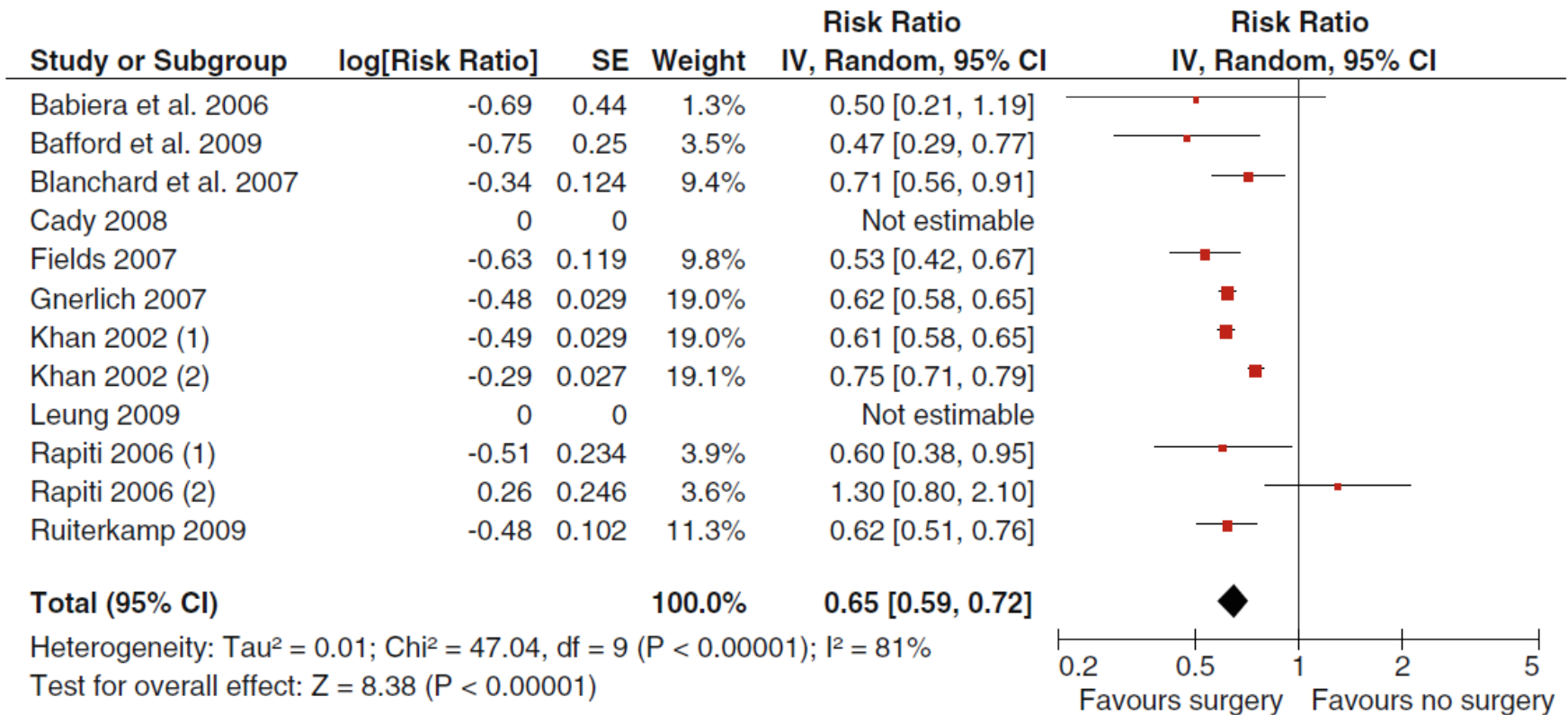


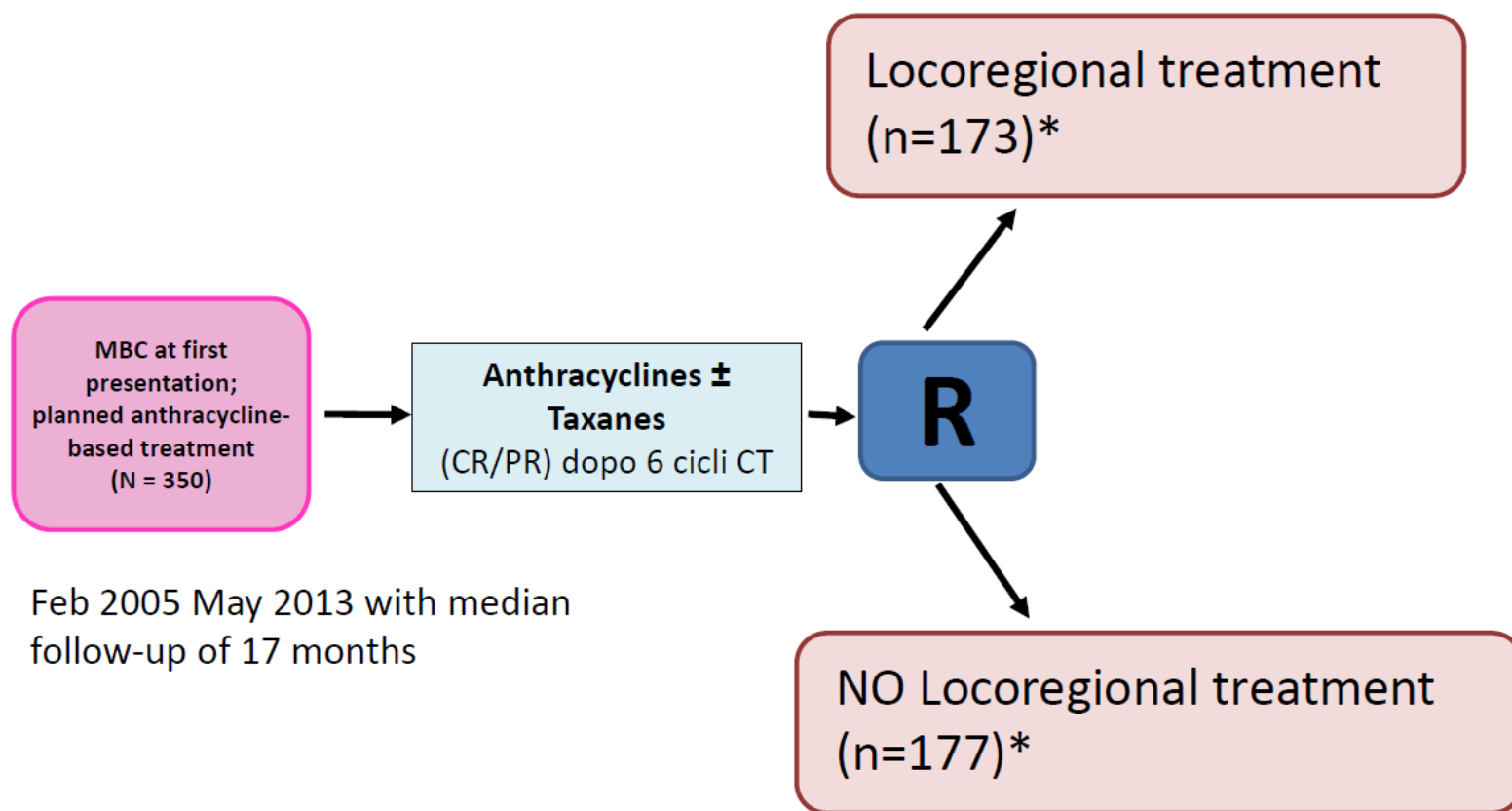


Il trattamento chirurgico del tumore primitivo in stadio IV d'esordio

Pooled analysis of retrospective studies



Randomized trial



Feb 2005 May 2013 with median follow-up of 17 months

Badwe et al Lancet Oncol 2015; 16: 1380–88

Surgical outcomes

	Locoregional treatment group (n=173)	No locoregional treatment (n=177)
Surgery		
Modified radical mastectomy	125 (72%)	1 (1%)
Breast-conserving surgery	40 (23%)	NA
No surgery	8 (5%)	176 (99%)
Palliative surgery upon progression	1 (1%)	18 (10%)
Radiotherapy		
Chest wall and breast with supraclavicular fossa	119 (69%)	NA
Chest wall alone	19 (11%)	NA
No radiotherapy	8 (5%)	NA
Not known	27 (16%)	..
NA=not done.		
Table 4: Details of locoregional treatment		

