

2014 PBCC

Metastatic Breast Ca

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Let's talk about you

- Average woman in this country
- Risk of getting breast cancer
- How about the risk of that cancer recurring?
- That risk is tied to initial stage
.... and associated risk factors

numbers

- About ½ of women presenting with breast cancer will have stage 1 disease
- About ½ of women will have stage 2
- About 70% will have ER/PR pos cancers.
- About 20% will have HER 2 pos cancers.

numbers

- Stage 1 ER positive breast cancer 57yo
 - no additional therapy: DFS 71
 - with adjuvant therapy: DFS 90
- Stage 2 ER positive 57 yo
 - no additional therapy, DFS 60
 - with adjuvant therapy, DFS 76
- 10 year numbers; DFS=disease free survival

numbers

- Stage 1 ER neg
 - no therapy 70
 - adjuvant therapy 84
- Stage 2 ER neg
 - no therapy 55
 - adjuvant therapy 75

When does a recurrence happen?

Average:

ER positive: longer

ER negative: shorter

Your cancer is back.

What does it mean?

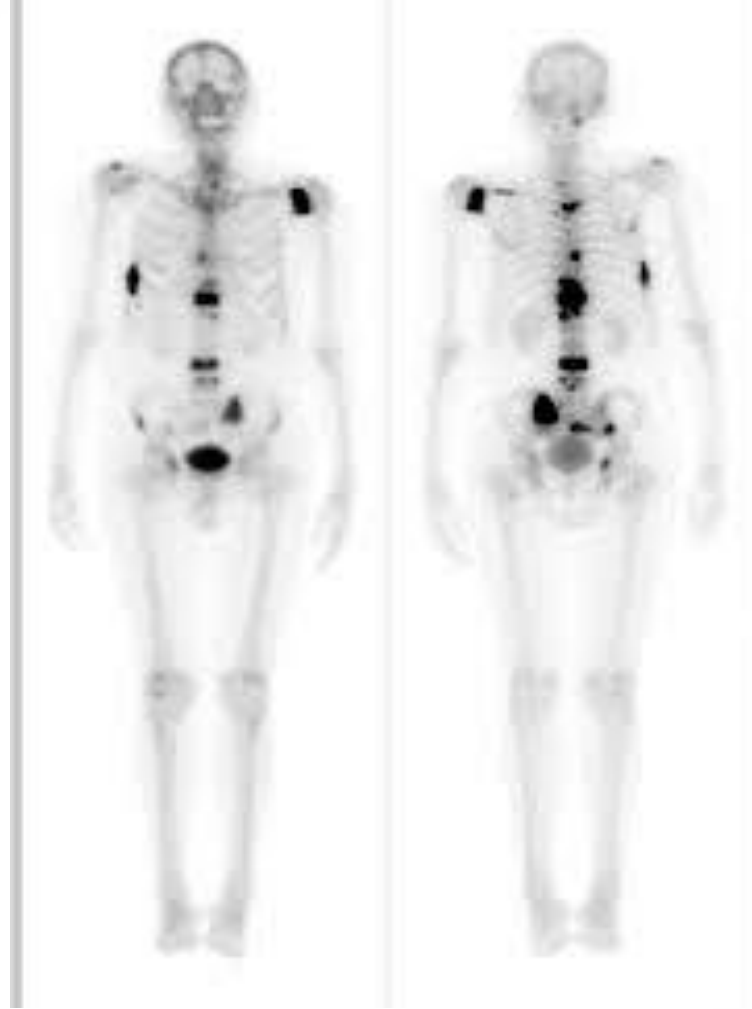
- What does it mean to say that you have metastatic breast cancer?
- How long will you live?
- How well will you live?
- What kind of therapy?
- What is the chance of cure?

Metastatic Breast Cancer

- Local
- Distant
 - bones
 - lung
 - liver
 - brain
 - other
 - combination

What does metastatic disease
look like?









