Guidelines Breast
Version 2018.1D

Chemotherapie mit oder ohne zielgerichtete Substanzen* beim metastasierten Mammakarzinom

FORSCHEN
LEHREN
HEILEN

* Es werden nur Substanzen mit publizierten Studienergebnissen basierend auf zumindest einer publizierten Studie Phase III oder IIb berücksichtigt.

International consensus

1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259

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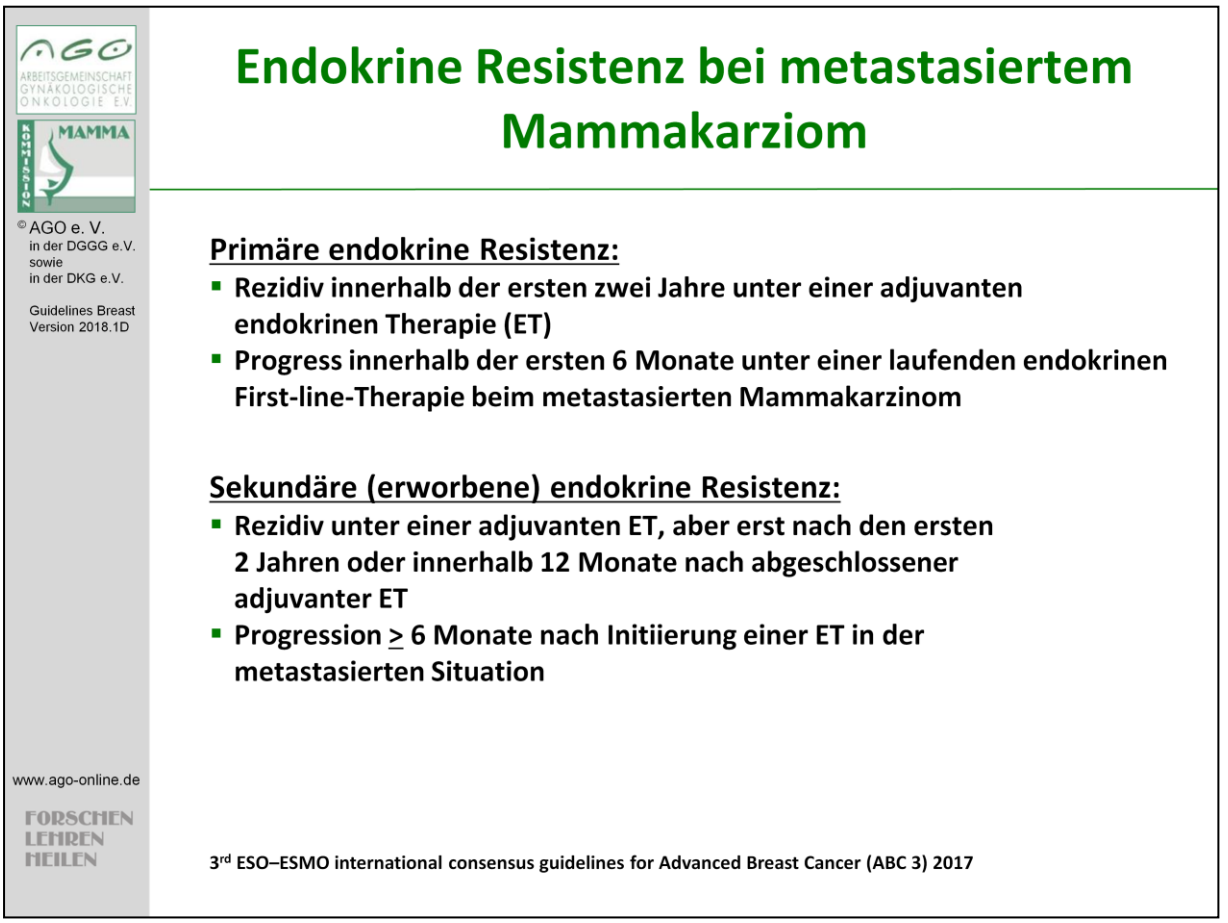
1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259

Increase

1. Petrelli F, Barni S. Surrogate endpoints in metastatic breast cancer treated with targeted therapies: an analysis of the first-line phase III trials. Med Oncol. 2014;31:776.

Multiple lines

1. Qi WX, Tang LN, He AN, et al. Comparison between doublet agents versus single agent in metastatic breast cancer patients previously treated with an anthracycline and a taxane: a meta-analysis of four phase III trials. Breast. 2013;22:314-9.



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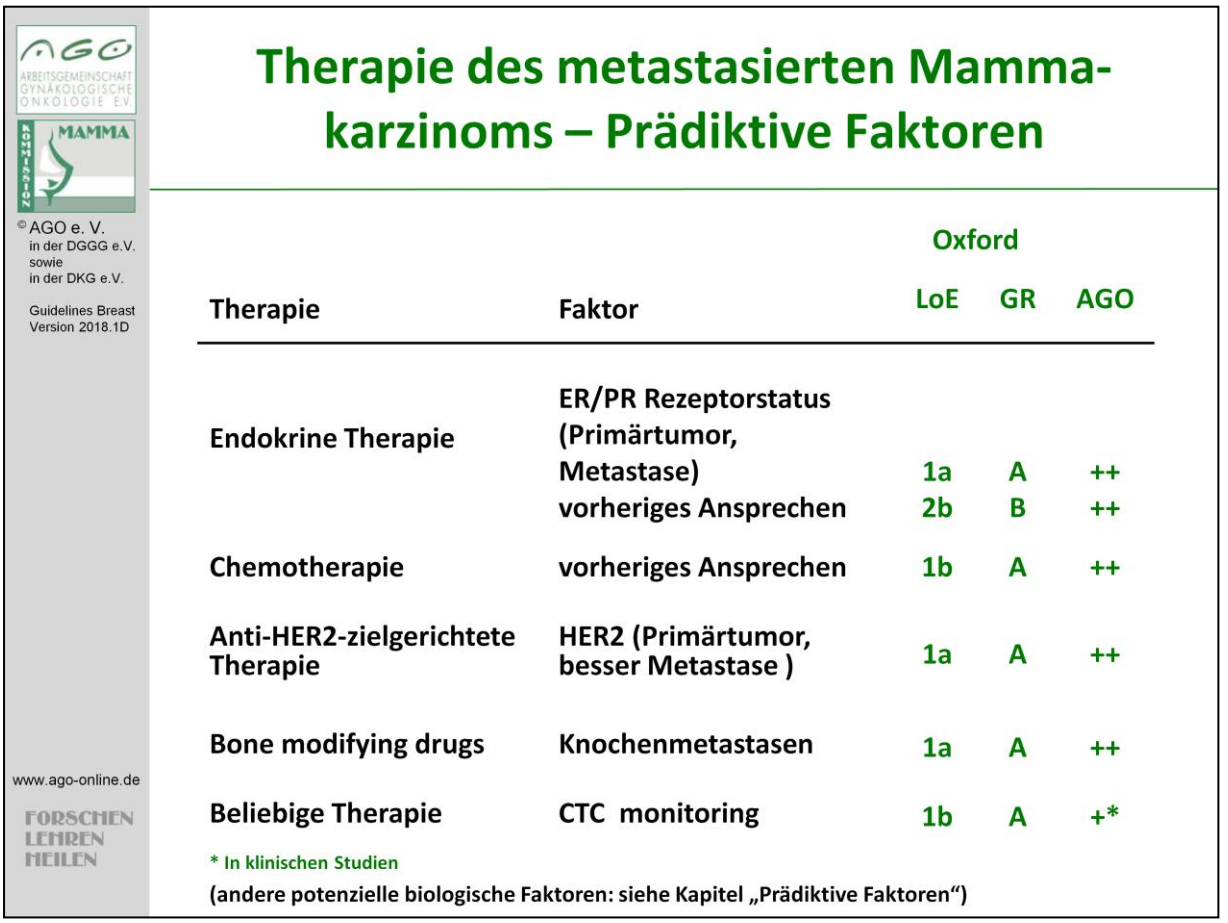