Overall survival

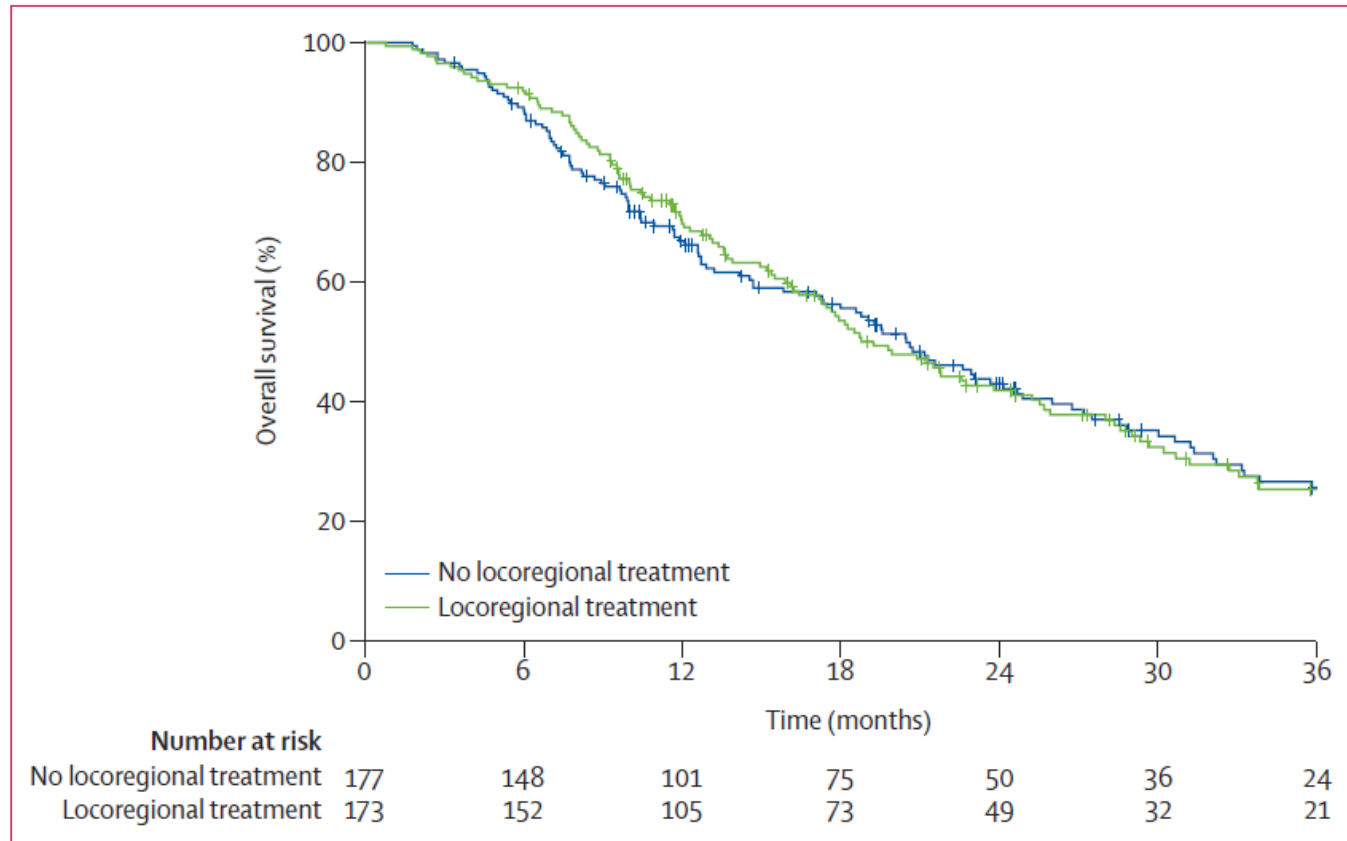
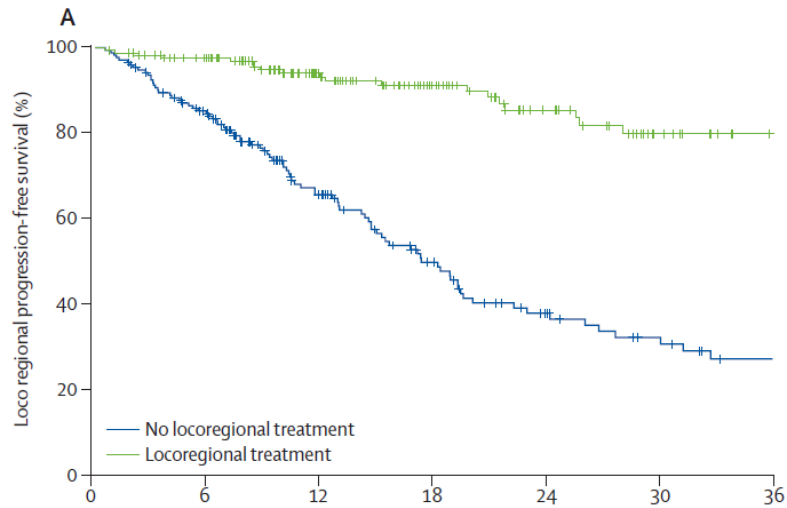


