Pilot-trial of trastuzumab + weekly epidoxorubicin / docetaxel in the neoadjuvant treatment of primary breast cancer - preliminary results

**Sub-category:**
Adjuvant Therapy

**Category:**
Breast Cancer - Local-Regional and Adjuvant Therapy

**Meeting:**
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**Abstract:**
Weekly administration of the most active cytotoxic drugs, anthracyclines and taxanes, resulted in better tolerability and higher dose-intensity as compared with three-weekly schedules in the treatment of breast cancer. The addition of trastuzumab in HER2-positive breast cancer patients can possibly raise the response rates in the neoadjuvant as well as in the palliative treatment. This pilot trial aimed to evaluate the feasibility, toxicity, and activity of trastuzumab in combination with the weekly administration of epidoxorubicin and docetaxel in the preoperative treatment of patients with breast cancer. 9 female patients were treated with Trastuzumab (4mg/KG bodyweight loading dose, 2 mg/KG bodyweight weekly maintenance dose) followed by weekly epidoxorubicin (35 mg/m2) short i.v. infusion, followed by docetaxel (30 mg/m2) one-hour i.v. infusion once a week for 6 weeks followed by 1 week off therapy, without G-CSF support. Mastectomy had been considered the surgical treatment of choice in all cases at diagnosis. 2 courses of treatment were administered until best response was achieved by mammography and clinical assessment. The preoperative chemotherapy was well tolerated and all patients completed the treatment regimen on an outpatient basis. During 18 courses no cardiac toxicity and no WHO-grade III or IV toxicity was observed. Response to treatment was present in all patients (100%), with 2 patients (22%) experiencing a pathological complete response of the invasive tumor and 7 patients (78%) showing a partial response. The residual tumor cells of these patients with a PR were HER2 negative in 3 cases and HER2 positive in 4 patients. Thus a CR of HER2 positive tumor cells was observed in 5 patients. In 6 patients (67%) a breast-conserving surgery was possible. Outpatient trastuzumab in combination with weekly epidoxorubicin and docetaxel is safe in the neoadjuvant treatment of patients suffering from breast cancer by showing a favourable side-effect and activity profile. Thus, this regimen is promising for further trials in the neoadjuvant as well as in the palliative clinical setting.
1. Comparative value of SBR grade, hormonal receptors, KI 67, HER-2 and topo-isomerase II alpha (topo II alpha) status as predictive markers in breast cancer patients treated with neoadjuvant anthracycline-based chemotherapy

Meeting: 2002 ASCO Annual Meeting  Abstract No: 123  First Author: Marc Wilt
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2. Correlation between HER2 expression of breast cancer and response to neoadjuvant FAC chemotherapy

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3. Quantitative image analysis of HER-2 protein expression by immunohistochemistry (IHC) improves the correlation with HER-2 gene amplification by fluorescence in situ hybridization (FISH): experience with 1002 cases.

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Meeting: 2011 ASCO Annual Meeting  Abstract No: 514  First Author: G. Pfeiler
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3. Impact of HER2-targeted therapy on overall survival (OS) in patients (pts) with HER2-positive (HER2+) metastatic breast cancer (MBC).

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