REPORTS

tocol of the National Surgical Adjuvant Breast and Bowel Project (NSABP) (*27*) at the Jewish General Hospital, Montreal.

A nonequilibrium double-antibody radioimmunoassay, employing recombinant human IGF-I (Amgen, Thousand Oaks, Calif) and an anti-IGF-I antibody provided by the National Institute of Diabetes and Digestive and Kidney Diseases (Bethesda, Md) was used

Table 1. Patient characteristics by treatment group

Characteristic	Treatment group		*P*
	Tamoxifen	Placebo	
No. of patients	48	21	—
% postmenopausal	75.0	61.9	.27
Mean age (yr)	56.7	52.9	.14
Mean wt (kg)	69.0	64.4	.12
Mean body mass index (kg/m^3)	26.8	25.6	.42
Mean estrogen receptor levels (fmol/dL)	109.7	122.9	.58
Mean progesterone receptor levels (fmol/dL)	205.7	240.0	.67

tics (Immco, Calif) and had a value of 228

Table 2. Mean IGF-I levels by treatment and age group

Age group (yr)	Tamoxifen-treated patients		Placebo-treated patients	
	No. of patients	Mean IGF-I levels (U/mL)	No. of patients	Mean IGF-I levels (U/mL)

response to the drug emphasize tumor-related factors such as selection for estrogen receptor-negative clones during neoplastic progression. The data presented here suggest that host-related factors

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