SURVEILLANCE OF ENDOMETRIAL HYPERPLASIA WITH ULTRASOUND IN BREAST CANCER WOMEN ON TAMOXIFEN THERAPY

M. Hummeida1, R. Mohammed2, K. Hammad3
1. School of Medicine, Alneelain University, Khartoum, Sudan
2. Department of OBGYH, Khartoum Teaching Hospital, Kartoum, Sudan
3. Radiation and Isotopes center Khartoum, Sudan

Tamoxifen universally used as adjuvant therapy for women with breast carcinoma, has estrogentic effect on the endometrium. Association with endometrial cancer with an estimated annual risk of 2/1000 women has been reported. The magnitude of the risk in term of treatment duration, age, dose, varies between different studies. Although benefit outweigh this risk, regular gynecological surveillance is mandatory to prevent this complication. The new recommendation of extending Tamoxifen use for 10 years will add ore risks. Transvaginal endometrial thickness examination has demonstrated high accuracy in diagnosing endometrial hyperplasia and cancer.

Objectives: To study risk of Tamoxifen-induced endometrial hyperplasia, or cancer on patients on Tamoxifen therapy for breast cancer

Material and method: This is a prospective observational study involving patients with breast cancer on Tamoxifen therapy. 140 breast cancer’s patients, on Tamoxifen therapy for more than 6 months, were subjected to transvaginal ultrasound examination of endometrial thickness followed by Pipelle endometrial sampling.

Results Average endometrial thickness was 11.2 with 8 mm cutoff line. Statistically analyzed, the results showed significant association between endometrial thickness and duration of Tamoxifen use.

Conclusion and recommendation: Patients on long term Tamoxifen therapy should regularly be screened for endometrial hyperplasia and cancer. Detected early, these premalignant changes are amenable to treatment at appropriate time.