Therapie des metastasierten Mammakarzinoms – Prädiktive Faktoren

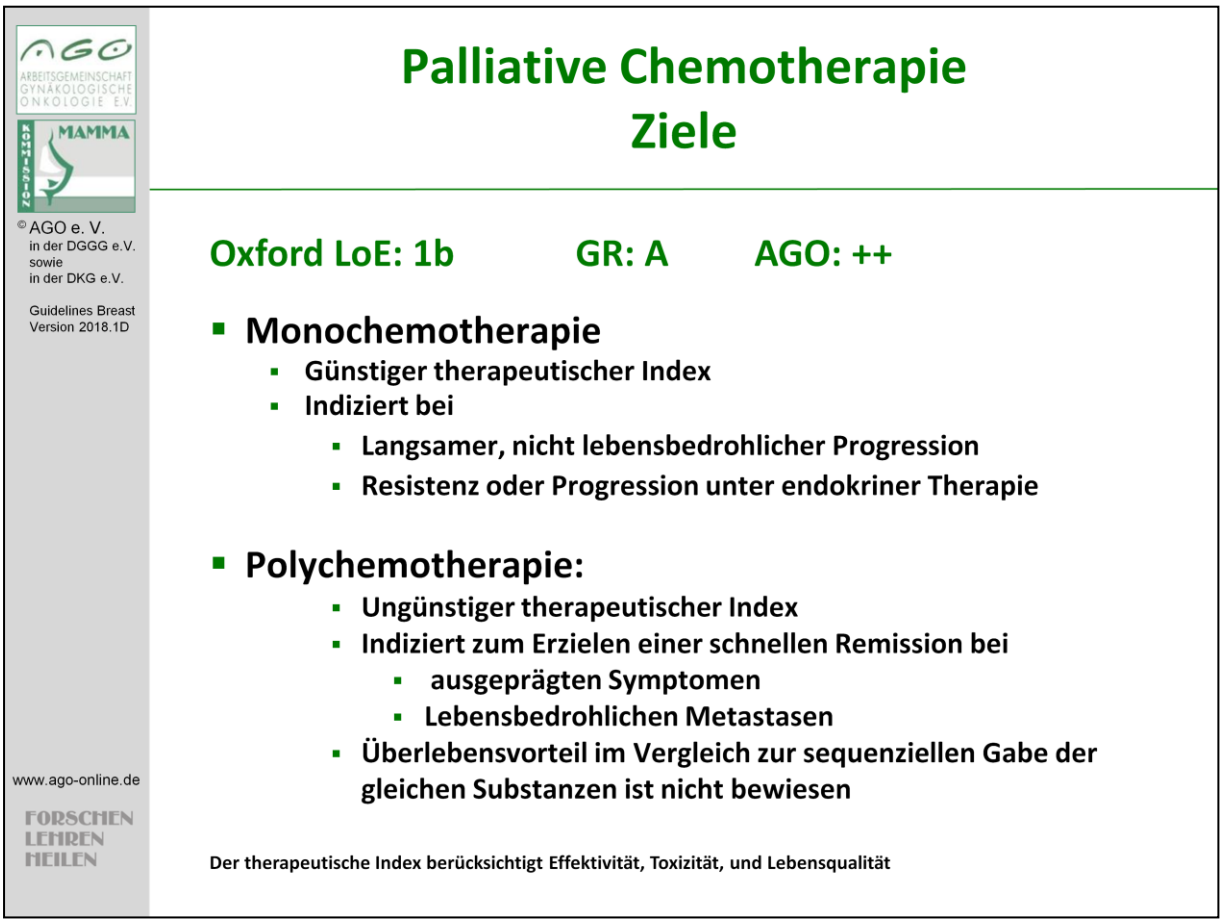
Therapie	Faktor	Oxford LoE	Oxford GR	AGO
Endokrine Therapie	ER/PR Rezeptorstatus (Primärtumor, Metastase)	1a	A	++
	vorheriges Ansprechen	2b	B	++
Chemotherapie	vorheriges Ansprechen	1b	A	++
Anti-HER2-zielgerichtete Therapie	HER2 (Primärtumor, besser Metastase)	1a	A	++
Bone modifying drugs	Knochenmetastasen	1a	A	++
Beliebige Therapie	CTC monitoring	1b	A	+*

* In klinischen Studien

(andere potenzielle biologische Faktoren: siehe Kapitel „Prädiktive Faktoren“)

CTC monitoring

1. Bidard FC, Peeters DJ, Fehm T, et al. Clinical validity of circulating tumour cells in patients with metastatic breast cancer: a pooled analysis of individual patient data. Lancet Oncol. 2014;15:406-14.
2. Smerage JB, Barlow WE, Hortobagyi GN, et al. Circulating tumor cells and response to chemotherapy in metastatic breast cancer: SWOG S0500. J Clin Oncol. 2014;32(31):3483-9.



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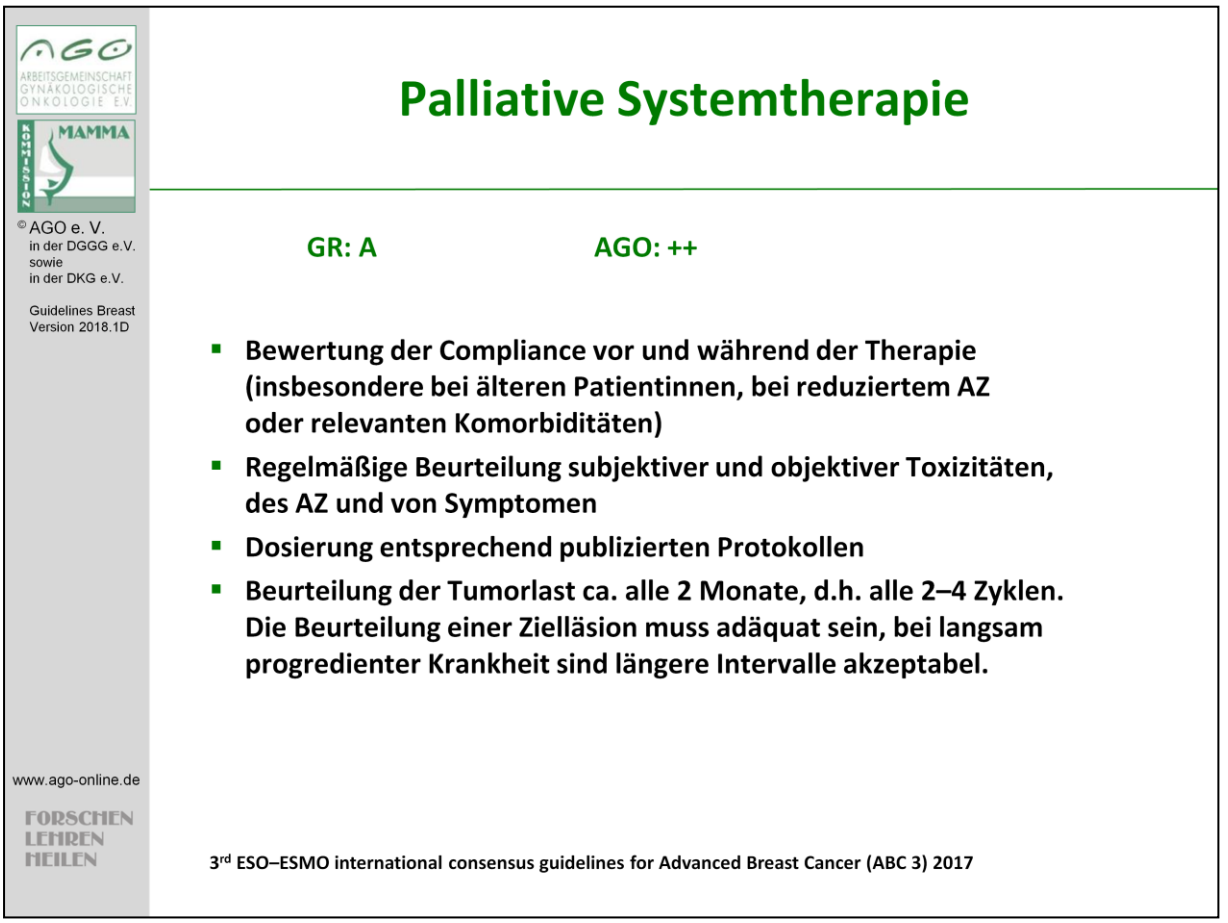
1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Combination vs single agent

1. Qi WX, Tang LN, He AN, et al. Comparison between doublet agents versus single agent in metastatic breast cancer patients previously treated with an anthracycline and a taxane: A meta-analysis of four phase III trials. Breast. 2013;22(3):314-9;
2. Belfiglio M, Fanizza C, Tinari N, et al. Consorzio Interuniversitario Nazionale per la Bio-Oncologia (CINBO). Meta-analysis of phase III trials of docetaxel alone or in combination with chemotherapy in metastatic breast cancer. J Cancer Res Clin Oncol. 2012;138(2):221-9.
3. Pallis AG, Boukovinas I, Ardavanis A, et al. A multicenter randomized phase III trial of vinorelbine/gemcitabine doublet versus capecitabine monotherapy in anthracycline- and taxane-pretreated women with metastatic breast cancer. Ann Oncol. 2012;23(5):1164-9.