Figure 2: Kaplan-Meier plot of overall survival

Other outcomes

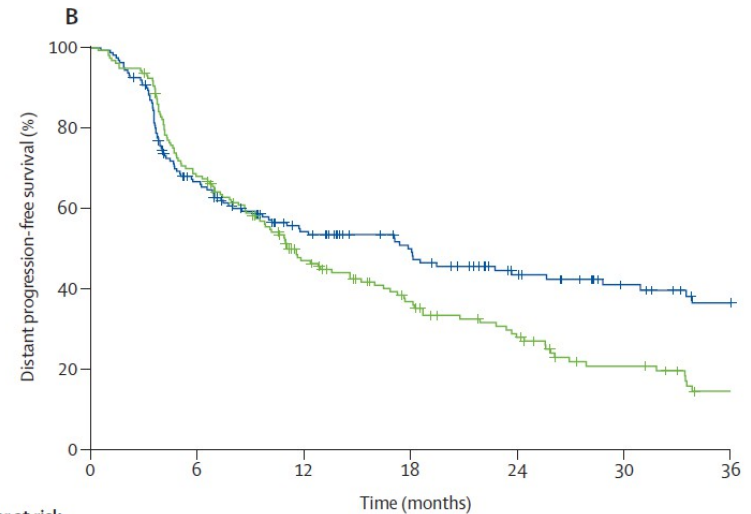
Locoregional PFS



Number at risk

	0	6	12	18	24	30	36
No locoregional treatment	177	123	75	46	28	20	13
Locoregional treatment	173	134	91	65	45	28	20