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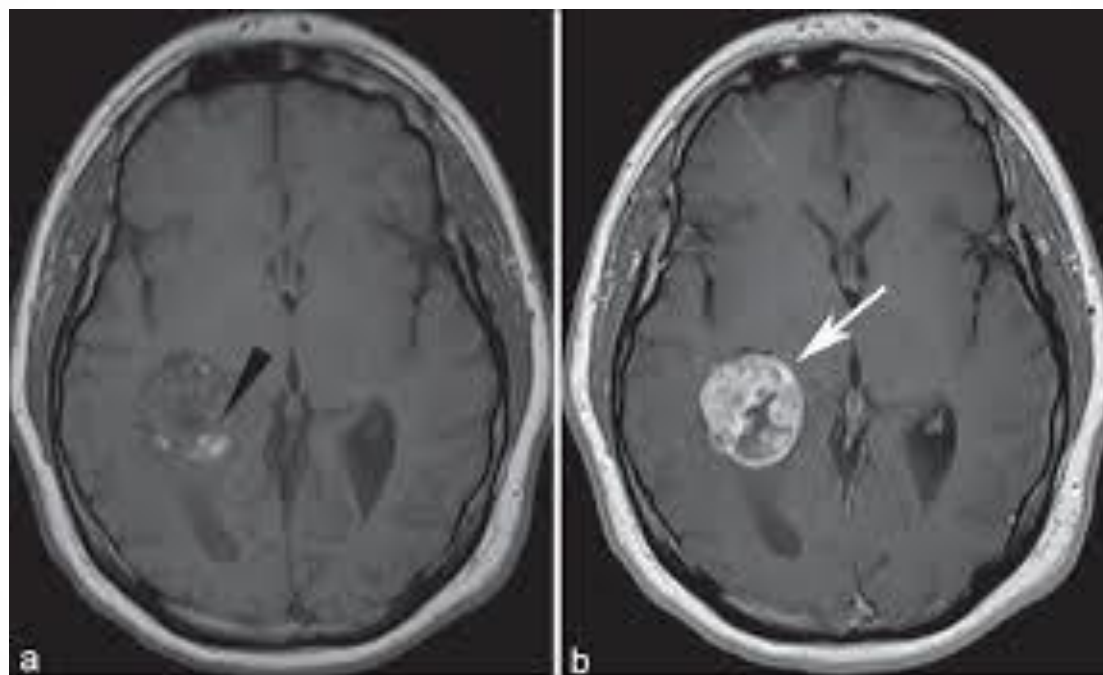
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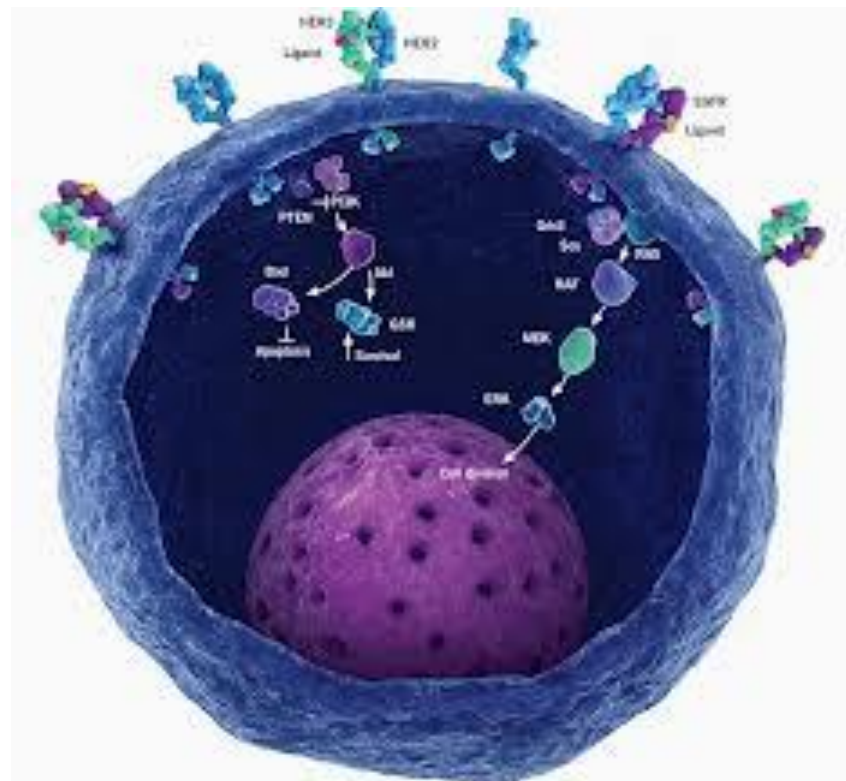
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What about
therapy?

