GENERAL SESSION 1

Alle Vortragsfolien

[GS1-01] Tucatinib vs placebo, both combined with capecitabine and trastuzumab, for patients with pretreated HER2-positive metastatic breast cancer with and without brain metastases (HER2CLIMB)

Murthy R, Loi S, Okines A, Paplomata E, et al.

The authors Anticipated
Results: Baseline demographics and disease characteristics will be presented by treatment arms. PFS, response rates, and duration of response for pts receiving tucatinib vs placebo will be reported for the first 480 pts. Common AEs and SAEs will be reported for both treatment arms in all treated pts. Secondary objectives, including PFS in pts with brain metastases and OS, may be presented if the data are sufficiently mature.

ORIGINAL ARTICLE PUBLISHED IN NEJM:

Tucatinib, Trastuzumab, and Capecitabine

for HER2-Positive Metastatic Breast Cancer

R.K. Murthy and Others

[GS1-02] Phase 3 SOPHIA study of margetuximab + chemotherapy vs trastuzumab + chemotherapy in patients with HER2+ metastatic breast cancer after prior anti-HER2 therapies: second interim overall survival analysis

Rugo HS, Im S-A, Cardoso F, Cortes J, et al.

The authors conclude that: M + chemotherapy in pts with treated HER2+ MBC improves PFS vs T. Safety was comparable. CD16A genotyping suggests a greater benefit in pts with a 158F allele. Maturing data comparing the OS of pts treated with M vs T with chemotherapy will provide important new insights in characterizing clinical activity of this regimen in pts with MBC.

[GS1-03] [Fam-] trastuzumab deruxtecan (T-DXd; DS-8201a) in subjects with HER2-positive metastatic breast cancer previously treated with T-DM1: A phase 2, multicenter, open-label study (DESTINY-Breast01)

The authors conclude that: Overall, T-DXd treatment demonstrated clinically meaningful and durable activity in a heavily pretreated patient population with HER2-positive metastatic BC. T-DXd had a generally manageable safety profile, with ILD identified as a risk warranting proactive awareness and management.

[GS1-04] Interim overall survival analysis of APHINITY (BIG 4-11): A randomized multicenter, double-blind, placebo-controlled trial comparing chemotherapy plus trastuzumab plus pertuzumab versus chemotherapy plus trastuzumab plus placebo as adjuvant therapy in patients with operable HER2-positive early breast cancer

Piccart M, Procter M, Fumagalli D, de Azambuja E, et al.

The authors conclude that: The benefit of Pin HER2+ early BC is maintained, with the greatest benefit continuing to be observed in the node positive population. With longer follow-up, the benefit of P no longer appears to depend on HR status.

Continued follow up of patients is very important to determine possible benefit for OS. A calendar-driven third interim OS analysis is planned in 2.5 years, and the event-driven final OS analysis is planned when 640 deaths have occurred.

[GS1-05] TBCRC 033: A randomized phase II study of adjuvant trastuzumab emtansine (T-DM1) vs paclitaxel (T) in combination with trastuzumab (H) for stage I HER2-positive breast cancer (BC) (ATEMPT)

Tolaney SM, Trippa L, Barry W, Hu J, et al.

The authors conclude that: This represents the first report of pts receiving T-DM1 monotherapy as adjuvant treatment for Stage I HER2+ BC. The regimen was associated with very few recurrences in the study population. T-DM1 was associated with significantly fewer CRT than TH, but did not meet the preplanned 40% relative reduction in toxicity. Updated efficacy data will be presented.

[GS1-06] Discussant

Jo Chien, MD Helen Diller Family Comprehensive Cancer Center San Francisco, CA

There is no abstract associated with this presentation.

[GS1-07] Effects of capecitabine as part of neo-/adjuvant chemotherapy. A meta-analysis of individual patient data from 12 randomized trials including 15,457 patients

van Mackelenberg M, Seither F, Möbus V, O'Shaugnessy J, et al.

The authors conclude that: Capecitabine did not alter DFS in this meta-analysis of 15,457 patients with early breast cancer from 12 prospective randomized trials, but as addition to systemic treatment DFS was improved. Subgroup analyses are needed for final interpretation and will be presented at the meeting.

[GS1-08] Adjuvant capecitabine in combination with docetaxel and cyclophosphamide plus epirubicin for triple-negative breast cancer (cbcsg010): An open-label, randomised, multicentre, phase 3 trial

Li J, Yu K, Pang D, Wang C, et al.

[GS1-09] Addition of S-1 to endocrine therapy in the post-operative adjuvant treatment of hormone receptor-positive and human epidermal growth factor receptor 2-negative primary breast cancer: A multicenter, open-label, phase 3 randomized trial (POTENT trial)

Toi M, Imoto S, Ishida T, Ito Y, et al.

The authors conclude that: The postoperative adjuvant use of an oral fluoropyrimidine S-1 significantly reducediDFS events and improved 5-year iDFS estimate in PBC patients having HR-positive and HER2-negative disease, in the combination with standard endocrine therapy, with a feasible safety profile.

[GS1-10] Discussant

Priyanka Sharma, MD University of Kansas Medical Center Westwood, KS

There is no abstract associated with this presentation.

San Antonio - Mosaic on a pillar of streetcar station

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