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Combined hormonal contraceptives (CHC) contain estrogen and progestagen which could stimulate estrogen and/or progesterone sensitive breast cancer growth, but, at the same time, they reduce the endogenous estradiol and progesterone production and the related breast stimulation. Ethinylestradiol has been since recently almost the only estrogen used, its dose has been greatly reduced and newer CHC contain estradiol. Compared with the first birth control pills, the latest CHC generations contain approximately five times less estrogen and four time less progestin. They also contain steroids that more closely mimics the physiologic ones, estradiol and progesterone, effects. The newer CHC formulations are thus expected to have a minimal or lesser influence on the breast. This is confirmed by most of the recent literature. As it is very difficult to show epidemiological breast cancer incidence differences among the recent available preparations in human studies, the in vitro studies and theoretical considerations will be discussed.