Therapy

- Local Therapy: Surgery
 Radiation
- Systemic Therapy Chemotherapy
 Antiestrogen therapy
 Bone Strengtheners
 Targeted Therapy

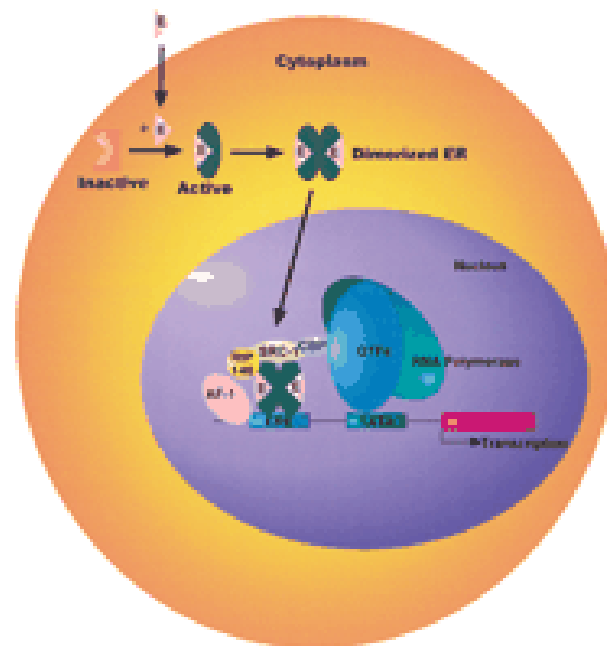


What's new

- Antiestrogen Therapy?
- HER 2 positive therapy?
- Therapy for triple negative breast cancer?
- What else?

ER positive CA

- Antiestrogens - Tamoxifen and other SERMS
- Aromatase Inhibitors - anastrozole, letrozole, exemestane
- Fulvestrant



Newer

- Adding everolimus to aromatase inhibitors
- Bolero Study
 - 725 women on AI, progressed
 - 1 exemestane
 - 2 exemestane and everolimus

BENEFIT

5 months of PRF

HER 2 pos CA?

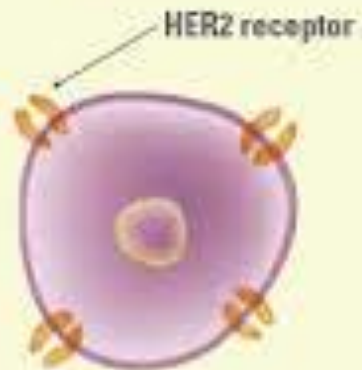
Traztuzumab

Lapatinib

Traztuzumab/emtansine - Kadcyła
conjugate

Pertuzumab

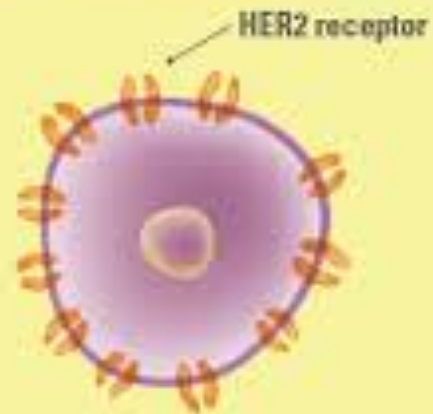
NORMAL CELL



Normal amount of HER2

- Cells grow and divide normally

HER2-POSITIVE CANCER CELL



Too much HER2

- Cells grow and divide faster

HER2-normal breast cancer cell



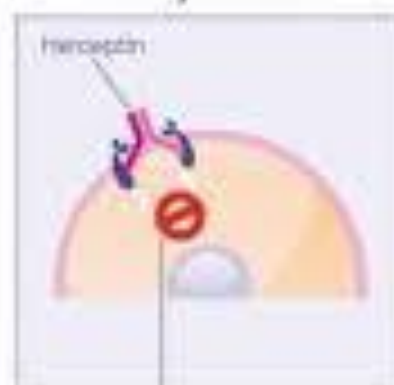
HER2 receptors send signals telling cells to grow and divide

