This factsheet is about a drug used to treat breast cancer called exemestane, which is also called Aromasin®. It explains what exemestane is, how it works, when it might be prescribed, what the benefits are, and what side-effects may occur. For more information, call the National Cancer Helpline on 1800 200 700.

**What is exemestane?**
Exemestane is a drug used to treat breast cancer in postmenopausal women (women who no longer have their periods). This type of hormone treatment is called an aromatase inhibitor.

**How does it work?**
Hormones exist naturally in your body. They help to control the growth and activity of normal cells. Hormones, particularly oestrogen, can encourage some breast cancer cells to grow. This type of breast cancer is known as oestrogen-receptor positive. You may also see this written as ER positive. Exemestane works by lowering the amount of oestrogen in the body. As less oestrogen reaches the cancer cells, they grow more slowly or stop growing altogether.
When you reach the menopause (stop having periods), you no longer make oestrogen in your ovaries. But you still make small amounts of it in other parts of your body. For example, fatty tissue. This happens when other hormones are turned into oestrogen by an enzyme called aromatase. Exemestane works by stopping this process from taking place so that there is less oestrogen in the body.

The aim of treatment with exemestane is to reduce the risk of your breast cancer coming back.

**When is exemestane prescribed?**

Exemestane will only be prescribed if your breast cancer grows with the help of oestrogen. This is called oestrogen receptor positive. It is only suitable for you if you have been through the menopause.

Exemestane is not usually prescribed if you have osteoporosis (thinning and weakening of the bones) because of the risk of further damage to your bones.

**Early breast cancer**

Exemestane can be prescribed for postmenopausal women with early breast cancer. This is called adjuvant therapy.

Exemestane may also be prescribed as a further treatment after 5 years of tamoxifen. This is known as extended adjuvant therapy. In this case exemestane treatment should begin within 3 months of completing tamoxifen therapy.

**Advanced breast cancer**

Exemestane may be prescribed if your breast cancer comes back or progresses while you are taking tamoxifen or other hormone treatments. In this situation you will usually take the drug for as long as your breast cancer remains under control. If your breast cancer does progress while you are taking exemestane, there are other treatments that may be effective for you.

**How is exemestane taken?**

Exemestane comes as a tablet (25mg) that you take once a day, preferably after a meal. It is best to take it at the same time each day. If you miss a dose you don’t need to take a replacement dose as the drug will remain in your system from the previous day. Store exemestane tablets out of the reach of children, at room temperature, away from heat and light and moisture.

**How long will I have to take exemestane?**

This will vary from person to person. Your specialist will discuss with you how long you need to take exemestane for, as it can vary. For most patients it is given for 5 years. It may also be given after 2–3 years of exemestane, as studies have shown that switching may be better for some women. If for any reason you want to stop taking exemestane, it is important to talk to your specialist first.

helpline@irishcancer.ie
What are the side-effects of exemestane?

Everyone reacts to drugs differently and some people experience more side-effects than others. The known side-effects of exemestane are listed below. Remember that you may not get any of these. If you experience any side-effects that you are concerned about, talk to your specialist or breast care nurse.

Common side-effects:

- **Menopausal symptoms.** You may have menopausal symptoms such as hot flushes and increased sweating. You may also notice vaginal dryness. Vaginal moisturisers or lubricants can be helpful and are available without prescription from your pharmacy. You can do practical things to help yourself such as wearing cotton clothing and reducing your intake of caffeine and alcohol. Some women find complementary therapies such as acupuncture and reflexology helpful. For further information, see our factsheet Understanding and Managing Menopausal Symptoms and our booklet Understanding Cancer and Complementary Therapies.

- **Feeling sick.** You may have symptoms such as nausea and vomiting which can sometimes be helped by taking your tablet with food. If the symptoms don’t improve, talk to your specialist as there are other ways of controlling these side-effects.

- **Feeling tired and headaches.** Another common side-effect is tiredness. It is important to get enough rest. Tell your doctor about any headaches. Please call the National Cancer Helpline on 1800 200 700 for a copy of our booklet Coping with Fatigue.

- **Difficulty sleeping.** Some women find that it takes longer to get to sleep. Natural remedies can help with this. For example, lavender oil on your pillow, taking a warm bath before bedtime or having a hot milky drink before bed. Relaxation or meditation tapes or CDs can also encourage restful sleep.

- **Abdominal pain and diarrhoea or constipation.** A very small number of women have diarrhoea or constipation. If you have these problems, discuss with your doctor.

- **Joint pain and muscle aches.** Some women have aching or pain in their muscles and joints. Exercise and massage can be helpful. Tell your doctor as painkillers can be prescribed.

- **Risk of osteoporosis.** Aromatase inhibitors may cause osteoporosis (bone thinning) when taken for a long period. As a result, your specialist may wish to check your bone density (strength and thickness) and you may be started on calcium and vitamin D supplements.

- **Hair thinning.** Some women notice that their hair becomes thinner while taking exemestane. But it usually regrows when treatment has finished.

Can I take exemestane with other drugs?

Exemestane may interact with other medications. It is best not to take other drugs containing oestrogen, such as the contraceptive pill or HRT, while you are taking exemestane. Other drugs that can affect exemestane are the anti-TB drug, rifampicin, the anticonvulsants, phenytoin sodium and carbamazepine, and the herbal remedy, St John’s wort. Please tell your doctor that you are being treated with exemestane if you are prescribed any new medications.
Further support

If you have any concerns about taking exemestane you can talk to your specialist or breast care nurse. You might also find it easier to share your feelings with someone who has had a similar experience to you. Reach to Recovery is a programme set up to help and support women who have recently had a breast cancer diagnosis.

The programme works on the principle of personal contact between you and a Reach to Recovery volunteer – a woman who has had treatment for breast cancer. Carefully selected and fully trained volunteers are available to provide advice and reassurance at a time when you need them most. For more information on individual support or support groups in your area, call the National Cancer Helpline on 1800 200 700.

Useful organisations

Reach to Recovery
Provides practical and emotional support to women with breast cancer.
43/45 Northumberland Road, Dublin 4
National Cancer Helpline 1800 200 700
Email: helpline@irishcancer.ie
Website: www.cancer.ie

American Cancer Society
Website: www.cancer.org

Irish Nutrition & Dietetic Institute
Website: www.indi.ie

FURTHER INFORMATION

For more information on exemestane and breast cancer or for confidential advice from our cancer nurse specialists, call the National Cancer Helpline on freephone

1800 200 700
(Monday–Thursday, 9am–7pm; Friday, 9am–5pm) or email helpline@irishcancer.ie

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