

JACQUELINE

The intention of this study was to actually look at younger patients with a diagnosis of breast cancer who have been identified as an at-risk population for poor initiation and continuation of tamoxifen. And interestingly, what we found is that while there were distinct factors associated with decisions regarding initiation and decisions to actually stop taking the drug there was one common factor that united this group. And that was actually concerns about fertility at the time of diagnosis.

JERUSS:

And so with this information what we hope we will now be able to accomplish is a targeted intervention that actually is in line with current guidelines that have been established by ASCO, ASRM, and the NCCN that state that patients should be referred to a fertility specialist who have an interest in fertility at the earliest possible time point in their diagnosis. And by doing this, we hope we can then improve upon the findings from our study, the initiation and continuation of tamoxifen for young patients who may be concerned that they wouldn't be able to achieve both of these events in their lives being treated for cancer, but also someday having a baby.

And I think this study shows us that young patients do have unique concerns and that we need to find a way to address these concerns so that we can help them to best survive their cancer and move on to reaching their survivorship goals.