Combined Modality Treatment of Locally Advanced Breast Carcinoma in Elderly Patients or Patients with Severe Comorbid Conditions Using Tamoxifen as the Primary Therapy

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Introduction
Locally advanced breast cancers (LABC) are defined as tumors that measure more than 5 cm, tumors that extend to the chest wall or skin, and tumors with fixed ipsilateral axillary nodes or ipsilateral internal mammary nodes. A multimodality approach has been the treatment of choice for the patients with LABC. However, for elderly patients or patients with severe comorbid conditions, aggressive treatments can be difficult to tolerate. In this study, the researchers evaluated the use of tamoxifen in conjunction with locoregional therapies for patients with LABC who were age > 75 years or who were younger but in poor medical condition.

Materials and Methods
A total of 47 patients, ages 48 to 86 years, were treated with neoadjuvant tamoxifen followed by surgery and radiotherapy. Adjuvant tamoxifen was given for 5 years or until disease recurrence when feasible.

Results
- Response rate was 47% after 6 months of treatment with neoadjuvant tamoxifen, including a 6% complete response rate.
- There was no major toxicity.
- 49% of patients remained disease-free after a median follow-up of 40 months.

Discussion
Neoadjuvant tamoxifen was well tolerated in elderly or frail patients with locally advanced breast carcinoma. Such treatment was proven to be effective with a reasonable response rate and good overall survival for patients with estrogen receptor positive tumors. A larger randomized study is warranted.

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