PREVALENCE OF HERBAL MEDICINE (HM) USE AMONG BREAST CANCER PATIENTS TREATED WITH CHEMOTHERAPY, HORMONE THERAPY, OR TARGETED THERAPY

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MASCC™ Multinational Association of Supportive Care in Cancer — Supportive Care Makes Excellent Cancer Care Possible

BACKGROUND

- Complementary and alternative medicine (CAM), including herbs, are widely used by cancer patient during antineoplastic treatment. Potential drug interactions are still unknown. Few data are available about security of biological CAM.
- In this study we aimed to evaluate the prevalence and knowledge of phytotherapy among patients undergoing treatment for breast cancer in our comprehensive cancer center.

METHODS

- From 06/2017 to 09/2017, all patients with breast cancer, treated in our comprehensive cancer center with chemotherapy, hormone or targeted therapy were included.
- Phytotherapy (Herbs) is the use of plants for therapeutic properties.
- 93 women were asked to fulfill a standardized questionnaire regarding use of phytotherapy.
- Clinico-pathological characteristics were recorded, as well as the antineoplastic treatment .
- Ethics Committee approved single center observational prospective study.

RESULTS

- 93 women-patients were included in this analysis.
- 60,9%(95%CI: 50.1-70.9) used one or more CAM during oncologic treatment (ttt).
- 58,7% (95%CI: 48-68.9) knew herbs, and 30 patients used it (32.6% (95%CI: 23.2-43.2).
- Herbs use was more prevalent in patients with localized cancer (p=0,020).
- 7 patients started phytotherapy during ttt. 4 though herbs had a synergistic effect on ttt.
- Half of them believed Herbs was harmless.
- Only 33,3% (10/30 95%CI: 17.3-52.8) had informed their oncologist.

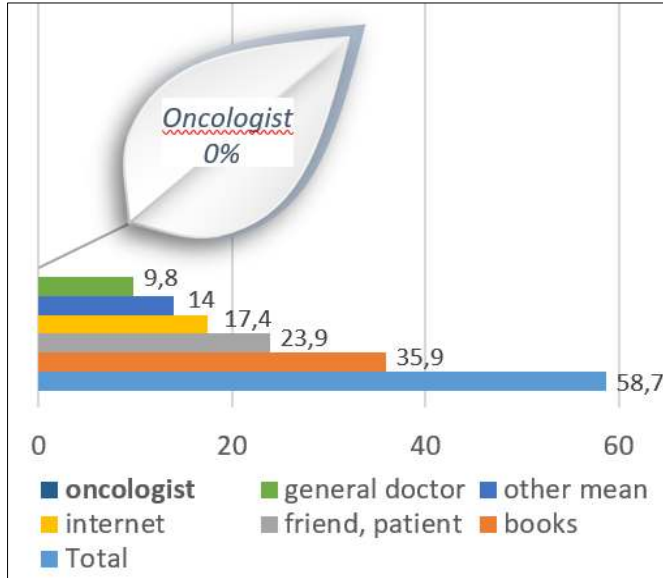Figure 2. Herbs'kwnoledge and informations'sources (%)

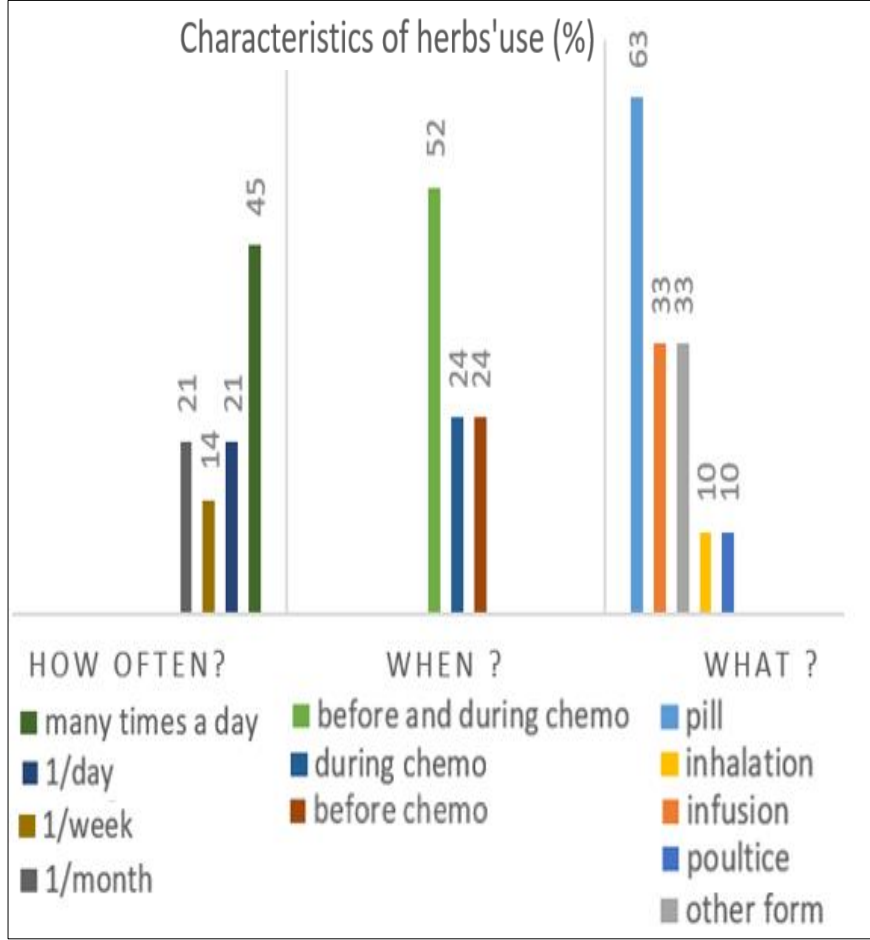Figure 3. Characteristics of herbs'use (%) n=30

