Abstract:

PURPOSE: To find associations between knowledge about risk factors for breast cancer and the socioeconomic status of healthy women, as well as their attitude toward taking chemopreventive drugs.

PATIENTS AND METHODS: Between April and September 1999, 7135 healthy women completed questionnaires providing information about their willingness to take chemopreventive drugs. Items in the questionnaire included the sources of the information they had, their estimates of the population and personal lifetime risk, and risk factors for breast cancer.

RESULTS: A total of 6597 questionnaires were evaluable. The responders' median age was 44. Fifty-five percent of the women were willing to consider receiving chemopreventive drugs to lower their risk for breast cancer. Participants who estimated the population risk as being very high were more disposed to receive chemoprevention (65.3%), as were women who estimated their own breast cancer risk as being high (74.1%). A family history of breast cancer only had a low impact on willingness to receive chemoprevention. Women with a family history of breast cancer were willing to take chemopreventive agents in 57.2% of cases. The multivariate analysis showed that
knowing about risk factors and having a lower educational level were factors positively correlated with willingness to consider chemoprevention. CONCLUSION: These findings emphasize the role of estimations of the risk of breast cancer for patients considering whether to accept chemoprevention treatment. To date, only a few modern models of risk estimation have been evaluated in relation to chemoprevention. There is a need for better integration of professional risk estimations into clinical practice.