Distant DFS

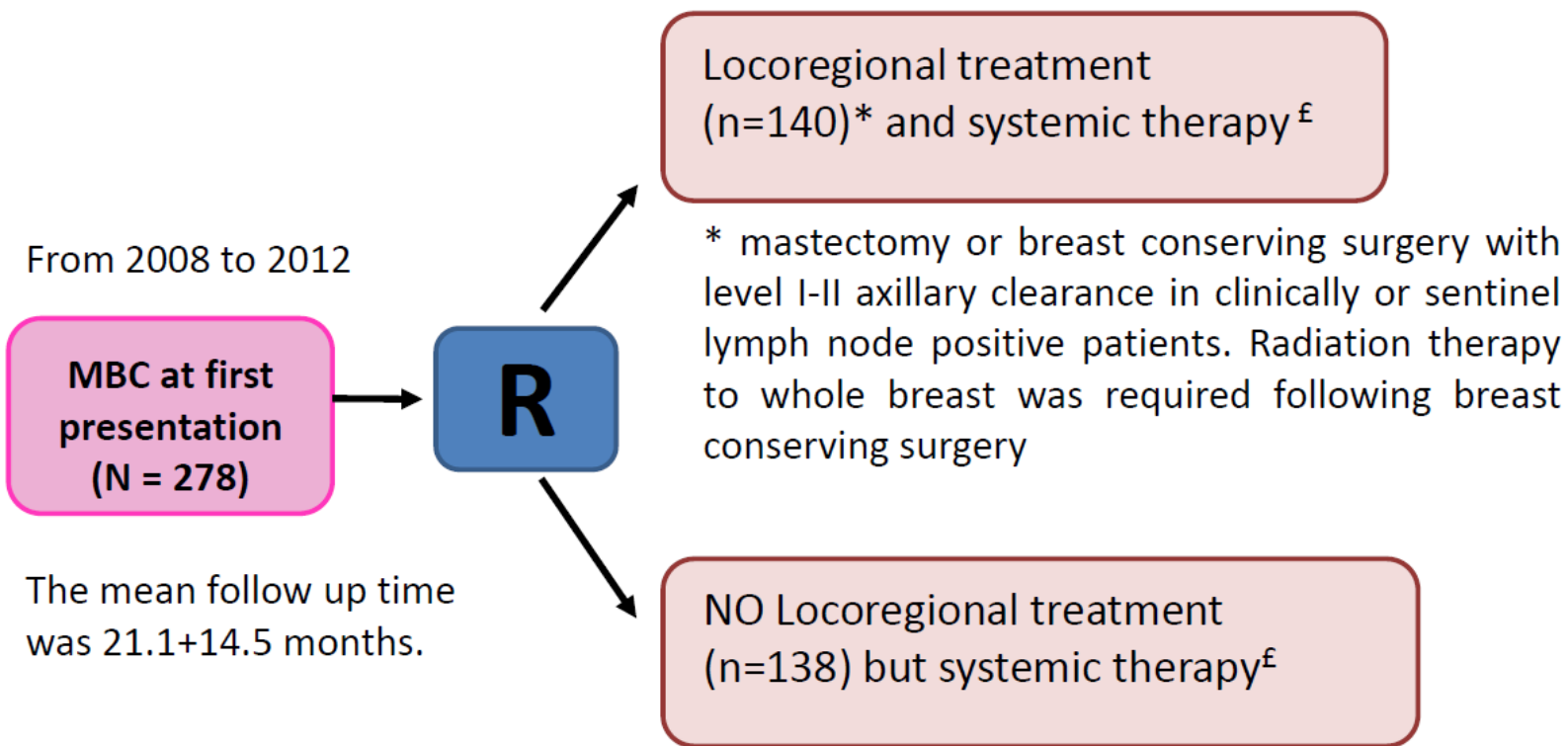


Number at risk

	0	6	12	18	24	30	36
No locoregional treatment	177	103	74	53	38	27	17
Locoregional treatment	173	108	66	44	26	18	12



Turkish Study



[£] systemic therapy of either endocrine treatment or chemotherapy (plus trastuzumab for HER2 +) was given to all patients

What type of surgery?

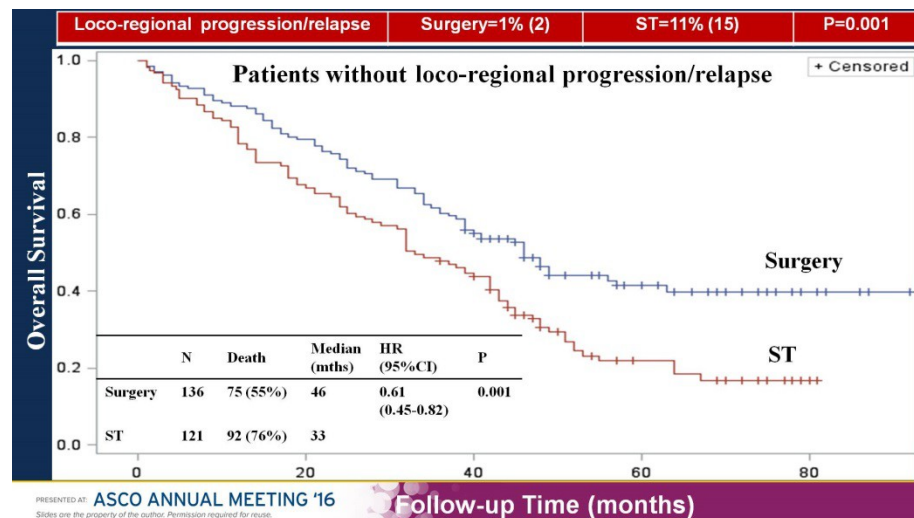
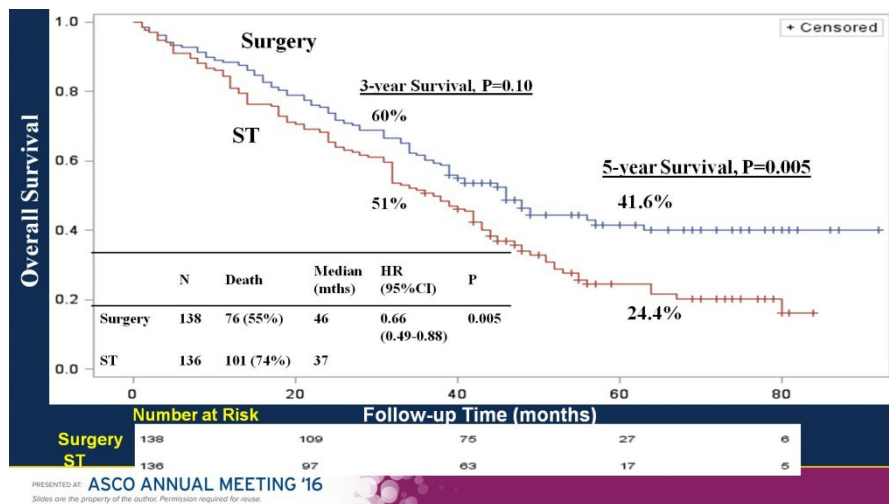
Methods