Cochrane analysis

1. Dear RF, McGeechan K, Jenkins MC, et al. Combination versus sequential single agent chemotherapy for metastatic breast cancer. Cochrane Database Syst Rev. 2013 Dec 18;(12):CD008792. doi: 10.1002/14651858.CD008792.pub



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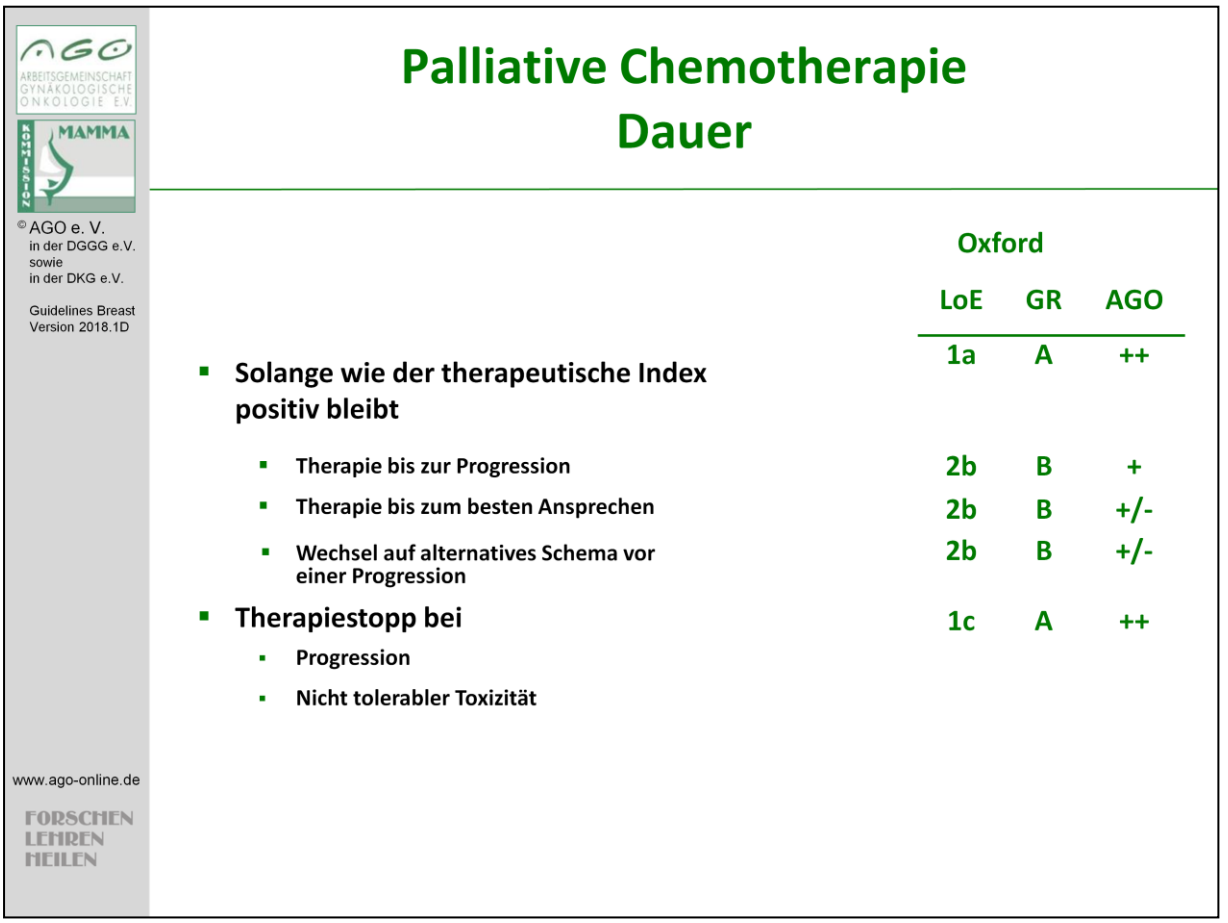
1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;



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1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Change to alternative regimen before progression

1. Gligorov J, Doval D, Bines J, et al. Maintenance capecitabine and bevacizumab versus bevacizumab alone after initial first-line bevacizumab and docetaxel for patients with HER2-negative metastatic breast cancer (IMELDA): a randomised, open-label, phase 3 trial. Lancet Oncol. 2014;15:1351-60.
2. Mustacchi G, Bines J, Alba E, et al. Impact of post-progression therapy on overall survival (OS) in the IMELDA randomized phase III trial evaluating the addition of capecitabine (CAP) to maintenance bevacizumab (BEV) for HER2-negative metastatic breast cancer (mBC) San Antonio Breast Cancer Conference 2016 Abstract P5-15-06

Treatment until progression

1. Gennari A, Stockler M, Puntoni M, et al. Duration of chemotherapy for metastatic breast cancer: a systematic review and meta-analysis of randomized clinical trials. J Clin Oncol. 2011;29:2144-9.
2. Alba E, Ruiz-Borrego M, Margelí M, et al. Maintenance treatment with pegylated liposomal doxorubicin versus observation following induction chemotherapy for metastatic breast cancer: GEICAM 2001-01 study. Breast Cancer Res Treat.

2010;122(1):169-76

3. Park YH, Jung KH, Im SA, et al. Phase III, multicenter, randomized trial of maintenance chemotherapy versus observation in patients with metastatic breast cancer after achieving disease control with six cycles of gemcitabine plus paclitaxel as first-line chemotherapy: KCSG-BR07-02. J Clin Oncol. 2013;31(14):1732-9.

International consensus

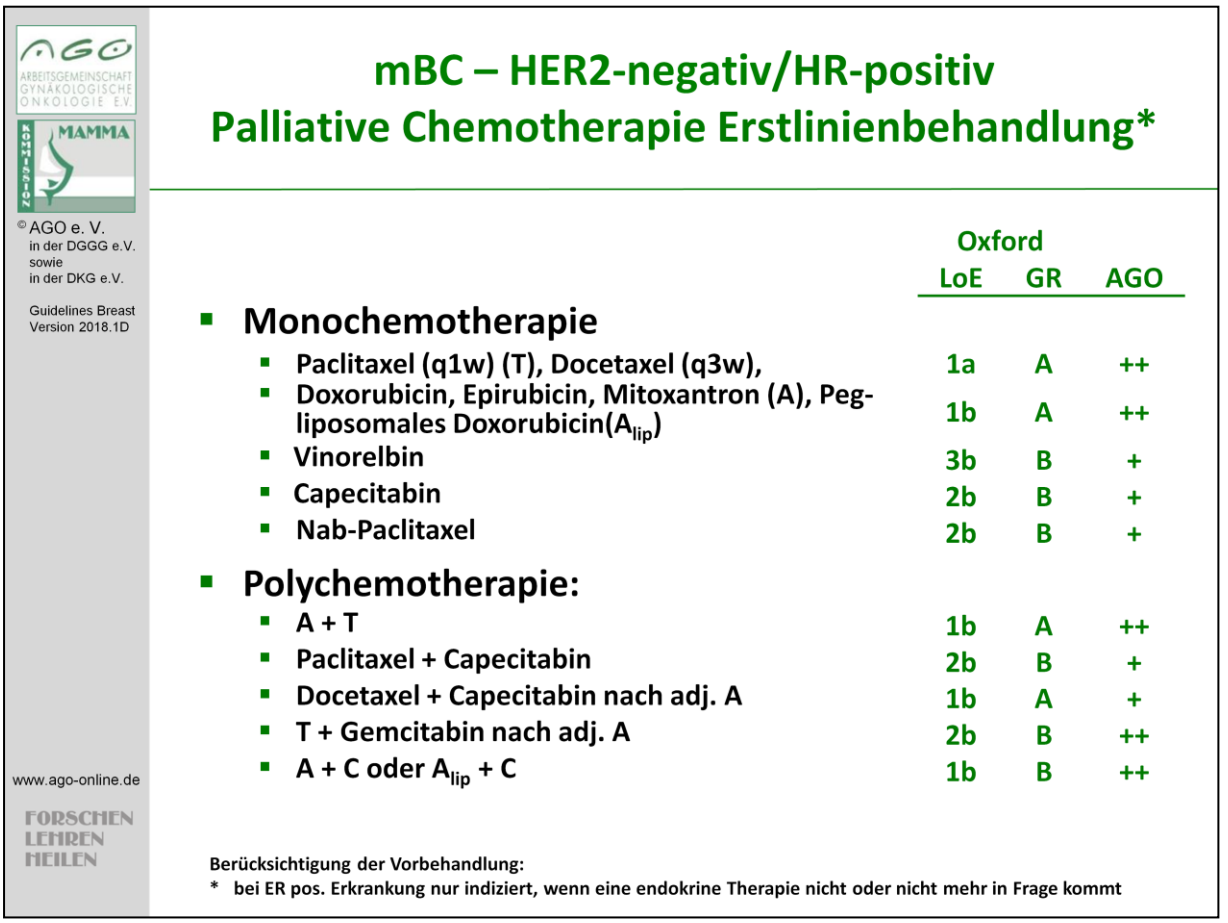
1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Quality of life: Paclitaxel/gemcitabine vs paclitaxel-mono. Combination tends to be better

