Decision guide reduced uncertainty over breast cancer prevention, study finds

Tailored, web-based intervention helped women understand options

New Orleans, LA - When women at high risk of breast cancer viewed a customized web-based decision guide about prevention options, they were more likely to make a choice about prevention and to feel comfortable with their choice, a new study finds.

Researchers developed a web-based tool called the Guide to Decide, which included general information about breast cancer and personalized information about an individual woman’s five-year risk of breast cancer. The guide walked women through two medical options to prevent breast cancer: tamoxifen and raloxifene. Information was tailored to each woman’s age and race, and included information on the benefits and risk of tamoxifen and raloxifene as well as how it would affect the woman’s breast cancer risk.

The study looked at post-menopausal women ages 40-74 who were considered at high risk of breast cancer. Of the 1,012 women who participated, 690 were randomly assigned to view the decision guide. Participants were asked after viewing the guide and again three months later about whether they wanted to receive preventive treatment and how they felt about that decision.

Women who viewed the Guide to Decide reported significantly less uncertainty when deciding whether to take tamoxifen or raloxifene, and three months later they were more likely to have made a decision.

“Since the decision to use tamoxifen or raloxifene to prevent breast cancer is based on each woman’s preferences, with no single right or wrong answer, the intervention enabled each woman to weigh the relative risks and benefits for herself and make a decision that aligned with her own values and preferences,” says study first author Matthew (Mateo) P. Banegas, M.P.H., M.S., a doctoral candidate at the University of Washington and Fred Hutchinson Cancer Research Center. Banegas will present the findings April 14 at the Society of Behavioral Medicine annual meeting in New Orleans, La.

“Because the guide was web-based, women could access it in the comfort of their home or preferred setting, at their own pace, and with their family, friends or other support system around. In addition, tailoring the information meant it matched each woman’s circumstances and was much more personal,” says study senior author Angela Fagerlin,
Ph.D., associate professor of internal medicine and co-director of the Center for Bioethics and Social Sciences in Medicine at the University of Michigan Medical School, and a research scientist at the VA Ann Arbor Center for Clinical Management Research.

Future research will look at how many risks and benefits can be presented to patients before they are overwhelmed by information and are not able to process it fully.

**Breast cancer statistics:** 229,060 Americans will be diagnosed with breast cancer this year and 39,920 will die from the disease, according to the American Cancer Society.

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**Resources:**
U-M Cancer AnswerLine, 800-865-1125
U-M Comprehensive Cancer Center, [www.mcancer.org](http://www.mcancer.org)
Clinical trials at U-M, [www.UMClinicalStudies.org/cancer](http://www.UMClinicalStudies.org/cancer)
Fred Hutchinson Cancer Research Center, [www.fhcrc.org](http://www.fhcrc.org)

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*This study was presented during the 2012 Annual Meeting and Scientific Session of the Society of Behavioral Medicine (SBM) from April 11-14 in New Orleans, LA. However, it does not reflect the policies or the opinion of the SBM.*