Evolution of evidence on aspirin and colon cancer prevention

- **1991**
  - Rosenberg *et al.*
    - Case-control: NSAIDs and large-bowel cancer.
    - RR = 0.50

- **1994**
  - Giovannucci *et al.*
    - Observational: Aspirin and colorectal adenoma and cancer (men).
    - RR = 0.51 (total cancer)

- **1995**
  - Giovannucci *et al.*
    - Observational: Aspirin and colorectal cancer (men).
    - RR = 0.60 (men)
    - RR = 0.58 (women)

- **1997**
  - IARC
    - Working Group review: “limited evidence for the cancer-preventive activity of aspirin...”
  - Baron *et al.*
    - Randomized trial: Aspirin and colorectal adenomas.
    - RR = 0.59 (adv neoplasm)

- **2003**
  - Sandler *et al.*
    - Randomized trial: Aspirin and colorectal adenomas.
    - RR = 0.65
  - Flossman *et al.*
    - Randomized trial: Aspirin and colorectal cancer (previous cancer)
    - HR = 0.63
    - Review: “...consistent with findings from observational studies”

- **2007**
  - Rothwell *et al.*
    - Randomized trials: Aspirin and colorectal adenoma and cancer (20-year follow-up).
    - HR = 0.75

- **2010**
  - Giovannucci *et al.*
    - Observational: Aspirin and colorectal cancer (women).
    - RR = 0.56 (total cancer)

- **2011**
  - Sandler *et al.*
    - Randomized trial: Aspirin and colorectal cancer (hereditary Lynch syndrome)
    - HR = 0.41

- **2014**
  - Cuzick *et al.*
    - Data review: Overall health benefits-harms of aspirin.
    - RR = 0.73 (colorectal cancer)
    - RR = 0.94 (net overall health benefit cancer/CVD)

- **Chan and Lippman**
  - Editorial: “...prophylactic aspirin use...appears to have favourable benefit-harm profile”

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