1. Moinpour CM, Donaldson GW, Liepa AM, et al. Evaluating health-related quality-of-life therapeutic effectiveness in a clinical trial with extensive nonignorable missing data and heterogeneous response: results from a phase III randomized trial of gemcitabine plus paclitaxel versus paclitaxel monotherapy in patients with metastatic breast cancer. Qual Life Res. 2012;21(5):765-75.

Limitations of palliative chemotherapy

1. Ribeiro JT, Macedo LT, Curigliano G, et al. Cytotoxic drugs for patients with breast cancer in the era of targeted treatment: back to the future? Ann Oncol. 2012;23(3):547-55.
2. Adamowicz K, Jassem J, Katz A, Saad ED. Assessment of quality of life in advanced breast cancer. An overview of randomized phase III trials. Cancer Treat Rev. 2012;38(5):554-8.



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1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Single Agents

1. Mauri D, Kamposioras K, Tsali L, et al. Overall survival benefit for weekly vs. three-weekly taxanes regimens in advanced breast cancer: A meta-analysis. Cancer Treat Rev. 2010;36(1):69-74.
2. Belfiglio M, Fanizza C, Tinari N, et al. Consorzio Interuniversitario Nazionale per la BioOncologia (CINBO). Meta-analysis of phase III trials of docetaxel alone or in combination with chemotherapy in metastatic breast cancer. J Cancer Res Clin Oncol. 2012;138(2):221-9.
3. O'Brien ME, Wigler N, Inbar M, et al. CAELYX Breast Cancer Study Group : Reduced cardiotoxicity and comparable efficacy in a phase III trial of pegylated liposomal doxorubicin HCl (CAELYX/Doxil) versus conventional doxorubicin for first-line treatment of metastatic breast cancer. Ann Oncol. 2004;15(3):440-449.
4. O'Shaughnessy JA, Kaufmann M, Siedentopf F, et al. Capecitabine monotherapy: review of studies in first-line HER-2-negative metastatic breast cancer. Oncologist. 2012;17:476-84.
5. Gradishar WJ, Krasnojon D, Cheporov S, et al. Phase II trial of nab-paclitaxel compared with docetaxel as first-line chemotherapy in patients with metastatic breast cancer:

final analysis of overall survival. Clin Breast Cancer. 2012;12(5):313-21.

6. Vogel C, O'Rourke M, Winer E, et al: Vinorelbine as first-line chemotherapy for advanced breast cancer in women 60 years of age or older. Ann Oncol. 1999;10(4):397-402

Polychemotherapy

Metaanalysis

1. Belfiglio M, Fanizza C, Tinari N, et al. Consorzio Interuniversitario Nazionale per la BioOncologia (CINBO). Meta-analysis of phase III trials of docetaxel alone or in combination with chemotherapy in metastatic breast cancer. J Cancer Res Clin Oncol. 2012;138(2):221-9.

Cochrane analysis containing taxane based regimens

1. Ghersi D, Willson ML, Chan MM, et al. Taxane-containing regimens for metastatic breast cancer. Cochrane Database Syst Rev. 2015 10;6:CD003366.

After anthracycline treatment two studies could show a survival benefit

1. O'Shaughnessy J, Miles D, Vukelja S, et al. Superior survival with capecitabine plus docetaxel combination therapy in anthracycline-pretreated patients with advanced breast cancer: phase III trial results. J Clin Oncol. 2002;20(12):2812-2823.
2. Albain KS, Nag SM, Calderillo-Ruiz G, et al. Gemcitabine plus Paclitaxel versus Paclitaxel monotherapy in patients with metastatic breast cancer and prior anthracycline treatment. J Clin Oncol. 2008;26(24):3950-3957.

Doxorubicin/docetaxel vs. Doxorubincin/paclitaxel as first line treatment in metastatic breast cancer (ERASME3-study) did not show any significant differences in terms of efficacy and overall QoL

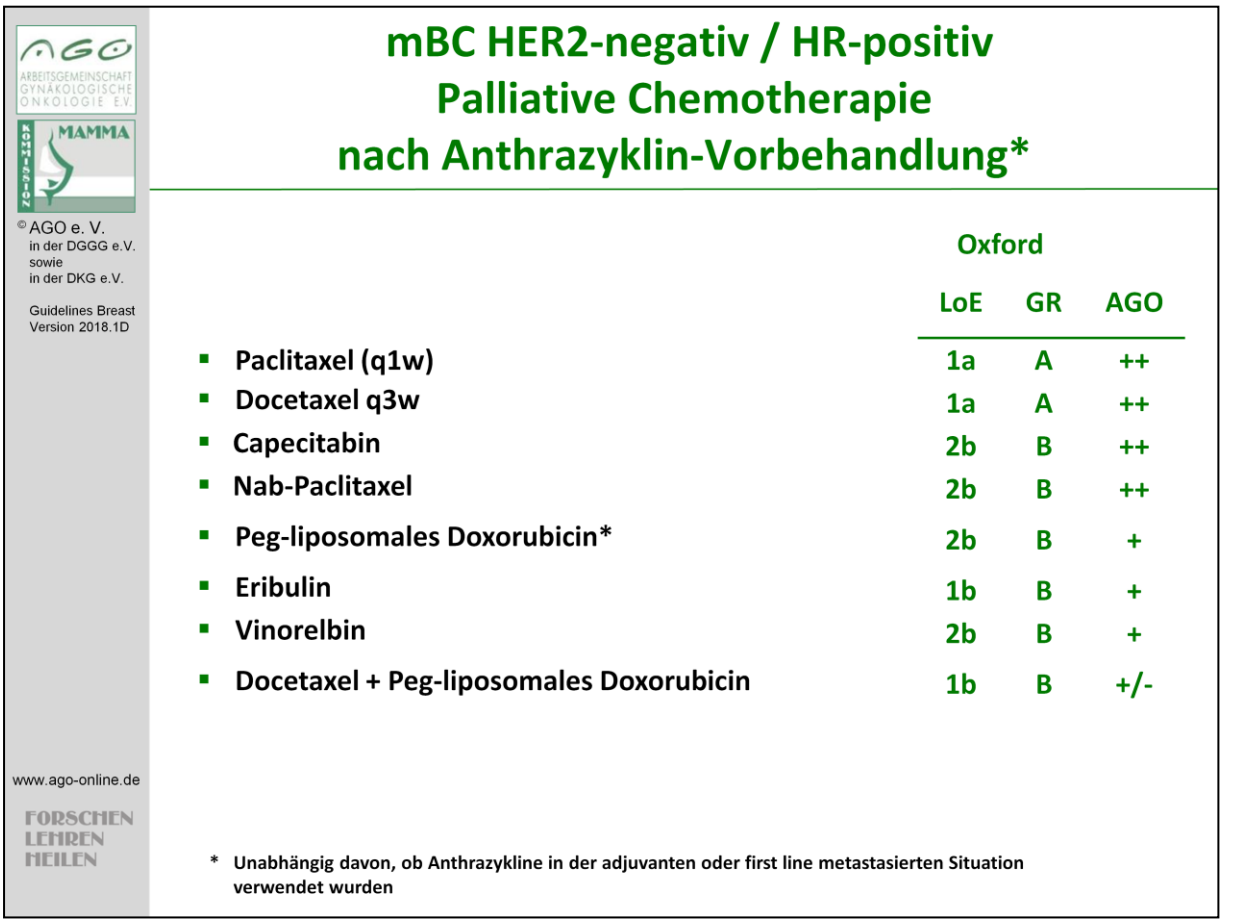
1. Cassier PA, Chabaud S, Trillet-Lenoir V, et al. A phase-III trial of doxorubicin and docetaxel versus doxorubicin and paclitaxel in metastatic breast cancer: results of the ERASME 3 study. Breast Cancer Res Treat. 2008;109(2):343-50.

