and was not found with other female hormones.