

Presentations

[Alle Vortragsslides](#)

[\[GS1-01\] Landscape of the breast tumour microenvironment at single-cell resolution](#)

Swarbrick A, Wu SZ, Roden D, Al-Eryani G, et al.

The authors conclude that: *This data provides by far the most extensive insights into the cellular landscape of breast cancer and will reveal new biomarkers and opportunities for stromal- and immune-based therapy.*

[\[GS1-02\] Towards a human breast cell atlas](#)

Seth TK, Bai S, Hu M, Sei E, et al.

The authors conclude that: *These data provide a valuable reference for the*

research community and will provide new insights into how normal cell types are transformed in the tumor microenvironment to promote or inhibit the progression of breast cancer.

[\[GS1-03\] Crosstalk between osteoblasts and breast cancer cells alters breast cancer proliferation through multiple mechanisms](#)

Bussard KM, Shupp AB, Kolb AD, Mukhopdhyay D.

The authors conclude that: *Our late-breaking data suggest that OBs produce factors that suppress metastatic BCC growth. Much less attention has been given to OB interactions with tumor cells at sites of bone metastasis due to observations that OB populations are reduced at sites of advanced osteolysis. However, we propose that OBs may be valuable endogenous targets to aid in the restoration of bone deposition and suppression of metastatic BrCa growth in the niche in concert with therapeutic drugs to kill the cancer cells. Our data suggest there is a population of OBs that demonstrate a functional role in retarding metastatic BCC growth; a property capable of exploitation. Moreover, restoration of the OBs' ability to deposit new bone would lead to better quality of life and increased time of survival for bone metastatic BrCa patients where bone loss is found. For these reasons, OBs and EOs are suitable candidates for therapeutic*

*targeting and will open new avenues for
retarding the growth of BrCa bone
metastases.*

[\[GS1-04\] IMpassion130: Efficacy in
immune biomarker subgroups from the
global, randomized, double-blind, placebo-
controlled, phase III study of atezolizumab
+ nab-paclitaxel in patients with treatment-
naïve, locally advanced or metastatic triple-
negative breast cancer](#)

Emens LA, Loi S, Rugo HS, Schneeweiss
A, et al.

The authors conclude that: *Exploratory
efficacy analyses from IMpassion130
suggest consistency between local and central
ER/PR/HER2 testing and that PD-L1 IC is
the most robust predictive biomarker for
selecting untreated mTNBC pts who benefit
from A-nabPx.*

[\[GS1-05\] Apobec3 induced mutagenesis
sensitizes murine models of triple negative
breast cancer to immunotherapy by
activating B-cells and CD4+ T-cells](#)

Hollern DP, Xu N, Mott KR, He X, et al.

[\[GS1-06\] Unraveling lobular breast cancer progression and endocrine resistance mechanisms through genomic and immune characterization of matched primary and metastatic samples](#)

Desmedt C, Richard F, Majjaj S, Pingitore J, et al.

The authors conclude that: *This is to our knowledge the largest metastatic ILC series in which matched P and M samples were interrogated, revealing several genomic alterations, some of which potentially targetable, driving disease progression and endocrine resistance.*

[\[GS1-07\] The genomic landscape of 501 metastatic breast cancer patients](#)

Angus L, Wilting SM, van Riet J, Smid

M, et al.

The authors conclude that: *WGS of this unique cohort of patients with MBC shows a genetic make-up roughly similar to primary BC, but does show subtype-specific enrichment of selected driver mutations in metastatic disease. This study provides better insight into the tumor biology of MBC potentially improving management of these patients.*

[\[GS1-08\] Genomic characterisation of metastatic breast cancer](#)

Andre F, Filleron T, Ng C, Bertucci F, et al.

The authors conclude that: *the present study, based on 629 patients, identifies 11 driver gene alterations and four mutational processes enriched in HR+/Her2- metastatic breast cancers. Final results on 800 patients will be presented.*

[\[GS1-09\] GS1-09: Discussant for 1542, 502 & 1344 Peter Campbell](#)

Nikhil Wagle, MD, Dana-Farber Cancer

Institute, Boston, MA

[\[GS1-10\] Phase III study of trastuzumab
emtansine \(T-DM1\) vs trastuzumab as
adjuvant therapy in patients with
HER2-positive early breast cancer with
residual invasive disease after neoadjuvant
chemotherapy and HER2-targeted therapy
including trastuzumab: Primary results
from KATHERINE](#)

Geyer Jr. CE, Huang C-S, Mano MS, Loibl S, et al.

The authors conclude that: *Adjuvant T-DM1 substantially improved IDFS in patients with HER2-positive early breast cancer with residual disease after completion of neoadjuvant therapy.*

- These findings will be simultaneously published in the [New England Journal of Medicine](#).
- [SEE ALSO PRESS CONFERENCE PRESENTATION WITH SLIDES & Kommentar Prof. Dr. med. Sibylle Loibl, Frankfurt](#)

San Antonio - Mosaic on a pillar of streetcar station