Other combinations

1. Lück HJ, Du Bois A, Loibl S, et al: Capecitabine plus paclitaxel versus epirubicin plus paclitaxel as first-line treatment for metastaticbreast cancer: efficacy and safety results of a randomized, phase III trial by the AGO Breast Cancer Study Group. Breast Cancer Res Treat. 2013;139(3):779-87. doi: 10.1007/s10549-013-2589-8.
2. Biganzoli L, Cufer T, Bruning P, et al. Doxorubicin and paclitaxel versus doxorubicin and cyclophosphamide as first-line chemotherapy in metastatic

breast cancer: The European Organization for Research and Treatment of Cancer 10961 Multicenter Phase III Trial. J Clin Oncol. 2002;20(14):3114-3121.

3. Batist G, Ramakrishnan G, Sekhar Rao C et al (2001) Reduced cardiotoxicity and preserved antitumor efficacy of liposome-encapsulted doxorubicin and cyclophosphamide compared with conventional doxorubicin and cyclophosphamide in a randomized multicenter trial of metastatic breast cancer J. Clin Oncol 19: 1444-1454



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1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Cochrane analysis taxane-containing regimens for metastatic breast cancer

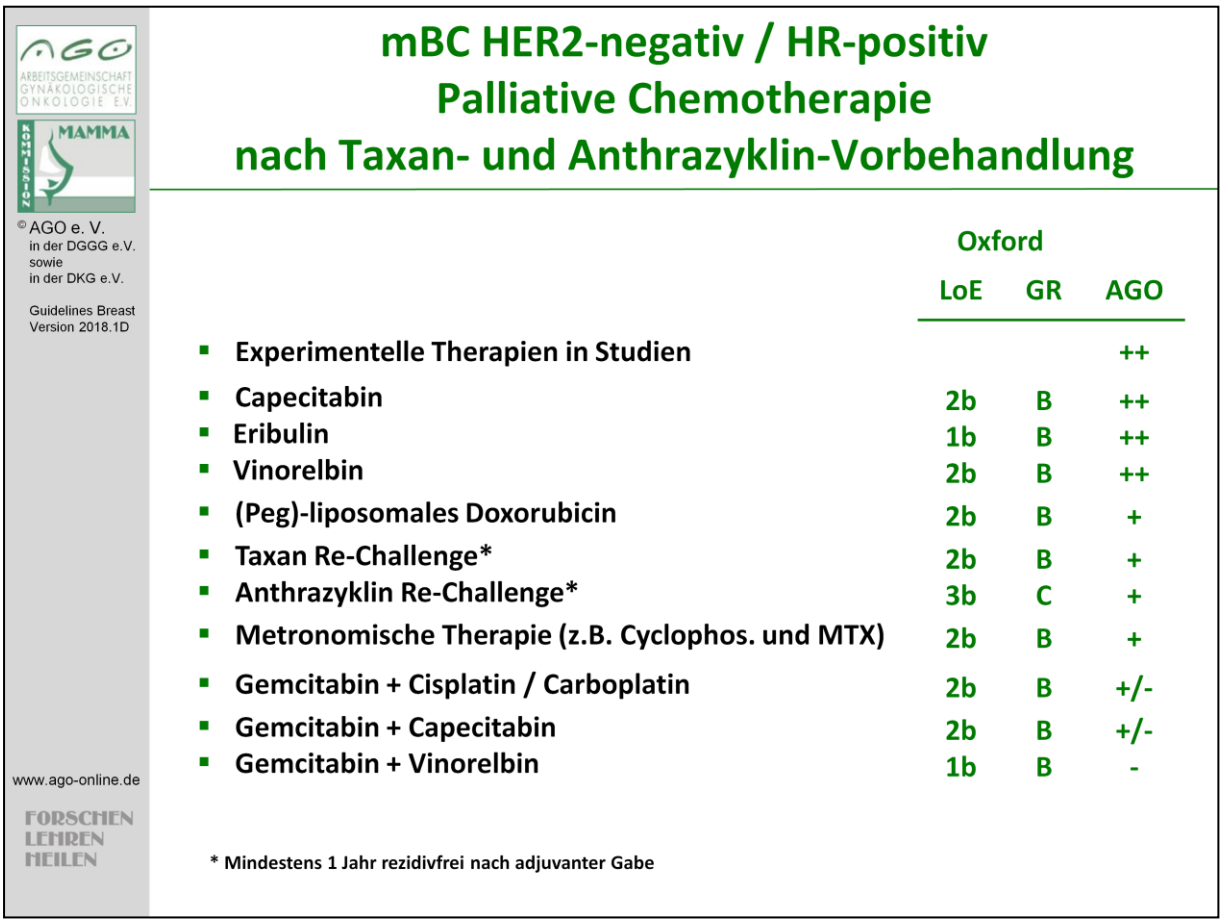
1. Ghersi D, Willson ML, Chan MM, et al.Taxane-containing regimens for metastatic breast cancer. Cochrane Database Syst Rev. 2015 Jun 10;6:CD003366.

Nab-paclitaxel

1. Puglisi F, Rea D, Kroes MA, et al. Second-line single-agent chemotherapy in human epidermal growth factor receptor 2-negative metastatic breast cancer: A systematic review. Cancer Treat Rev. 2016 Feb;43:36-49.

Erubilin

1. Cortes J, O'Shaughnessy J, Loesch D, et al. Eribulin monotherapy versus treatment of physician's choice in patients with metastatic breast cancer (EMBRACE): a phase 3 open-label randomised study. Lancet. 2011;377:914-23.
2. Twelves C, Cortes J, Vahdat L, et al. Efficacy of eribulin in women with metastatic breast cancer: a pooled analysis of two phase 3 studies. Breast Cancer Res Treat. 2014;148:553-61.



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Capecitabine

1. Fumoleau P, Largillier R, Clippe C, et al. Multicentre, phase II study evaluating capecitabine monotherapy in patients with anthracycline- and taxane-pretreated metastatic breast cancer. Eur J Cancer. 2004;40(4):536-542.

Eribulin

1. Cortes J, O'Shaughnessy J, Loesch D, et al. Eribulin monotherapy versus treatment of physician's choice in patients with metastatic breast cancer (EMBRACE): a phase 3 open-label randomised study. Lancet. 2011;377:914-23.
2. Twelves C, Cortes J, Vahdat L, et al. Efficacy of eribulin in women with metastatic breast cancer: a pooled analysis of two phase 3 studies. Breast Cancer Res Treat. 2014;148:553-61.
3. Scarpace SL. Eribulin mesylate (E7389): review of efficacy and tolerability in breast, pancreatic, head and neck, and non-small cell lung cancer. Clin Ther. 2012;34(7):1467-73.

Taxane re-challenge

1. Guo X, Loibl S, Untch M, et al. Re-Challenging Taxanes in Recurrent Breast Cancer in Patients Treated with (Neo-) Adjuvant Taxane-Based Therapy. Breast Care (Basel). 2011;6(4):279-283.

Anthracycline re challenge

1. Twelves C, Jove M, Gombos A, et al. Cytotoxic chemotherapy: Still the mainstay of clinical practice for all subtypes metastatic breast cancer. Crit Rev Oncol Hematol. 2016. pii: S1040-8428(16)30021-X. doi: 10.1016/j.critrevonc.2016.01.021. [Epub ahead of print] Review.

Metronomic chemotherapy

1. Yin W, Pei G, Liu G, et al. Efficacy and safety of capecitabine-based first-line chemotherapy in advanced or metastatic breast cancer: a meta-analysis of randomised controlled trials. Oncotarget 2015;36:39365-72.
2. Yoshimoto M, Takao S, Hirata M, et al. Metronomic oral combination chemotherapy with capecitabine and cyclophosphamide: a phase II study in patients with HER2-negative metastatic breast cancer. Cancer Chemother Pharmacol. 2012;70(2):331-8.
3. Fedele P, Marino A, Orlando L, et al. Efficacy and safety of low-dose metronomic chemotherapy with capecitabine in heavily pretreated patients with metastatic breast cancer. Eur J Cancer. 2012;48(1):24-9.
4. Addeo R, Sgambato A, Cennamo G, et al. Low-dose metronomic oral administration of vinorelbine in the first-line treatment of elderly patients with metastatic breast cancer. Clin Breast Cancer. 2010;10(4):301-6.
5. Colleoni M, Orlando L, Sanna G, et al. Metronomic low-dose oral cyclophosphamide and methotrexate plus or minus thalidomide in metastatic breast cancer: antitumor activity and biological effects. Ann Oncol. 2006;17(2):232-8.

