

Aspirin Before a Diagnosis May Lower Colorectal Cancer Mortality

The use of aspirin might help reduce colorectal cancer mortality by limiting metastatic spread of colorectal tumors before diagnosis.

February 2, 2021 By American Cancer Society

A new study finds that long-term aspirin use before a diagnosis of colorectal cancer (CRC) may be associated with lower CRC-specific mortality. The report that appears in [JNCI: The Journal of the National Cancer Institute](#), suggests that the findings for pre-diagnosis aspirin use might help reduce CRC mortality in the overall population by limiting metastatic spread of colorectal tumors before diagnosis. Preventing distant metastases leads to fewer deaths from colorectal cancer.

The study, led by Peter T. Campbell, PhD, of the American Cancer Society, used data from men and women enrolled in the American Cancer Society's Cancer Prevention Study-II (CPS-II) Nutrition Cohort who were cancer-free at the baseline (year 1992/1993) and diagnosed with CRC during follow-up through 2015. Mortality outcomes were complete through to the end of 2016.

"These findings are important because colorectal cancer patients seek guidance on lifestyle factors to improve their prognosis," said Campbell.

The study also examined the associations of pre- and post- diagnosis use of aspirin and non-aspirin nonsteroidal anti-inflammatory drugs (NSAIDs) with CRC-specific mortality among CRC survivors.

"While more evidence is needed, preferably from randomized, controlled trials, findings from this study are an important resource to inform clinicians and CRC survivors about the potential benefits and harms of aspirin and non-aspirin NSAIDs use," said Campbell.

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