- Patients undergo surgery comprising BCS or Mastectomy according to patient and treating physician preference/ disease extension
- Axillary clearance in clinically/biopsy or SLN (+) patients.
- Free surgical margins must be achieved
- WBRT in woman undergoing BCS
- Post mastectomy RT based on disease extension and institutional practice
- Metastatic site biopsy at discretion of investigator

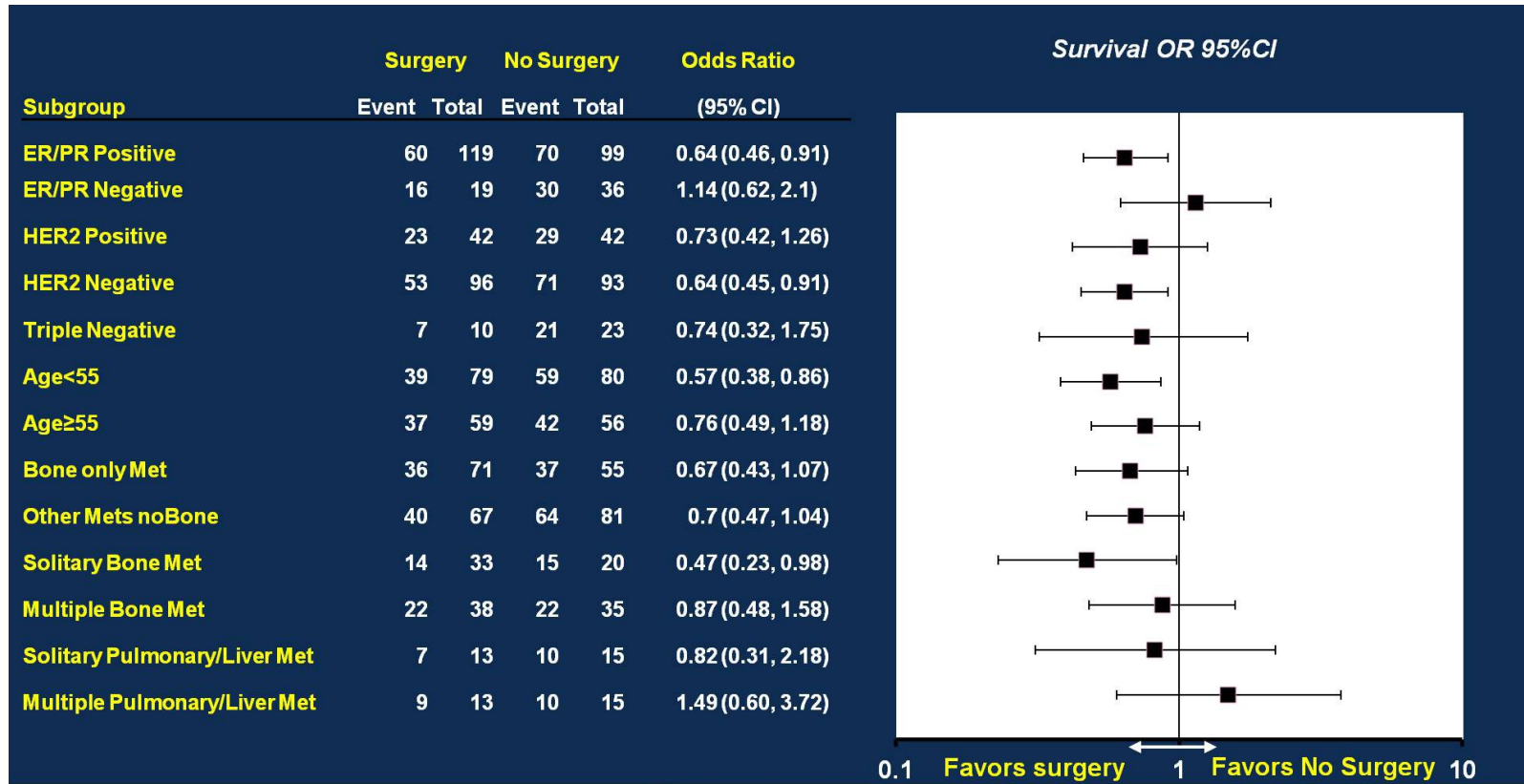
PRESENTED AT: **ASCO ANNUAL MEETING '16**