Gemcitabine + cisplatin / carboplatinum

1. Li HC, Russell CA Gemcitabine and platinum-based chemotherapy in metastatic breast cancer. Oncology (Williston Park). 2004 Dec;18(14 Suppl 12):17-22
2. Perez EA Gemcitabine and platinum combinations in patients with breast cancer previously treated with anthracyclines and/or taxanes. Clin Breast Cancer. 2004 Jan;4 Suppl 3:S113-6

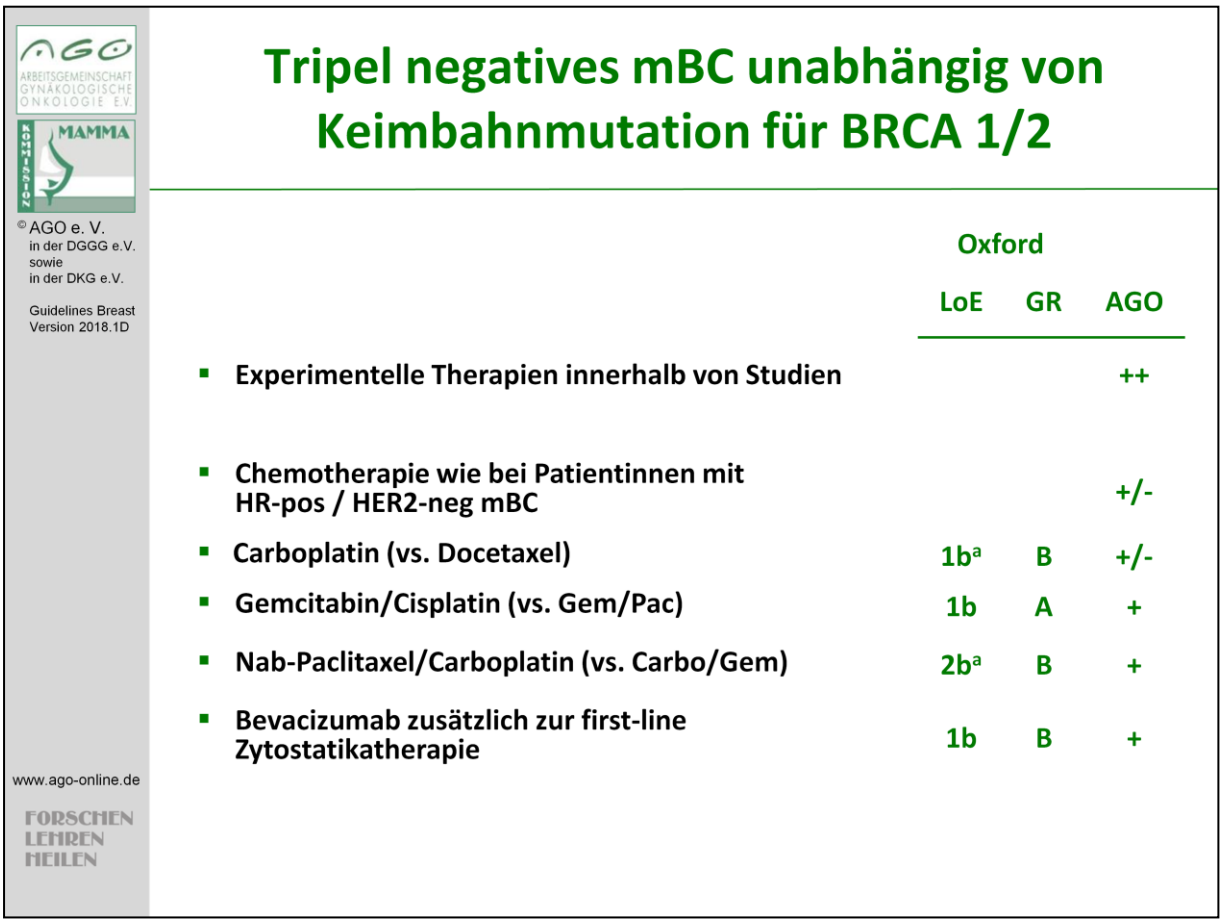
Gemcitabine + capecitabine

1. Park JS, Jeung HC, Rha SY, et al. Phase II gemcitabine and capecitabine combination therapy in recurrent

or metastatic breast cancer patients pretreated with anthracycline and taxane. Cancer Chemother Pharmacol. 2014;74(4):799-808

Gemcitabine + Vinorelbine

1. Martín M, Ruiz A, Muñoz M, Balil A, et al. Spanish Breast Cancer Research Group (GEICAM) trial Gemcitabine plus vinorelbine versus vinorelbine monotherapy in patients with metastatic breast cancer previously treated with anthracyclines and taxanes: final results of the phase III Spanish Breast Cancer Research Group (GEICAM) trial. Lancet Oncol. 2007;8(3):219-225.
2. Kim JH, Oh SY, Kwon HC, et al. Phase II study of gemcitabine plus cisplatin in patients with anthracycline- and taxane- pretreated metastatic breast cancer. Cancer Res Treat. 2008;40(3):101-5.



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Carboplatin (vs. Docetaxel) / Carboplatin in gBRCA mutation:

1. The TNT trial: A randomized phase III trial of carboplatin (C) compared with docetaxel (D) for patients with metastatic or recurrent locally advanced triple negative or BRCA1/2 breast cancer (CRUK/07/012) Tutt A, Ellis P, Kilburn L, Gilett C, et al. San Antonio Breast Cancer Symposium 2014; S3-01.

Gemcitabin/Cisplatin (vs. GemPac)

1. Hu XC, Zhang J, Xu BH, et al. Cisplatin plus gemcitabine versus paclitaxel plus gemcitabine as first-line therapy for metastatic triple-negative breast cancer (CBCSG006): a randomised, open-label, multicentre, phase 3 trial. Lancet Oncol. 2015;16(4):436-46.