93 patients included
34 localized breast cancer
28 breast cancer with nodes
31 metastatic breast cancer

56 (61%) used complementary medicine

30 (32,6%) used Herbs

Figure 1. CAM use (%) n=93

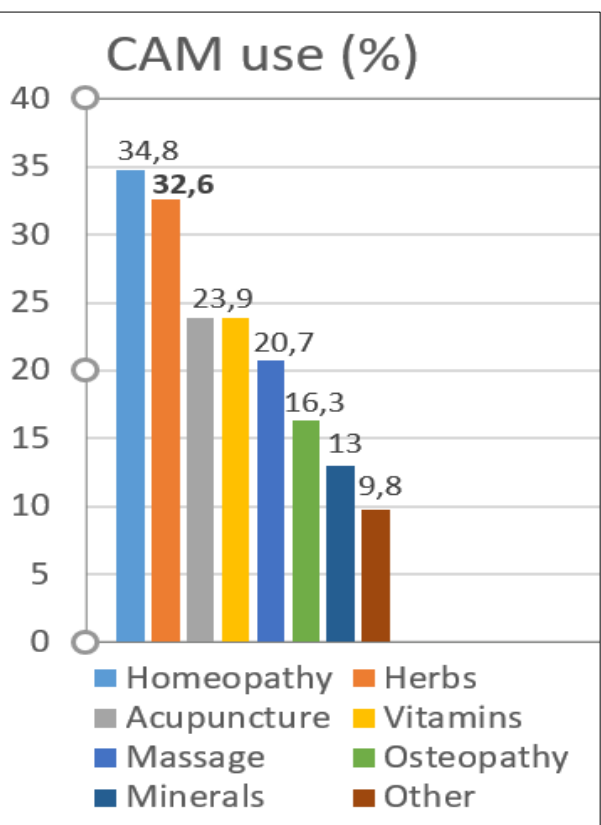Figure 4. Herbs'use motivation (%) n=30
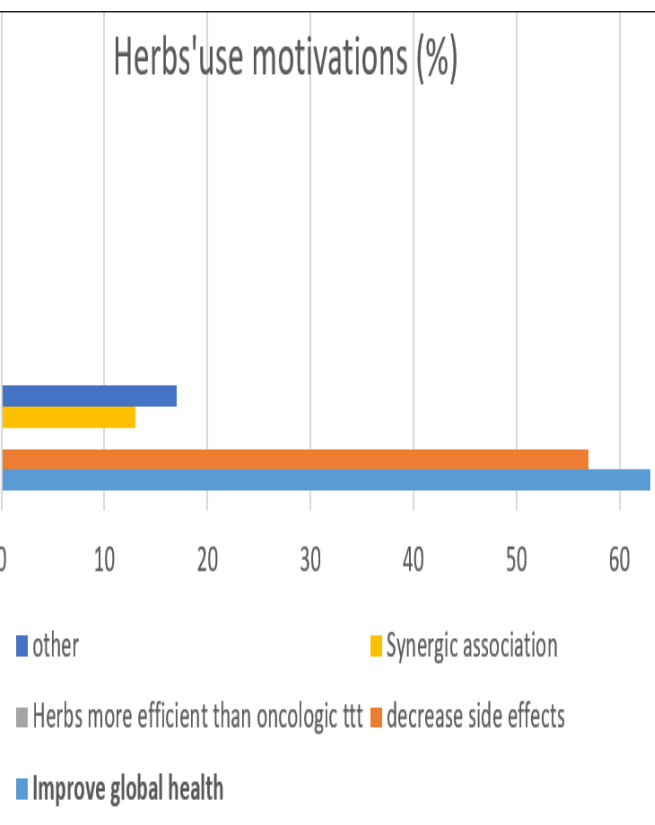
Figure 5. Oncologists advidsed of herbs use and reasons if not (%) n=30

