

# Many breast cancer patients don't get treatment for heart problems

3 June 2014

Only a third of older breast cancer patients saw a cardiologist within 90 days of developing heart problems, in a study presented at the American Heart Association's Quality of Care and Outcomes Research 2014 Scientific Sessions.

Breast cancer patients with heart problems who saw a [cardiologist](#) were more likely to receive standard therapy for their [heart failure](#) than those who did not see a heart specialist, the study found.

"The majority of older women who develop heart problems after their breast cancer therapy aren't treated by a cardiologist, and they had lower quality of care," said Jersey Chen, M.D., M.P.H., lead author of the study and a research scientist and cardiologist at Kaiser Permanente in Rockville, Maryland. "This suggests that this is an important area for oncologists and cardiologists to collaborate."

For the study, researchers used a Medicare-linked database to identify women older than 65 who were diagnosed in 2000-09 with stage I-III breast cancer and received cancer treatments that previously had been linked to heart problems.

The study tracked which patients developed cardiomyopathy or heart failure. Cardiomyopathy is a weakening of the heart and its ability to pump blood. Heart failure occurs when the weakened heart causes symptoms such as fatigue and shortness of breath.

Among 8,400 [breast cancer patients](#) treated with either chemotherapy drugs called anthracyclines or a targeted therapy called trastuzumab, 1,028—about 12 percent—developed heart problems within three years, and 345 (34 percent) saw a cardiologist within 90 days of their heart diagnosis. Women with heart failure after cancer treatment were more likely to be treated with standard medications if seen by a cardiologist compared with those who did not see a cardiologist.

"The bottom line is, if you have [breast cancer](#) and you're treated with anthracyclines or trastuzumab, you should know they have side effects," Chen said. "And if you have symptoms of heart problems like shortness of breath or swelling in the feet or legs, seek attention quickly, preferably with doctors familiar and comfortable with treating heart failure after cancer therapy."

"Many cancer patients who develop heart failure or cardiomyopathy aren't getting the necessary medications, regardless of whether they're seen by cardiologists," he said. "So there is work to be done to improve care for all women with cardiac complications after [cancer therapy](#)."

Using 2006-11 data from Medicare's Part D drug benefit, the study found that 60 percent of patients with [heart problems](#) who saw a cardiologist received ACE inhibitors or angiotensin receptor blockers, versus 44 percent of those who didn't see a cardiologist. For beta-blockers, the figures were 40 percent versus 24 percent. Those drugs are the mainstay of treatment for heart failure, Chen said.

People with other cancers—especially if they're older or have many other health problems—should also be vigilant for [heart](#) symptoms if they receive anthracyclines or trastuzumab, Chen said.

Provided by American Heart Association

APA citation: Many breast cancer patients don't get treatment for heart problems (2014, June 3)  
retrieved 2 May 2021 from <https://medicalxpress.com/news/2014-06-breast-cancer-patients-dont-treatment.html>

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