National Surgical Adjuvant Breast and Bowel Project

NSABP was established in 1958 and has been funded since its inception by the National Cancer Institute. It is composed of 200 core centers and another 300 satellite institutions are located throughout the US, Canada and Puerto Rico. The NSABP conducts large-scale clinical trials in Breast and Colon cancer. Many of its centers are community-based institutions the significance of which is that it provides access to cutting-edge clinical trials to all patients, avoiding the added burden of patients to have to travel to large university hospitals.

The NSABP has been responsible for much of the way breast cancer is treated. Some of its most important research is highlighted below:

1. Patients treated with a radical mastectomy (removal of the entire breast, underlying chest wall muscles and all axillary Lymph nodes), which was developed by Halsted and remained the gold standard for breast cancer treatment for almost 100 years, did no better than those treated with total mastectomy (removal of only breast tissue). In 2003, the 25 year results of this study was published which confirmed the same findings as the original research presented in 1975

2. The study that begin in 1976 paved the way for breast-conserving treatment in which patients were randomized to receive modified radical mastectomy or lumpectomy with and without breast radiation. Results proved that lumpectomy plus radiation is as effective as mastectomy for breast cancer treatment

3. First to demonstrate that chemotherapy improves survival in women with early stage breast cancer

4. Demonstrated that the use of hormonal therapy, Tamoxifen, has the ability to reduce the risk of breast cancer recurrence and improve survival. Later studies have looked into effects of other hormonal therapies such as aromatase inhibitors

5. A 2005 study published in NEJM showed that Herceptin, a mono-clonal antibody directed at specific proteins, provided benefits in the treatment of aggressive forms of breast cancer. The result of this study has paved the way for a new direction in breast cancer treatment.

6. The NSABP has focused its attention to breast cancer prevention in addition to treatment. The first prevention study, the results of which were presented in 1998, showed that Tamoxifen given to healthy women who have an increased risk of developing breast cancer can reduce the incidence of the disease by about 50%.

7. STAR (Study of Tamoxifen and Raloxifene) trial, the second prevention study published in 2006 showed that Raloxifene is as effective as Tamoxifen in reducing risk of breast cancer by about 50% in post-menopausal high risk women.

A time line can be found at http://foundation.nsabp.org/milestones.asp
References:
