Does a family history of both breast and prostate cancer (vs breast only) put a woman at greater risk for future breast cancer?

Yes. Women with first-degree relatives with breast and prostate cancer had a 78% elevated risk for developing breast cancer (adjusted hazard ratio [aHR], 1.78; 95% confidence interval [CI], 1.45–2.19) in this large observational cohort study. A family history of breast or prostate cancer was associated with a modest increase in breast cancer risk after adjustments for confounders (aHR, 1.42; 95% CI, 1.02–1.26 and aHR, 1.14; 95% CI, 1.02–1.26, respectively). Risk estimates associated with a family history of both breast and prostate cancer were higher among African American women (aHR, 2.34; 95% CI, 1.09–5.02) versus white women (aHR, 1.66; 95% CI, 1.33–2.08).

FAST TRACK

Patients should be counseled about any additional risk for breast cancer their family history implies

Beebe-Dimmer JL, Yee C, Cote ML, et al. Familial clustering of breast and prostate cancer and risk of postmenopausal breast cancer in the Women's Health Initiative Study [published online ahead of print March 9, 2015]. Cancer. doi: 10.1002/cncr.29075.

EXPERT COMMENTARY
Andrew M. Kaunitz, MD, University of Florida Research Foundation Professor and Associate Chairman, Department of Obstetrics and Gynecology, University of Florida College of Medicine–Jacksonville. Dr. Kaunitz serves on the OBG MANAGEMENT Board of Editors.

The most common invasive cancers diagnosed in US women and men are breast and prostate cancers, respectively. This analysis from the Women's Health Initiative observational study involved 78,171 women aged 50 to 79 years at enrollment. Invasive breast cancer was diagnosed in 3,506 women (4.5%) during a median of 132 months of follow-up. Having a first-degree relative with breast or prostate cancer was associated with an elevated adjusted hazard ratio of breast cancer of 1.42 and 1.14, respectively. Women who

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WHAT THIS EVIDENCE MEANS FOR PRACTICE

The associations observed by these authors underscore that, when taking family histories, women's health clinicians should pay attention not only to breast but also to prostate cancer, and counsel patients regarding risk and screening practices accordingly.

ANDREW M. KAUNITZ, MD

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had a history of both cancers among first-degree relatives had an adjusted HR of 1.78. Although the difference did not achieve statistical significance, there was a suggestion that the elevated risk for breast cancer associated with relatives with prostate and breast cancer was higher in African-American women compared with white women. The risk for breast cancer was not elevated in women who had first-degree relatives with cancers other than breast or prostate.

The authors point out that results of another study also indicated that a family history that includes both cancers is associated with a greater elevation in the risk for breast cancer than family history of prostate cancer alone. Although BRCA 1 and 2 mutations are associated with an elevated risk of not only breast but also prostate cancer, the authors say that such mutations account for only a small proportion of the observed aggregation of breast and prostate cancer in first-degree relatives of women with breast cancer in their analysis.

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