

## Chemotherapy After Complete Surgical Removal of Local or Regional Breast Cancer Recurrence Increased Survival Rates

AACR

- Disease-free and overall survival improved with postsurgical chemotherapy.
- Patients with ER-negative breast cancers were most responsive to treatment.

SAN ANTONIO — Chemotherapy after surgery, or adjuvant chemotherapy, led to higher rates of disease-free and overall survival for women with isolated local or regional recurrence of breast cancer, according to data presented at the 2012 CTSC-AACR San Antonio Breast Cancer Symposium, held here Dec. 4-8.

Patients with isolated local and/or regional recurrence of their breast cancers are at high risk for developing metastases in other areas of the body. Some physicians administer chemotherapy to these patients after their recurrent tumors have been completely removed by surgery, but the efficacy of this treatment had not been studied until now.

“This is the first randomized controlled study that shows that adjuvant chemotherapy works in these patients,” said Stefan Aebi, M.D., head of the division of medical oncology at Luzerner Kantonsspital in Luzern, Switzerland.

He and his colleagues from the Breast International Group, the National Surgical Adjuvant Breast and Bowel Project and the International Breast Cancer Study Group evaluated 162 patients with isolated local and regional recurrence; 85 received adjuvant chemotherapy and 77 did not.

Five-year disease-free survival rates were 69 percent for women who received adjuvant chemotherapy and 57 percent for those who did not. The overall survival rate was 88 percent for women who received chemotherapy compared with 76 percent for those who did not.

Women with estrogen receptor (ER)-negative breast cancer demonstrated the greatest benefit, with a five-year disease-free survival rate of 67 percent among those who received chemotherapy versus 35 percent among those who did not. In addition, within this group, overall survival rates were 79 percent among those who received chemotherapy and 69 percent among those who did not.

For patients with ER-positive disease, five-year disease-free survival was 70 percent for those who received chemotherapy versus 69 percent for those who did not. Overall survival was 94 percent for those patients with ER-positive disease who

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received chemotherapy versus 80 percent among those who did not.

Aebi recommended that physicians prescribe adjuvant chemotherapy for patients with isolated local and regional recurrence of breast cancer, especially if the recurrence is ER-negative and therefore not sensitive to endocrine therapy.

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