

# Genetic test could help women

## avoid chemotherapy

**Chris Smyth** Health Editor

Thousands of women with breast cancer could be spared chemotherapy by a genetic test that can predict whether the disease will return.

The test is more accurate, cheaper and quicker than methods used by the NHS. Experts said that it ought to be a routine part of care for women with the most common type of breast cancer.

More than 10,000 women a year with early-stage breast cancer could be offered the test to help them choose whether to have intensive treatment

after surgery to remove a tumour, which can cause side effects such as nausea, insomnia and hair loss.

Three years ago the NHS approved Oncotype DX, which looks for genetic markers in cancers that suggest how likely they are to grow and spread. The test is not widely used, partly because it costs £2,500 and because samples need to be sent away for processing.

The new study compares the test with a method called EndoPredict, which costs £1,000 and for which samples can be analysed within hospitals.

Researchers used tissue samples

from 928 women with oestrogen receptor positive, HER2 negative breast cancer. They found that 5.8 per cent of women classed as low risk by EndoPredict had a return of their cancer within a decade, compared with 10.1 per cent of those assessed by Oncotype DX. Of those classed as high risk, 28.8 per cent of those tested with Oncotype DX had a recurrence of their cancer compared with 23.5 per cent of those assessed with EndoPredict, according to the researchers' report in the *Journal of the National Cancer Institute*.

Richard Buus, of the Institute of

Cancer Research in London, lead author of the paper, said: "This study showed that a new test is more accurate than the current NHS standard test at detecting women at lowest risk of their breast cancer spreading to other parts of the body in the long term."

Baroness Morgan of Drefelin, chief executive of Breast Cancer Now, said: "This test could give patients and their doctors invaluable reassurance. We would encourage Nice [the National Institute for Health and Care Excellence] to consider this technology for routine use on the NHS."

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