Slides are the property of the author. Permission required for reuse.

Overall survival and PFS



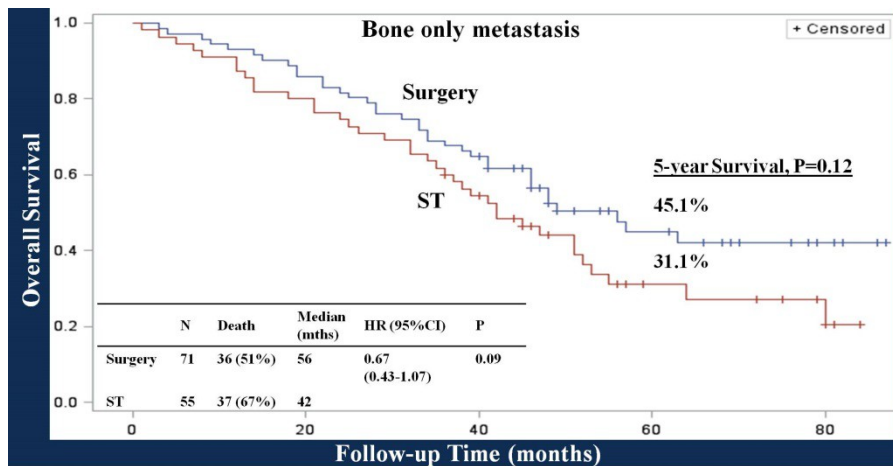
OS in subgroups



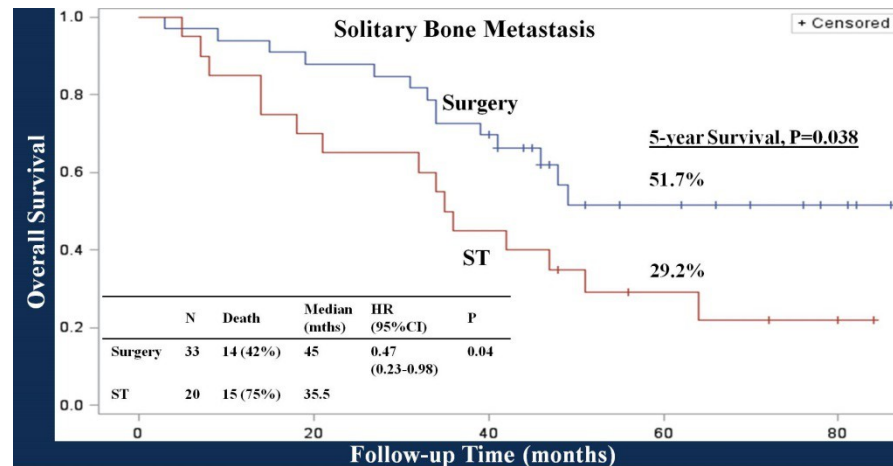
PRESENTED AT: **ASCO ANNUAL MEETING '16**
 Slides are the property of the author. Permission required for reuse.



OS in patients with bone-only disease



PRESENTED AT: ASCO ANNUAL MEETING '16
 Slides are the property of the author. Permission required for reuse.



PRESENTED AT: ASCO ANNUAL MEETING '16
 Slides are the property of the author. Permission required for reuse.