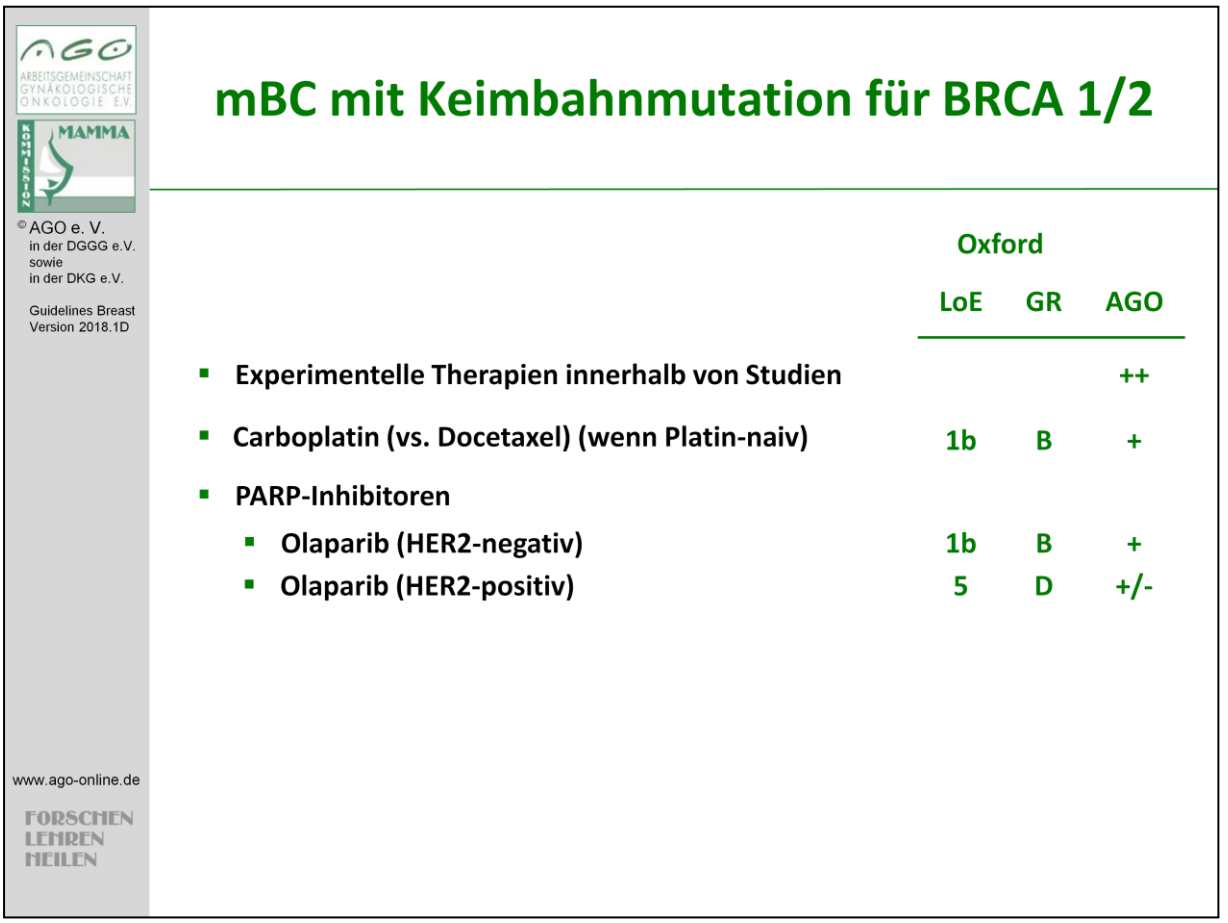
Nab-Paclitaxel / Carboplatin

1. Yardley D, Coleman R, Conte P, et al. nab-paclitaxel + carboplatin or gemcitabine vs gemcitabine/carboplatin as first-line treatment for patients with triple-negative metastatic breast cancer: Results from the randomized phase 2 portion of the tnAcity

trial. SABCS 2016 Abstract #P5-15-03

Bevacizumab as first-line therapy

1. Miles DW, Diéras V, Cortés J, et al. First-line bevacizumab in combination with chemotherapy for HER2-negative metastatic breast cancer: pooled and subgroup analyses of data from 2447 patients. Ann Oncol. 2013;24(11):2773-80. doi: 10.1093/annonc/mdt276.



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PARP Inhibitoren bei triple negativ und BRCA 1/2 Mutation

1. Robson M, Im S-A, Senkus E et al: Olaparib for Metastatic Breast Cancer in Patients with a Germline BRCA Mutation. N Engl J Med 2017;377:523-533
2. Litton J, Rugo HS, Ettl J et al: EMBRACA: A phase 3 trial comparing talazoparib, an oral PARP inhibitor, to physician‘s choice of therapy in patients with advanced germline BRCA-mutation breast cancer. SABCS 2017, S6-07

Bevacizumab beim HER2-neg. metastasierten Mammakarzinom

Guidelines Breast
Version 2018.1D

	Oxford		
	LoE	GR	AGO
▪ 1st line in Kombination mit:			
▪ Paclitaxel (wöchentlich)	1b	B	+
▪ Capecitabin	1b	B	+
▪ Anthracyklinen	2b	B	+/-
▪ Nab-Paclitaxel	2b	B	+/-
▪ Docetaxel (dreiwöchentlich)	1b	B	+/-
▪ Cap+Bev als Erhaltung nach Doc + Bev	1b[a]	B	+/-
▪ 2nd line in Kombination mit:			
▪ Taxanen	1b	B	+/-
▪ Capecitabin	1b	B	+/-
▪ Gemcitabin oder Vinorelbin	1b	B	-
▪ Ab 2nd line als Behandlung durch multiple Linien	1b	B	-

International consensus

1. Cardoso F, Costa A, Senkus E, er al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

First-line chemotherapy and bevacizumab

1. Roberts et al., RIBBON-1: Randomized, Double-Blind, Placebo-Controlled, Phase III Trial of Chemotherapy With or Without Bevacizumab for First-Line Treatment of Human Epidermal Growth Factor Receptor 2–Negative, Locally Recurrent or Metastatic Breast Cancer, J Clin Oncol 29:1252-1260, 2011

Taxane and bevacizumab first-line

1. Miller K, Wang M, Gralow J, et al. Paclitaxel plus bevacizumab versus paclitaxel alone for metastatic breast cancer. N Engl J Med (2007) 357(26):2666–2676.
2. Miles D, Chan A, Luc Y, et al. Phase III Study of Bevacizumab Plus Docetaxel Compared With Placebo Plus Docetaxel for the First-Line Treatment of Human Epidermal Growth Factor Receptor 2–Negative Metastatic Breast Cancer, J Clin Oncol 28:3239-3247, 2010

Nab-Paclitaxel and bevacizumab first-line

1. Rugo HS, Barry WT, Moreno-Aspitia A, et al. Randomized Phase III Trial of Paclitaxel

Once Per Week Compared With Nanoparticle Albumin-Bound Nab-Paclitaxel Once Per Week or Ixabepilone With Bevacizumab As First-Line Chemotherapy for Locally Recurrent or Metastatic Breast Cancer: CALGB 40502/NCCTG N063H (Alliance). J Clin Oncol. 2015;33(21):2361-9.

Capecitabine and bevacizumab first-line

1. Zielinski C, Láng I, Inbar M, et al TURANDOT investigators. Bevacizumab plus paclitaxel versus bevacizumab plus capecitabine as first-line treatment for HER2-negative metastatic breast cancer (TURANDOT): primary endpoint results of a randomised, open-label, non-inferiority, phase 3 trial. Lancet Oncol 2016;17(9):1230-9. doi: 10.1016/S1470-2045(16)30154-1.
2. Miller KD, Chap LI, Holmes FA, et al. Randomized phase III trial of capecitabine compared with bevacizumab plus capecitabine in patients with previously treated metastatic breast cancer. J Clin Oncol (2005) 23(4):792–799.

Cap+Bev as maintenance after Doc+Bev

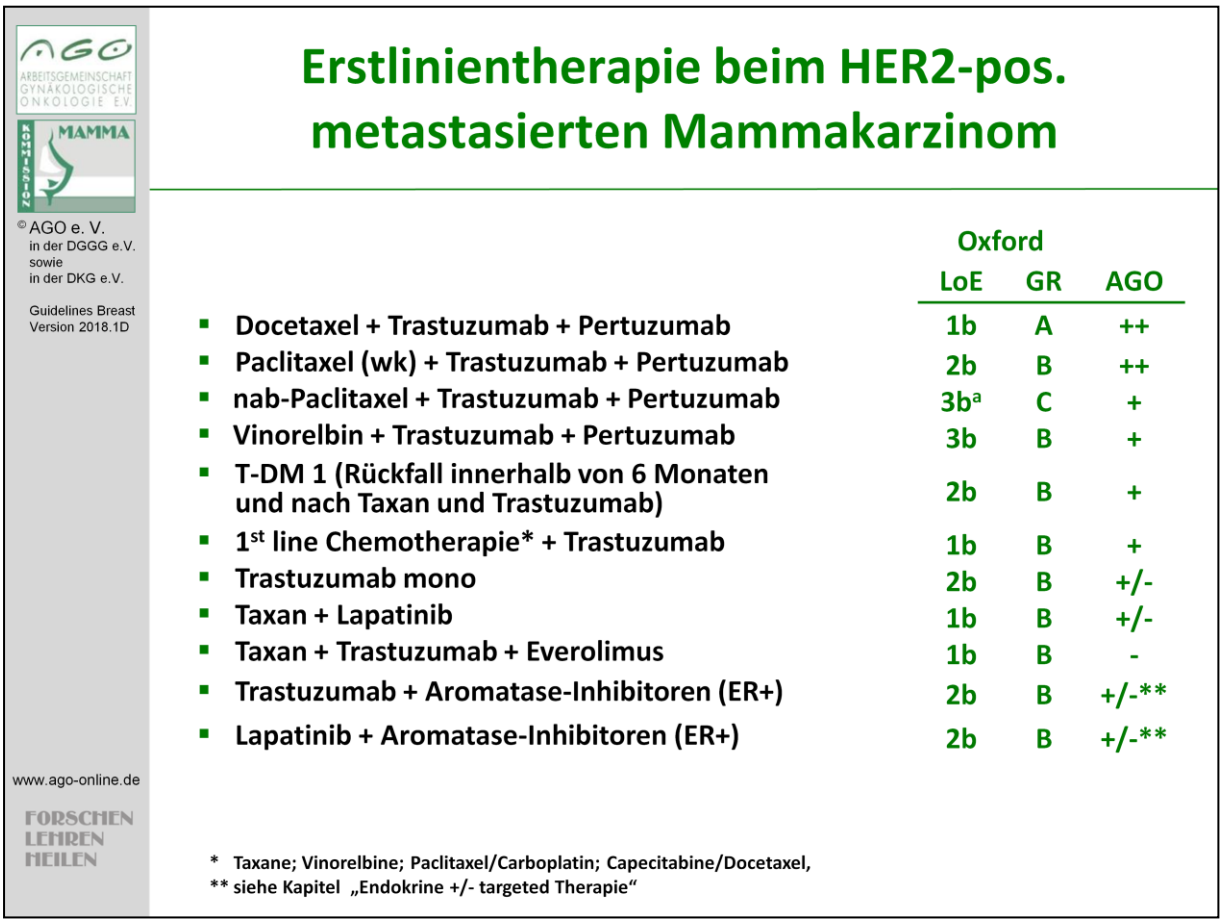
1. Gligorov J, Doval D, Bines J, et al. Maintenance capecitabine and bevacizumab versus bevacizumab alone after initial first-line bevacizumab and docetaxel for patients with HER2-negative metastatic breast cancer (IMELDA): a randomised, open-label, phase 3 trial. Lancet Oncol. 2014;15:1351-60.
2. Mustacchi G, Bines J, Alba E, et al. [Impact of post-progression therapy on overall survival (OS) in the IMELDA randomized phase III trial evaluating the addition of capecitabine (CAP) to maintenance bevacizumab (BEV) for HER2-negative metastatic breast cancer (mBC) San Antonio Breast Cancer Conference 2016 Abstract P5-15-06

