

# No risk association observed for anthracycline chemotherapy, cognitive decline

April 21 2016

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New data analyses found no association between anthracycline chemotherapy and greater risk of cognitive decline in breast cancer survivors, according to an article published online by *JAMA Oncology*.

Possible adverse effects of [breast cancer treatment](#) on cognitive function have been acknowledged but the risks of specific chemotherapies remain undetermined.

Patricia A. Ganz, M.D., of the UCLA Jonsson Comprehensive Cancer Center, Los Angeles, and coauthors conducted a secondary analysis of Mind Body Study data to examine the risk of lasting [cognitive decline](#) with anthracycline-based chemotherapy.

Breast cancer survivors had baseline neuropsychological evaluations within three months after primary treatments (n=190), at six months (n=173), at one year (n=173) and at an average of 4.8 years after treatment (n=102). The neuropsychological tests picked for the analyses measured memory, processing speed and executive function.

The authors report that cognitive function after cancer treatment in memory, processing speeds and [executive function](#) was comparable among those women who received chemotherapy with or without anthracycline and those who did not receive chemotherapy. Over time, cognitive function also was comparable between the groups up to seven

years after treatment, according to the study. The authors also note that they did not find an association between anthracycline exposure and neuropsychological performance on any measure they examined.

The authors acknowledge their study results are in contrast to other findings.

"In conclusion, in this study we could not find evidence to support the claim that anthracycline treatment confers greater risk of cognitive decline for [breast cancer survivors](#)," the study concludes.

**More information:** *JAMA Oncol.* Published online April 21, 2016.  
[DOI: 10.1001/jamaoncol.2016.0350](https://doi.org/10.1001/jamaoncol.2016.0350)

Provided by The JAMA Network Journals

Citation: No risk association observed for anthracycline chemotherapy, cognitive decline (2016, April 21) retrieved 7 February 2023 from <https://medicalxpress.com/news/2016-04-association-anthracycline-chemotherapy-cognitive-decline.html>

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