

## Characterizing Musculoskeletal adverse events in Post-Menopausal women being treated for Breast Cancer across the OHDSI Network

PRESENTER: **Jenny Lane**

### INTRO

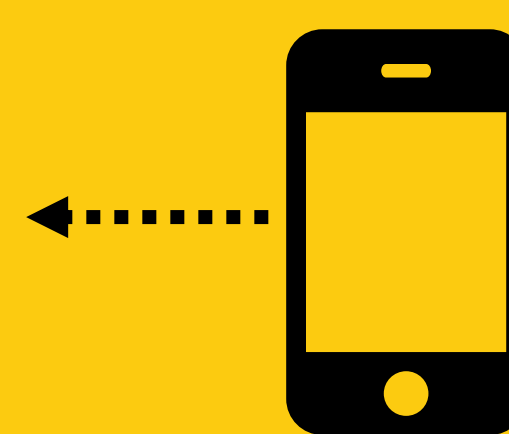
Large RCTs have shown that Aromatase Inhibitors improve breast cancer survival, but have also suggested increased incidence of MSK side effects compared to traditional Tamoxifen.<sup>1-5</sup> This study aimed to characterize women and adverse events associated with estrogen blockade after breast cancer, to determine if it is feasible to move to PLE study within the OHDSI Network

### METHODS

1. Women aged >55y with known breast ca & new use of Aromatase Inhibitor vs Tamoxifen
2. ATLAS was used with IQVIA, CPRD & SIDIAP data to determine if possible to take study to collaborators
3. Outcomes:
  - Carpal tunnel syndrome
  - Osteoarthritis (shoulder, hand & wrist, hip, knee)

Database	Tamoxifen Users (Comparator)	AI Users (Target)
IQVIA US Ambulatory	22,605	82,898
IQVIA US Hospital Charge Datamaster	2,824	14,228
IQVIA US LRxDx Open Claims	319,018	1,200,679
IQVIA Disease Analyser Germany	9,630	12,650
CPRD	19,630	26,260
SIDIAP	3,075	16,540

# Characterization shows MSK adverse events are common after hormonal treatment for breast cancer. Join the journey to PLE

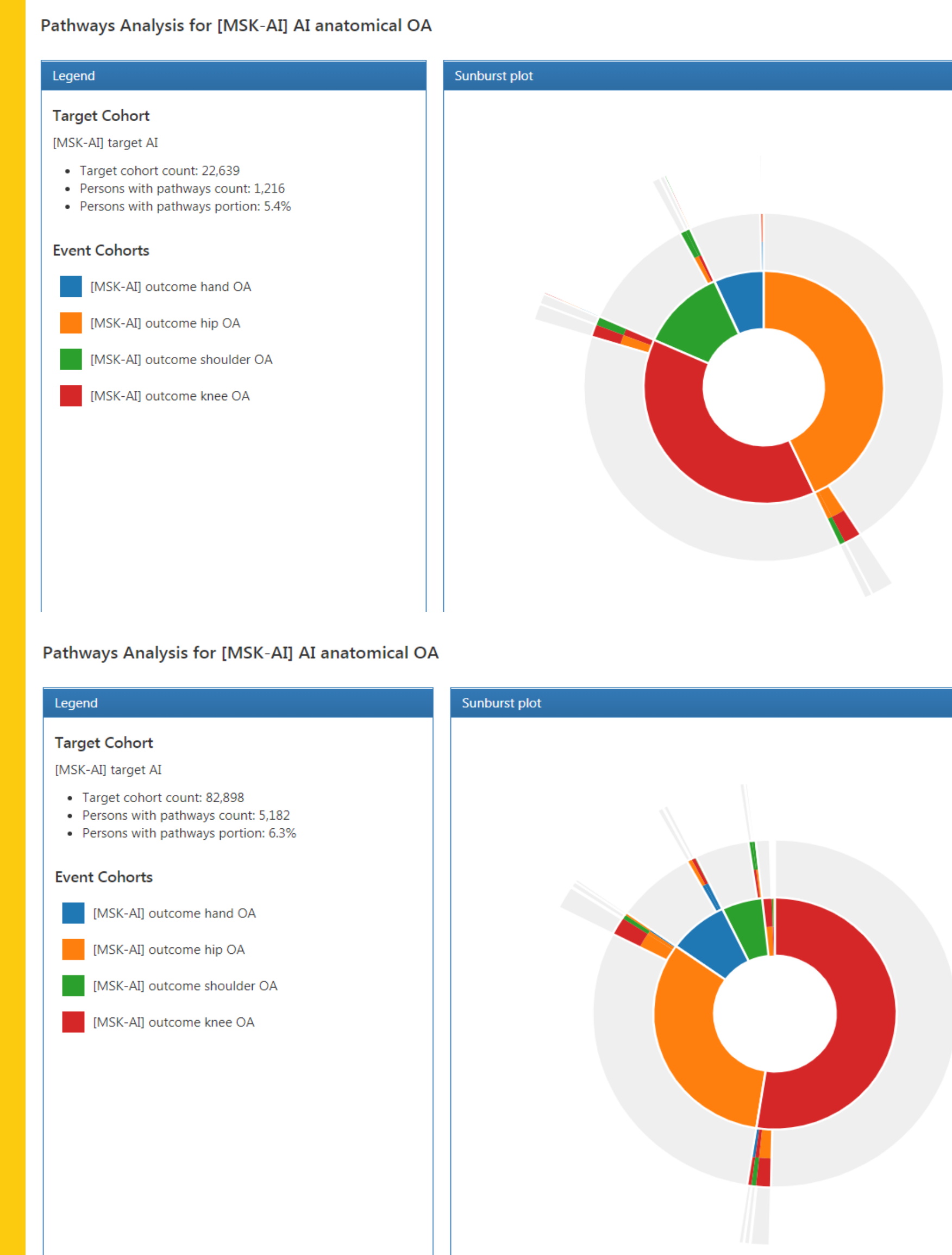


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## We are actively seeking collaboration with other data owners

- Oct 2020: run cohort diagnostics to identify suitable data partners & confirm cohort definitions
- Winter 2020: Finalisation of PLE; package available
- Jan 2021: Meta-analysis

Figure 2. Cohort Pathway examples for Osteoarthritis, IMRD & AmbEMR



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