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The influence of family history, age and clinicopathologic factors on the prognosis of metastasis in primary breast cancer patients

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Objective: Family history (FH), age at diagnosis and pathologic variables are well documented risks for breast cancer (BC), but their possible prognostic impacts on clinical outcomes, i.e., metastases is uncertain.

Methods: Totally BC phenotype in 736 pedigrees ascertained through Iranian BC probands with primary breast cancer, 1994-2005. Information on FH for BC was obtained at diagnosis by interview. The independent pathologic features and age at diagnosis verified across FH status. Some potential confounding factors were adjusted for analysis of odds ratios (OR).

Results: The median age of patients was 47 year. The observed frequency of metastases were significantly high in cases younger than 45 year ( $F=5.746$ ,  $P=0.045$ ). Among patients with no FH the risk of developing the metastases were high in younger cases, 15-39 y ( $OR=1.55$ , 95%CI: 0.299-8.082). The similar trend for risk was obvious for BC patients in which lower ORs non-significantly obtained (15-39 y:  $OR=1.42$ , 95%CI: 0.099-21.562). The involved left site of BC predicted lower risk for metastasis development ( $OR=0.681$ ; 95% CI: 0.501-0.922). In FH positive patients the left sites associated positively with metastasis ( $OR=1.541$ ; 95% CI: 0.865-2.744). The same contribution was obtained for unilaterality ( $OR=2.108$ ; 95% CI: 0.597-7.452). In the cases of positive FH the tumor size predicted undesired outcomes with considerable risk ( $OR=1.5-1.23$ ). Therefore, The FH inversely associated with the developing of metastasis, whilst it is controlled, age of onset, site, tumor size and laterality predispose metastasis as undesired clinicopathological outcome and might be considered for preventive and therapeutic respects.