HER2+ breast cancer cell



Too many HER2 receptors send more signals, causing cells to grow too quickly

How Herceptin may work



Herceptin may stop the HER2 receptors from signaling the cell to grow

HER 2 therapy

- Blocks HER 2
- Approved 2012 – but not for all patients
- New Results last month for metastatic breast cancer
- 808 women
- chemo/trastuzumab/pertuzumab

chemo/trastuzumab/placebo

with 56 months without 41

Triple Neg breast CA?

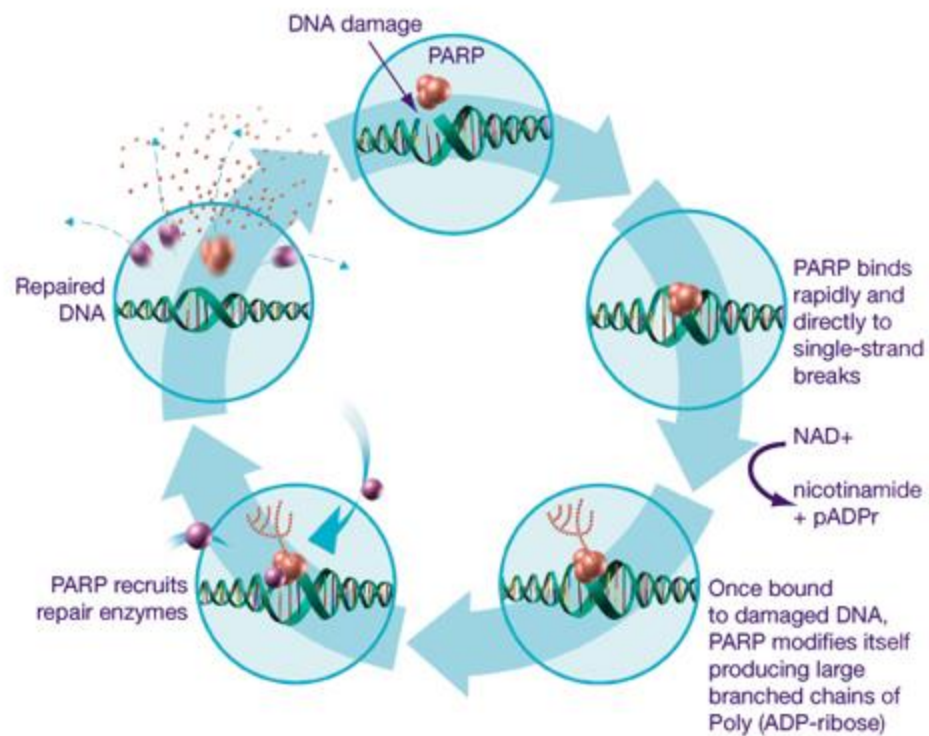
- Triple negative ER neg/ PR neg/ HER 2 neg
- So we can't use antiestrogens or anti HER 2 agents
- Chemotherapy

Triple Neg

- Recent trial
- 450 woman stage 2 or stage 3
-
- 1 Cytoxan/Adria/ Taxol
- 2 AC T plus carboplatin
- 3 AC T plus Avastin
- Neoadjuvant therapy – What?

Whatever?

- Whatever happened to PARP inhibitors?
- PARP is “a correction enzyme”
- Showing promise in patients with BRCA
- Jury still out for TNC



What else?

- PD and PDL therapy



Let's Cure this disease...

so our daughters won't
have to



You are not alone.

Thank you