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Perioperative use of NSAID might prevent early relapses in breast and other cancers: An upstream approach

A bimodal pattern of hazard due to relapse among early stage breast cancer patients has been identified in multiple databases from US, Europe and Asia. We are studying these data to determine if this can lead to new ideas on how to prevent relapse in breast cancer. Using computer simulation and access to a very high quality database from Milan for patients treated with mastectomy only, we proposed that relapses within three years of surgery are stimulated somehow by the surgical procedure. Most relapses in breast cancer fall in this early category. Retrospective data from a Brussels Anesthesiology Group suggests a plausible mechanism. Use of ketorolac, a common NSAID analgesic, used in surgery was associated with far superior disease-free survival in the first five years after surgery. The expected prominent early relapse events in months 9-18 are reduced five-fold. Transient systemic inflammation, accompanying surgery (identified by IL-6 in serum) could facilitate angiogenesis of dormant micrometastases, proliferation of dormant single cells, and seeding of circulating cancer stem cells (perhaps in part released from bone marrow) resulting in early relapse and could have been effectively blocked by the perioperative anti-inflammatory agent. If this observation holds up to further scrutiny, it could mean that the simple use of this safe, inexpensive and effective anti-inflammatory agent at surgery might eliminate early relapses. We suggest this would be most effective for triple negative breast cancer and be especially valuable in low and middle income countries. Similar bimodal patterns have been identified in other cancers suggesting a general effect.

Biography

Michael Retsky is working as Staff at Harvard TH Chan School of Public Health and Faculty at University College London. He was on Judah Folkman's Staff at Harvard Medical School for 12 years. He is the Editor of a Nature/Springer Book on the Breast Cancer Project to be published in 2017. He was the first person to use what is now called Metronomic Adjuvant Chemotherapy and is a Founder and on the Board of Directors of the Colon Cancer Alliance. He has published more than 60 papers in Physics and Cancer.

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