

UKONS Conference 2013 – Abstract

Is It Me Or Is It Hot In Here? Hot Flushes (Or Flashes): An Unmet Need.

UK NCRI Breast Clinical Studies Group Working Party on Symptom Management-Vasomotor*

Hot Flushes are a serious problem. They impact significantly on daily life and sleep quality, affecting employment, relationships and quality of life. The only effective treatment for hot flushes is oestrogen which is contraindicated in 75% of breast cancer patients. An estimated 550,000 people now live in the UK with a diagnosis of breast cancer and up to 70% women experience hot flushes. Studies have shown that up to 50% of patients stop taking their antioestrogen drugs before 5 years quite probably due to unacceptable side-effects

On the initiative of the patient advocate members of the NCRI Breast Clinical Studies Group, a Working Party on Symptom Management has been established. Members include representatives from patients, oncology, psychology, gynaecology, acupuncture and the voluntary not-for-profit sector.

The Group audited current UK practice for hot flushes in cancer using a questionnaire. A total of 1850 breast cancer health professionals were invited and 185 completed the questionnaire.

The large majority of women were prescribed Venlafaxine (77%), followed by Clonidine (37%) and Gabapentin (23%). Only 12% of women received HRT. Although SSRIs have some effect in reducing the intensity of hot flushes, they have significant side effects including sexual dysfunction, in a group of women already suffering sexual problems. The majority (95%) of respondents agreed or strongly agreed that treatment and management of hot flushes is an unmet need.

The survey shows a patchy and inequitable management of hot flushes. There is a need for research to understand the physiology of flushing and to develop and test new interventions to address this intractable problem, which continues to cause considerable distress to women after breast cancer treatment.

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