- Refuse to discuss Herbs : 0%
- Herbs not important : 17%
- Untouched subject during consultation : 43%
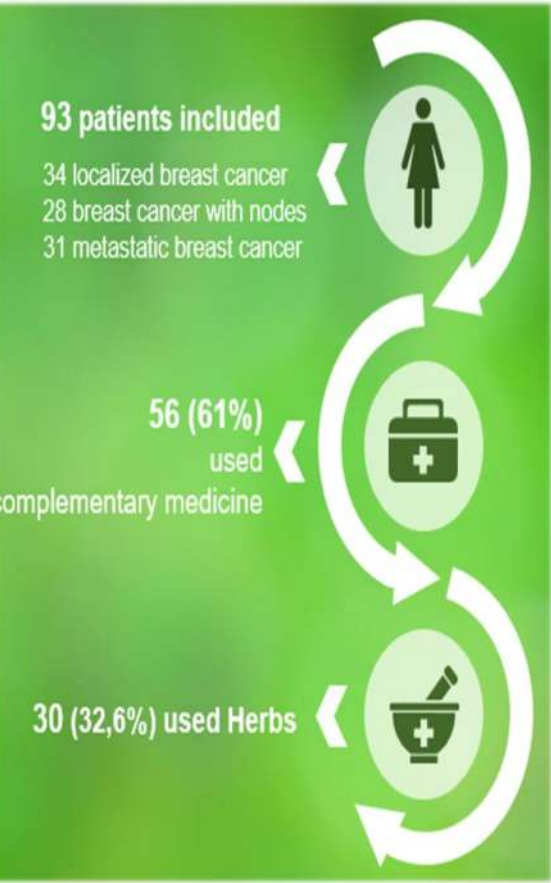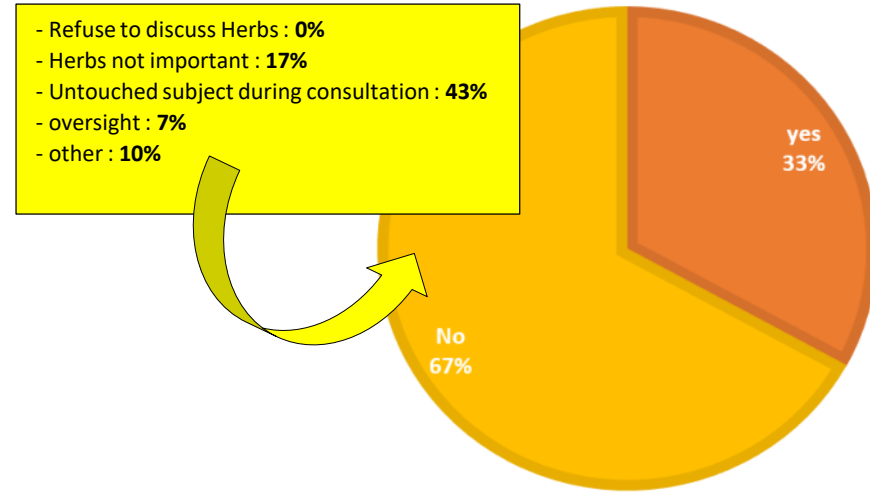- oversight : 7%
- other : 10%

yes 33% / No 67%

Table 1. Patient demographics

Characteristics	Overall population	Herbs +	No Herbs	P value
Women	93	30	63	
Median age in years (range)	53 (25-84)	50,5 (26-70)	55 (25-84)	0,22
Profession (activity/ none/ retired)	47 / 12 / 31	17 / 4 / 8	30 / 8 / 23	0,67
Cancer localization - Breast cancer (all)	93	30	63	Overall test p=0,023
- Localized breast cancer	34 (36,6%)	16 (53,3%)	18 (28,6%)	Localized vs nodes+métastatic= 0,02
- Breast cancer with axillary nodes	28 (30,1%)	4 (13,3%)	24 (38,1%)	Localized+nodes vs metastatic= 1
- Metastatic breast cancer	31 (33,3%)	10 (30,3%)	21 (33,3%)	Nodes vs localized+metastatic= 0,015 NO CONCLUSION
Ongoing treatment - Chemotherapy	63 (67,7%)	21 (70%)	42 (66,7%)	0,75
- Hormone therapy	10 (10,8%)	2 (6,7%)	8 (12,7%)	0,49
- Targeted therapy	40 (43,0%)	11 (36,7%)	32 (46,0%)	0,39
- Radiotherapy	3 (3,2%)	1 (3,3%)	2 (3,2%)	1
WHO clinical staging - 0	59 (63,4%)	19 (63,3%)	40 (63,5%)	1
- 1	28 (30,1%)	9 (30%)	19 (30,2%)	
- 2	5 (5,4%)	2 (6,7%)	3 (4,7%)	
Recent adverse effects	61 (65,6%)	20 (66,7%)	41 (65,1%)	0,88

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CONCLUSION

- Prevalence of CAM use in breast cancer is high and women are likely to try alternative treatment.
- Herbs have interactions with conventional treatment.
- Further work is still needed in this field to bring proper answers to our patients.
- Oncologists should talk with patients about phytotherapy to understand them, their motivations, prevent bad interactions and improve supportive care.

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