General Motors Teams Up with Cancer Researchers to Take a Step Toward Breast Cancer Prevention

The National Surgical Adjuvant Breast and Bowel Project (NSABP), a National Cancer Institute (NCI)-supported cancer research network, and General Motors Corporation (NYSE:GM) today announced a unique collaboration between business and cancer research. GM is making information available to female employees and retirees about an opportunity to be screened to determine their risk of developing breast cancer. This breast cancer screening process is a component of NSABP’s breast cancer prevention trial, the Study of Tamoxifen and Raloxifene (STAR).

“Cancer is the second leading cause of death in the United States. We estimate that over 150,000 GM employees, retirees, and their family members were treated for cancer last year. That’s nearly 18 percent of the 1.2 million people covered by GM health care plans—an enormous figure,” stated Marcus G. Wilson, M.D., GM corporate medical director. “GM is at the forefront of companies battling cancer and we constantly strive to improve our employees’ quality of life. That is why our support for breast cancer prevention research, including STAR, is absolutely critical.”

As part of this pilot collaboration, nearly 140,000 female, salaried employees (both active and retired) age 35 and older are being mailed a message from Dr. Wilson, information on the STAR trial, and the STAR Risk Assessment Form. Women are invited to complete the form, at no obligation, if they are interested in knowing their risk for developing breast cancer. All women who respond will have their breast cancer risk assessed by the NSABP and will be mailed the results. Postmenopausal women age 35 or older who are at high risk for developing breast cancer will then have the option of learning more about STAR.

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STAR is designed to compare the effectiveness and safety of raloxifene (Evista®), an osteoporosis prevention and treatment drug, to tamoxifen (Nolvadex®) for reducing breast cancer risk. Over 500 centers across the United States, Puerto Rico, and Canada are enrolling 22,000 postmenopausal women age 35 and older who are at high risk for developing breast cancer into the trial. More than 8,500 women have joined STAR since it was opened in July 1999.

“All information submitted by any GM employee is confidential,” said Wilson. “Information submitted by an employee will not be shared with GM and the resulting information about her risk of breast cancer will only be given back to the woman. If she has an increased risk of breast cancer and she is interested in being contacted about STAR, only then will the NSABP share her information with a STAR researcher at a site near her.”

According to D. Lawrence Wickerham, M.D., NSABP associate chairman and STAR protocol officer, a women’s individual risk for developing breast cancer is calculated by a computer program using her personal medical history and her family’s history of breast cancer. “Not surprisingly, most women tend to overestimate their own breast cancer risk,” said Wickerham. “We consider the risk assessments we do as a part of STAR to be a public health service. Many of the women who go through the risk assessment process are reassured to learn that their actual risk of breast cancer is lower than they imagined.”

GM has a history of forward-thinking employee wellness programs, including LifeSteps, the largest corporate health promotion program in the world. This program provides the information and tools to promote healthier lifestyles and helps employees, retirees, and their families better manage their health and health care needs while potentially preventing serious health episodes. LifeSteps also helps to educate and inform GM health care enrollees so that they can be more active in making health care decisions and more able to practice home or self-care when appropriate.

“We applaud GM for their focus on prevention and health risk reduction,” said Worta McCaskill-Stevens, M.D., program officer for STAR at the NCI’s Division of Cancer Prevention. “GM’s support for cancer prevention is a perfect complement to the goals of the STAR trial, and we are pleased to have their assistance with this project.”

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In 1998, the drug tamoxifen was shown to reduce the chance of developing breast cancer by about half in the Breast Cancer Prevention Trial (BCPT), a study of over 13,000 premenopausal and postmenopausal women at increased risk of breast cancer. The U.S. Food and Drug Administration (FDA) approved the use of tamoxifen to reduce the incidence of breast cancer in women at increased risk of the disease in October 1998. Raloxifene was shown to reduce the incidence of breast cancer in a large osteoporosis trial, the Multiple Outcomes of Raloxifene Evaluation (MORE) study. MORE involved 7,705 postmenopausal women with a history of osteoporosis.

Once a woman chooses to participate in STAR, she is randomly assigned to receive either 20 mg tamoxifen or 60 mg raloxifene daily for five years and will have regular follow-up examinations, including mammograms and gynecologic exams. The maker of tamoxifen, AstraZeneca Pharmaceuticals, Wilmington, Del., and the maker of raloxifene, Eli Lilly and Company, Indianapolis, Ind., are providing their drugs for the trial without charge.

Women interested in locating a STAR site can also call the NCI’s Cancer Information Service at 1-800-4-CANCER (1-800-422-6237). For more information on STAR, visit the NSABP’s Web site at http://www.nsabp.pitt.edu or NCI’s clinical trials Web site at http://cancertrials.nci.nih.gov and choose “STAR” from the Most Requested Pages section.

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