Hot Flashes

Clinical summary of the ONS Guidelines[™] for cancer treatment–related hot flashes in women with breast cancer and men with prostate cancer

Marcelle Kaplan, MS, RN, CNS, Suzanne M. Mahon, DNSc, RN, AOCN®, AGN-BC, Barbara G. Lubejko, MS, RN, and Pamela K. Ginex, EdD, RN, OCN®

Cancer-related hot flashes are often a lasting and distressing side effect of hormone-blocking therapies that are most often experienced by women with breast cancer and men with prostate cancer treated with these therapies. Hot flashes have been defined as a sensation of heat that may be accompanied by facial flushing, perspiration, chills, heart palpitations, night sweats, and feelings of anxiety. The frequency and intensity of hot flashes can cause fatigue and sleep disturbances that diminish quality of life and reduce adherence with prescribed therapies that block estrogens or androgens. Hot flashes are reported to be significantly more frequent and severe in women treated for breast cancer than in women undergoing natural menopause. They also commonly occur in men treated for prostate cancer with surgical or chemical castration to block the synthesis of androgens that can fuel cancer growth.

KEYWORDS

hot flashes; breast cancer; prostate cancer; symptom management; guidelines

DIGITAL OBJECT IDENTIFIER 10.1188/20.CJON.430-433 **THIS DOCUMENT ACTS AS THE CLINICAL SUMMARY** component of the ONS Guidelines[™] for the management of hot flashes in women with breast cancer and men with prostate cancer (Kaplan et al., 2020) and the systematic review for the synthesis of evidence on the topic (Hutton et al., 2020). The ONS Guidelines have been developed by a panel of oncology healthcare professionals after a rigorous systematic review of randomized clinical trials designed to establish the evidence-based efficacy of interventions to manage hot flashes. Sources of evidence have been divided into pharmacologic and nonpharmacologic interventions. The Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) methodology approach was used to assess the certainty of the evidence and make the hot flash management recommendations that are presented in this clinical summary (Guyatt et al., 2011). The guidelines article can be found at https://bit.ly/2BqRgzd and the systematic review can be found at https://bit.ly/2XAZVrN.

Guideline Questions and Target Audience

What are the nonhormonal pharmacologic, physical/behavioral, and natural health product interventions that minimize the frequency and severity of hot flashes and their negative impact on quality of life in patients with breast or prostate cancer? The target audience for this guideline are clinicians who care for patients treated for breast or prostate cancer, policymakers, and patients and their caregivers.

How the Guideline Was Developed

This guideline was developed by an interprofessional panel of healthcare professionals, methods experts, and a patient representative. The panel prioritized clinical questions related to the management of cancer treatment–related hot flashes and patient outcomes identified as critical for decision making. A systematic review and network meta-analysis of the literature was conducted to inform the clinical questions (Hutton et al., 2020).

Why the Guideline Matters

Hot flashes are a distressing and often prolonged side effect experienced by women and men with cancer who are treated with hormone-blocking therapies or surgeries that abruptly suppress production of estrogen or testosterone. Hot flashes are reported to be much more frequent and severe in women treated for breast cancer than in women undergoing natural menopause (Carpenter, 2005; Kadakia et al., 2012). An estimated 51% to 81% of women treated for breast