What is Tamoxifen?

Tamoxifen is a drug that is commonly used as part of the treatment for some breast cancers. It belongs to a group of drugs called hormone therapies and is also described as an anti-oestrogen drug.

How does it work?

Hormones are substances that occur naturally in your body. They control the growth and activity of normal cells. The female hormones oestrogen and progesterone can affect the growth of breast cancer cells.

Some breast cancers are stimulated by the hormone oestrogen, which encourages cells to grow. These cancers are known as oestrogen receptor positive tumours. Tamoxifen works by blocking the effects of oestrogen on cancer cells and stopping them from growing. This is why it is called an anti-oestrogen.

How do I know if Tamoxifen will work for me?

Your cancer specialist will order a test on your tumour, either after a biopsy or after surgery. This will help them find out if Tamoxifen will be of benefit to you. This test is called an oestrogen receptor test. If you are oestrogen receptor positive, this means your tumour has oestrogen receptors and you could benefit from Tamoxifen. Unlike some types of hormone therapy, you can have treatment with Tamoxifen both before and after the menopause.
How much Tamoxifen do I take and when do I take it?

Tamoxifen is available as a tablet and a liquid. The recommended dose is 20mg once a day. It is best taken at the same time each day, but the time of day does not matter. Taking it with food can help you to avoid feeling sick.

Does it matter if I miss a dose?

As Tamoxifen can take several weeks to reach a steady level in your blood, this level does not dramatically change over a short period. Missing a single dose will not do any harm, but in the long term it is better to take it regularly.

How long will I have to take Tamoxifen?

Tamoxifen can be taken for varying lengths of time but it is usual to take Tamoxifen for 5 years. Your doctor might also suggest that you switch to another anti-oestrogen medication after 2–3 years. This can give you extra benefits.

What are the benefits of taking Tamoxifen?

Taking Tamoxifen greatly reduces the risk of your cancer coming back and improves overall survival in all age groups. The other advantage is that Tamoxifen has a positive effect on your bones, so it might help to prevent or slow down osteoporosis if your periods have stopped (postmenopausal). There is also some evidence that Tamoxifen reduces cholesterol and might reduce your risk of heart disease.

What are the side-effects of Tamoxifen?

Like any drug, Tamoxifen can have side-effects. However, everyone reacts differently to drugs. Some people have more side-effects than others, and others again have no side-effects at all. Many women find that side-effects are worse at the start of treatment but they settle down after a few weeks or months.

Some side-effects are mentioned below, but if you experience any new symptoms, discuss them with your GP, specialist or breast care nurse. In general, the benefits of taking Tamoxifen far outweigh the risks if you are oestrogen receptor positive.

Common side-effects

The most common side-effects are like menopausal symptoms. These include hot flushes, night sweats, insomnia, vaginal dryness, low libido, fatigue, irregular periods, lighter periods or periods stopping.

These symptoms are more common in women who take Tamoxifen before the menopause than those who start taking it after the menopause.

If you are experiencing menopausal symptoms, see the Managing Menopausal Symptoms factsheet, which is available from the Irish Cancer Society.

Other side-effects

Other possible side-effects include headaches, vaginal irritation or discharge, joint pain, leg cramps at night and thinning of your hair.

You might feel some indigestion or mild nausea, although these symptoms usually improve with time. Many women find that they put on weight during their treatment, but there is no clear evidence that links this weight gain to Tamoxifen. Tamoxifen can also affect the lining of your womb (endometrium), which might become thickened. In a few cases it can cause polyps or ovarian cysts or, very rarely, cancer of the womb. If you have any unexpected vaginal bleeding or pain, tell your GP or specialist.
Some research has shown that taking Tamoxifen may slightly increase the risk of blood clotting or affect your vision. The risk is greater if you have problems such as cataracts before you start to take Tamoxifen. Remember hair loss is a very rare side-effect of Tamoxifen.

**Can I take other drugs while I am taking Tamoxifen?**

It is best not to take anticoagulants (drugs that thin your blood) such as warfarin while you are on Tamoxifen. Other drugs that commonly interfere with Tamoxifen are SSRI antidepressants, for example, Prozac. Always check with your specialist if you are concerned about taking any other medicines when taking Tamoxifen.

**I am still having regular periods. Will Tamoxifen work for me?**

Tamoxifen works well if you are still having periods and also after the menopause (pre- and postmenopausal), particularly if your breast cancer cells are oestrogen receptor positive.

**Fertility and pregnancy**

If you are premenopausal, your periods may become irregular or stop. They might return once you stop taking Tamoxifen. However, for some women, if you are close to your natural menopause there is a chance your periods might not come back at all.

Even if your periods stop while you are taking Tamoxifen, you could still become pregnant. You should not become pregnant while taking Tamoxifen as the risks to the foetus are unknown. Therefore, it is important to use reliable non-hormonal contraception such as condoms, femidoms, a diaphragm or coil (IUD). If you wish to become pregnant after Tamoxifen treatment, you should discuss this with your doctor. It is best to wait a couple of months after stopping the drug.

**Can Tamoxifen prevent breast cancer?**

Research involving women at high risk of getting breast cancer has been undertaken internationally. During it, women were given either Tamoxifen or a placebo (dummy pill) for 5 years. The first results show the risk of breast cancer over a 5-year period was nearly halved compared with the group taking the placebo. The longer-term results of this research is awaited. There is also ongoing research involving women living in Ireland.

**What happens after I stop taking Tamoxifen?**

You may feel insecure when your doctor tells you that you should stop taking Tamoxifen after 5 years or so. This is natural and it might help to discuss your concerns with your GP, specialist or breast care nurse. In general, the side-effects of Tamoxifen outweigh the benefits after the recommended time of taking the drug.

**Further support**

If you have any concerns about taking Tamoxifen, talk to your chemotherapy nurse or breast care nurse. You might also find it easier to share your feelings with someone who has had a similar experience to you. For example, Reach to Recovery is a programme set up to help and support women who have recently had a breast cancer diagnosis.

The programme involves personal contact between you and a Reach to Recovery volunteer. This is a woman who has had treatment for breast cancer. Carefully selected and fully trained volunteers are available to provide advice and reassurance at a time when you need it most. For more information on individual support or support groups in your area, call the National Cancer Helpline.

National Cancer Helpline: 1800 200 700
Useful organisations

Reach to Recovery
Provides practical and emotional support to women with breast cancer.
43/45 Northumberland Road, Dublin 4
National Cancer Helpline 1800 200 700
Email: helpline@irishcancer.ie
Website: www.cancer.ie

Breast Cancer Care UK
Website: www.breastcancercare.org.uk

Irish Osteoporosis Society
Website: www.osteoporosis.ie

FURTHER INFORMATION

For more information on Tamoxifen and breast cancer or for confidential advice from our cancer specialists, call the National Cancer Helpline Freephone

1800 200 700

(Monday–Thursday, 9am–7pm; Friday, 9am–5pm)
or
email helpline@irishcancer.ie

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