



**Answer: Controversial**

Investigators of most older studies recommend for women not to take ERT (Estrogen Replacement Therapy) based on theory. The newer studies looking at objective databases found that there is no data suggesting that ERT is detrimental.

ER/PR status have no bearing on treatment or prognosis of breast cancer.

A majority of OB/GYN physicians who have assessed the risks and benefits of ERT state that the benefits far outweigh the potential risk.

In a study of 1,500 women with breast cancer in which 10% of them who use ERT for up to 22 years, the rate of recurrence of breast cancer was .67. Only two of the ERT users (\*1.2%) died and 169 from the entire group died (11.5%). This is supportive data for women to take ERT.

ERT (Estrogen Replacement Therapy) is not for everyone. Other options exist like SERMS (Selective Estrogens) and phytoestrogens.

In retrospective studies in looking at all women, breast cancers that were increased on HRT were all localized of lower grade and did not increase the risk of death secondary to a breast cancer associated with HRT. In addition, prospective studies have shown a 16% reduced risk of fatal breast cancers among HRT users over non-users.