Patients demographics: 1

	LR Surgery % (n=138)	Systemic Tx % (n=136)
Age (mean,years±SD)	51.8 ±12.6	51.5±13.6
BMI (Kg/m ² mean±SD)	27.6±5.2	27.8±6.0
Mean follow-up (Mths, mean±SD)	40.5±22.0	35.8±21.7
Median follow-up (25%,75%)	41.0 (24,54)	37 (18,49)
Tumor Size (%)		
T1	8.7 (12)	8.1 (11)
T2	52.2 (72)	42.7 (58)
T3	21.7 (30)	22.1 (30)
T4	17.4 (24)	27.2 (37)
Histology Grade (%)		
Grade I	4.4 (6)	9.6 (10)
Grade II	39.9 (55)	31.7 (33)
Grade III	55.8 (77)	58.9 (61)
Tumor Type (%)		
Invasive ductal	79.7 (110)	84.5 (115)
Invasive lobular	10.9 (15)	9.6 (13)
*ER/PR (+)(%)	86.2 (119)	73 (99)
Her 2 (+)(%)	30.4 (42)	31.1 (42)
*Triple (-)(%)	7.3 (10)	17.4 (23)

Patients demographics: 2

Therapy (%)	LR Surgery % (n=138)	Systemic Tx % (n=136)	P
BCS+ Axillary evaluation	26 (36)	-	NA
M+ Axillary evaluation	74 (102)	-	NA
SLNB	17 (23)	-	NA
ALND	92.8 (128)	-	NA
Positive LN	89.1 (123)	-	NA
30 day mortality	1.4 (2)	1.5 (2)	0.98
Surgery/RT to met site	25 (35)	35 (48)	0.07
CT start after surgery (days)	27.1±9.9	-	NA
Antracycline based CT	92.0 (127)	89 (120)	0.38
Bisphosphonates	26.8 (37)	23.5 (32)	0.53
Metastasis Site (%)			
Bone only	51 (71)	40 (55)	0.17
Bone + others	24 (33)	27 (37)	
Others (No Bone)	25 (34)	32 (44)	
Solitary Bone	34 (33)	24 (20)	0.71
Multiple Bone	39 (38)	41 (35)	
Solitary Pulmonary or Liver	13 (13)	18 (15)	
Multiple Pulmonary or Liver	13 (13)	18 (15)	

Ongoing Clinical Trials

Prospective Randomized Trials Examining the Role of Local-Regional Treatment in Stage IV disease

Study	Accrual Period	Accrual Goal	Systemic Treatment Before Randomization	Status
India	2005-12	350	Yes	<i>Closed</i>
Turkey	2008-12	271	No	<i>Closed</i>
Danish	2011-16	516	No	<i>Closed</i>
USA, Canada	2011-15	368	Yes	<i>Closed</i>
Japan	2011-16	500	Yes	Open
Austria	2010-19	254	No → Yes	Open

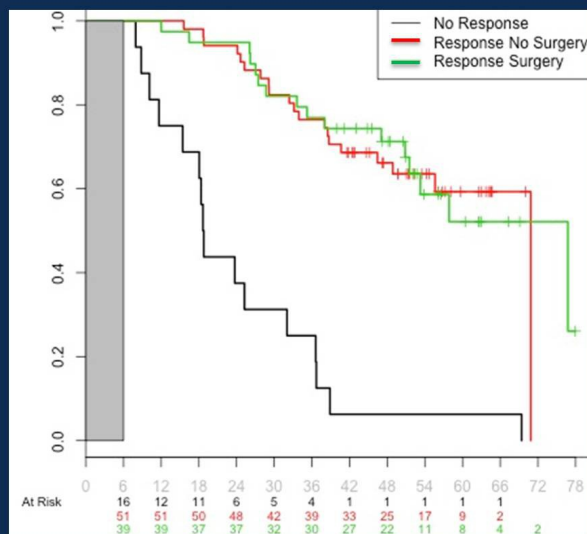
PRESENTED AT: **ASCO ANNUAL MEETING '16**

Slides are the property of the author. Permission required for reuse.

TBRC 013: prospective registry

Multivariate Analysis: Survival

Stepwise Cox regression: including age, size, ECOG, HR, Her2, tumor grade, response and surgery



	N	Median Survival, mos	30 mos survival (95%CI)
Non-Responders	16	13 mos (9-31)	24% (10-55)
Responders, No Surgery (red)	51	65 mos (50-NR)	76% (66-89)
Responders, Surgery (green)	39	71 mos (46-NR)	77% (65-91)

PRESENTED AT: **ASCO ANNUAL MEETING '16**

Slides are the property of the author. Permission required for reuse.

Presented by:



Chirurgia elettiva del tumore primario

- Possiamo individuare dei criteri che, se soddisfatti, ci fanno propendere per la chirurgia?