

PubMed

**Format:** Abstract

Ann Intern Med. 2019 Mar 5. doi: 10.7326/M17-3085. [Epub ahead of print]

## Use of Low-Dose Aspirin and Mortality After Prostate Cancer Diagnosis: A Nationwide Cohort Study.

Skriver C<sup>1</sup>, Dehlendorff C<sup>1</sup>, Borre M<sup>2</sup>, Brasso K<sup>3</sup>, Larsen SB<sup>4</sup>, Dalton SO<sup>5</sup>, Nørgaard M<sup>2</sup>, Pottegård A<sup>6</sup>, Hallas J<sup>6</sup>, Sørensen HT<sup>2</sup>, Friis S<sup>7</sup>.

- 1 Danish Cancer Society Research Center, Copenhagen, Denmark (C.S., C.D.).
- 2 Aarhus University Hospital, Aarhus, Denmark (M.B., M.N., H.T.S.).
- 3 Copenhagen University Hospital, Copenhagen, Denmark (K.B.).
- 4 Danish Cancer Society Research Center and Copenhagen University Hospital, Copenhagen, Denmark (S.B.L.).
- 5 Danish Cancer Society Research Center, Copenhagen, Denmark and Zealand University Hospital, Næstved, Denmark (S.O.D.).
- 6 University of Southern Denmark, Odense, Denmark (A.P., J.H.).
- 7 Danish Cancer Society Research Center and University of Copenhagen, Copenhagen, Denmark, and Aarhus University Hospital, Aarhus, Denmark (S.F.).

**BACKGROUND:** Recent studies suggest that aspirin use may improve survival in patients with prostate cancer.

**OBJECTIVE:** To assess the association between postdiagnosis use of low-dose aspirin and prostate cancer mortality.

**DESIGN:** Nationwide cohort study.

**SETTING:** Denmark.

**PATIENTS:** Men with incident prostate adenocarcinoma between 2000 and 2011.

**MEASUREMENTS:** Nationwide registry data on tumor characteristics, drug use, primary prostate cancer therapy, comorbidity, and socioeconomic parameters. Postdiagnosis use of low-dose aspirin (75 to 150 mg) was defined as 2 or more prescriptions filled within 1 year after prostate cancer diagnosis. Follow-up started 1 year after prostate cancer diagnosis. In secondary analyses, low-dose aspirin use was assessed within exposure periods of 5 or 7.5 years after prostate cancer diagnosis.

**RESULTS:** Of 29 136 patients (median age, 70 years), 7633 died of prostate cancer and 5575 died of other causes during a median follow-up of 4.9 years (interquartile range, 3.1 to 7.2 years), through 2015. Postdiagnosis low-dose aspirin use was associated with adjusted hazard ratios (HRs) of 0.95 (95% CI, 0.89 to 1.01) for prostate cancer-specific mortality and 1.12 (CI, 1.05 to

1.20) for other-cause mortality. The secondary analyses showed that prostate cancer mortality was slightly reduced with low-dose aspirin use after the 5-year (HR, 0.91 [CI, 0.83 to 1.01]) and 7.5-year (HR, 0.84 [CI, 0.72 to 0.97]) postdiagnosis exposure periods, notably among patients filling prescriptions for a large quantity of low-dose aspirin tablets during the 7.5-year period.

**LIMITATIONS:** Data on over-the-counter aspirin use were unavailable. Some residual confounding was possible as a result of incomplete data on some prognostic factors.

**CONCLUSION:** The study did not support an overall effect of postdiagnosis low-dose aspirin use on prostate cancer mortality. However, results for extended exposure periods suggest that low-dose aspirin use might be inversely associated with prostate cancer mortality after 5 years from cancer diagnosis.

**PRIMARY FUNDING SOURCE:** Danish Cancer Society.

PMID: 30831581 DOI: [10.7326/M17-3085](https://doi.org/10.7326/M17-3085)

---