Patterns of Care in Medical Oncology

Adjuvant and Neoadjuvant Therapy for Triple-Negative Breast Cancer

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Clinical Scenario 10: A woman has a 1.0-cm, ER/PR/HER2-negative IDC.

Which of the following adjuvant chemotherapy treatments, if any, would you most likely recommend for this patient if her age and nodal status were:

	Node-negative		Node-positive	
	60 years old	75 years old	60 years old	75 years old
TC	57%	54%	17%	48%
AC → taxane	31%	7%	73%	40%
AC	5%	7%	3%	5%
CMF	0%	6%	1%	3%
Other	1%	0%	5%	1%
None	6%	26%	1%	3%

Clinical Scenario 11: A woman has a 3.4-cm, ER/PR/HER2-negative, node-negative IDC (3 sentinel nodes).

Which of the following adjuvant chemotherapy treatments, if any, would you most likely recommend in this case if the patient's age was:

	60 years old	75 years old
AC → taxane	57%	18%
TC	35%	65%
AC	4%	6%
CMF	0%	5%
Other	3%	0%
None	1%	6%

BEATRICE: A Phase III study of adjuvant bevacizumab therapy in triple-negative breast cancer

Protocol ID: BO20289

Target Accrual: 2,530

Eligibility

Operable triple-negative breast cancer without clinically significant cardiac history

R

- Standard chemotherapy*
- Standard chemotherapy* + bevacizumab x 1 y

Primary Endpoint: Invasive disease-free survival

* Anthracycline ± taxane or taxane only

www.clinicaltrials.gov. Accessed March 2011.

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***Clinical Scenario 12:* A woman has a core biopsy as follows: 4-cm, ER/PR/HER2-negative, node-negative IDC (3 sentinel nodes). The patient wishes to undergo breast-conserving surgery, which will be difficult or impossible without shrinkage of the breast mass, so neoadjuvant therapy is being considered.**

Which of the following chemotherapy treatments, if any, would you most likely recommend in this case if the patient's age was:

	60 years old	75 years old
AC → taxane	69%	22%
TC	16%	59%
AC	6%	8%
CMF	0%	4%
Other	7%	1%
None	2%	6%

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Randomized Phase II 2 x 2 factorial trial of the addition of carboplatin with or without bevacizumab to neoadjuvant weekly paclitaxel followed by dose-dense AC in hormone receptor-poor/HER2-negative resectable breast cancer

Protocol ID: CALGB-40603

Target Accrual: 362

Eligibility

Stage II to III HER2-negative, ER/PR-negative or staining ≤10% by IHC

R

- P → dd AC
- P + bevacizumab → dd AC + bevacizumab
- P + Cb → dd AC
- P + Cb + bevacizumab → dd AC + bevacizumab

Primary Endpoint: Pathologic complete response

P = paclitaxel
dd AC = dose-dense doxorubicin/cyclophosphamide
Cb = carboplatin

www.clinicaltrials.gov. Accessed March 2011.

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Randomized Phase III neoadjuvant trial in triple-negative breast cancer evaluating nonanthracycline-containing chemotherapy and PARP inhibition with BSI-201 (iniparib)

Protocol ID: NSABP-B-48 (under development) **Target Accrual:** 540

Eligibility

Palpable, operable triple-negative breast cancer

R

- WP x 12 → AC x 4
- WP + BSI-201 x 4 → AC + BSI-201 x 4
- TC x 4 → CbG x 4
- TC + BSI-201 x 4 → CbG + BSI-201 x 4

Primary Endpoint: Pathologic complete response

WP = weekly paclitaxel 80 mg/m^2 IV
AC = doxorubicin 60 mg/m^2 IV + cyclophosphamide 600 mg/m^2 IV
TC = docetaxel 75 mg/m^2 IV + cyclophosphamide 600 mg/m^2 IV
CbG = carboplatin AUC of 2.0 IV + gemcitabine 1,000 mg/m^2 IV

NSABP Protocol Summaries, April 2010.

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