Second-line chemotherapy and bevacizumab

1. Brufsky et al., RIBBON-2: A Randomized, Double-Blind, Placebo-Controlled, Phase III Trial Evaluating the Efficacy and Safety of Bevacizumab in Combination With Chemotherapy for Second-Line Treatment of Human Epidermal Growth Factor Receptor 2–Negative Metastatic Breast Cancer, J Clin Oncol 29:4286-4293. 201

2nd line as treatment through multiple lines

1. Vrdoljak E, Marschner N, Zielinski C, et al. Final results of the TANIA randomised phase III trial of bevacizumab after progression on first-line bevacizumab therapy for HER2-negative locally recurrent/metastatic breast cancer. Ann Oncol. 2016;27(11):2046-2052.



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ASCO recommendation

1. Giordano SH, Temin S, Kirshner JJ, et al. Systemic therapy for patients with advanced human epidermal growth factor receptor 2-positive breast cancer: American Society of Clinical Oncology clinical practice guideline. J Clin Oncol. 2014;32:2078-99

Docetaxel + trastuzumab + pertuzumab

1. Swain SM, Baselga J, Kim SB, et al; CLEOPATRA Study Group. Pertuzumab, trastuzumab, and docetaxel in HER2-positive metastatic breast cancer.N Engl J Med. 2015;372(8):724-34.

Paclitaxel weekly + trastuzumab + pertuzumab

1. Dang C, Iyengar N, Datko F, et al. Phase II study of paclitaxel given once per week along with trastuzumab and pertuzumab in patients with human epidermal growth factor receptor 2-positive metastatic breast cancer. J Clin Oncol. 2015; 10;33(5):442-7.
2. Smyth LM, Iyengar NM, Chen MF, et al. Weekly paclitaxel with trastuzumab and pertuzumab in patients with HER2-overexpressing metastatic breast cancer: overall

survival and updated progression-free survival results from a phase II study. Breast Cancer Res Treat 2016;158:91e7. http://dx.doi.org/ 10.1007/s10549-016-3851-7

Nab-Paclitaxel + trastuzumab + pertuzumab

1. Bachelot T, Puglisi F, Ciruelos E, et al. Preliminary safety and efficacy of first-line pertuzumab combined with trastuzumab and taxane therapy for HER2-positive locally recurrent/metastatic breast cancer (PERUSE). San Antonio Breast Cancer Conference Abstract # P4-21-04

Vinorelbine + trastuzumab + pertuzumab

1. Perez EA, López-Vega JM, Petit T, et al: Safety and efficacy of vinorelbine in combination with pertuzumab and trastuzumab for first-line treatment of patients with HER2-positive locally advanced or metastatic breast cancer: VELVET Cohort 1 final results. Breast Cancer Res. 2016;18(1):126.

T-DM1 after rapid progress

1. Giordano SH, Temin S, Kirshner JJ, et al. Systemic therapy for patients with advanced human epidermal growth factor receptor 2-positive breast cancer: American Society of Clinical Oncology clinical practice guideline. J Clin Oncol. 2014;32:2078-99

1st line chemotherapy + trastuzumab

1. Andersson M, Lidbrink E, Bjerre K. et al.: Phase III Randomized Study Comparing Docetaxel Plus Trastuzumab With Vinorelbine Plus Trastuzumab As First-Line Therapy of Metastatic or Locally Advanced Human Epidermal Growth Factor Receptor 2–Positive Breast Cancer: The HERNATA Study. J Clin Oncol 2011;29(3):264-71.
2. Valero V, Forbes J, Pegramet M D. et al.: Multicenter Phase III Randomized Trial Comparing Docetaxel and Trastuzumab With Docetaxel, Carboplatin, and Trastuzumab As First-Line Chemotherapy for Patients With HER2-Gene-Amplified Metastatic Breast Cancer (BCIRG 007 Study): Two Highly Active Therapeutic Regimens. J Clin Oncol 2011;29(2):149-56.
3. Dawood S, Broglio K, Buzdaret AU et al.: Prognosis of Women With Metastatic Breast Cancer by HER2 Status and Trastuzumab Treatment: An Institutional-Based Review. J Clin Oncol 2010;28(1):92-8.
4. Robert N, Leyland-Jones B, Asmaret L et al.: Randomized Phase III Study of Trastuzumab, Paclitaxel, and Carboplatin Compared With Trastuzumab and Paclitaxel in Women With HER-2–Overexpressing Metastatic Breast Cancer. J Clin Oncol 2006;24(18):2786-92.
5. Wardley AM, Pivot X, Morales-Vasquez F et al.: Randomized Phase II Trial of First-

Line Trastuzumab Plus Docetaxel and Capecitabine Compared With Trastuzumab Plus Docetaxel in HER2-Positive Metastatic Breast Cancer. J Clin Oncol. 2010;28(6):976-83.

6. Dang C, Iyengar N, Datko F, et al. Phase II study of paclitaxel given once per week along with trastuzumab and pertuzumab in patients with human epidermal growth factor receptor 2-positive metastatic breast cancer. J Clin Oncol. 2015;33(5):442-7.

Trastuzumab mono

1. Cobleigh MA, Vogel CL, Tripathy D, et al. Multinational study of the efficacy and safety of humanized anti-HER2 monoclonal antibody in women who have HER2-overexpressing metastatic breast cancer that has progressed after chemotherapy for metastatic disease. J Clin Oncol 1999;17:2639-48.
2. Vogel CL, Cobleigh MA, Tripathy D, et al. Efficacy and safety of trastuzumab as a single agent in first-line treatment of HER2-overexpressing metastatic breast cancer. J Clin Oncol 2002;20:719-26.

Taxanes+ lapatinib

1. Di Leo A, Gomez H, Aziz Z, et al. Lapatinib (L) with paclitaxel compared to paclitaxel as first-line treatment for patients with metastatic breast cancer: a phase III randomized, double-blind study of 580 patients. J Clin Oncol. (2007 ASCO Annual Meeting Proceedings Part I) (2007) 25(18S):1011.
2. Gelmon KA et al., Lapatinib or Trastuzumab Plus Taxane Therapy for Human Epidermal Growth Factor Receptor 2-Positive Advanced Breast Cancer: Final Results of NCIC CTG MA.31, J Clin Oncol. 2015;33(14):1574-83

Taxane + trastuzumab + everolimus

1. Hurvitz SA et al., Combination of everolimus with trastuzumab plus paclitaxel as first-line treatment for patients with HER2-positive advanced breast cancer (BOLERO-1): a phase 3, randomised, double-blind, multicentre trial, Lancet Oncol. 2015;16(7):816-29
2. Yardley D, Hurvitz S, Jiang Z-f, et al. Everolimus plus trastuzumab and paclitaxel as first-line therapy in women with HER2+ advanced breast cancer: Overall survival results from BOLERO-1. SABCS 2016, Poster Session 4 - Treatment: Advanced Therapy - Targeted, Abstract No. P4-22-13

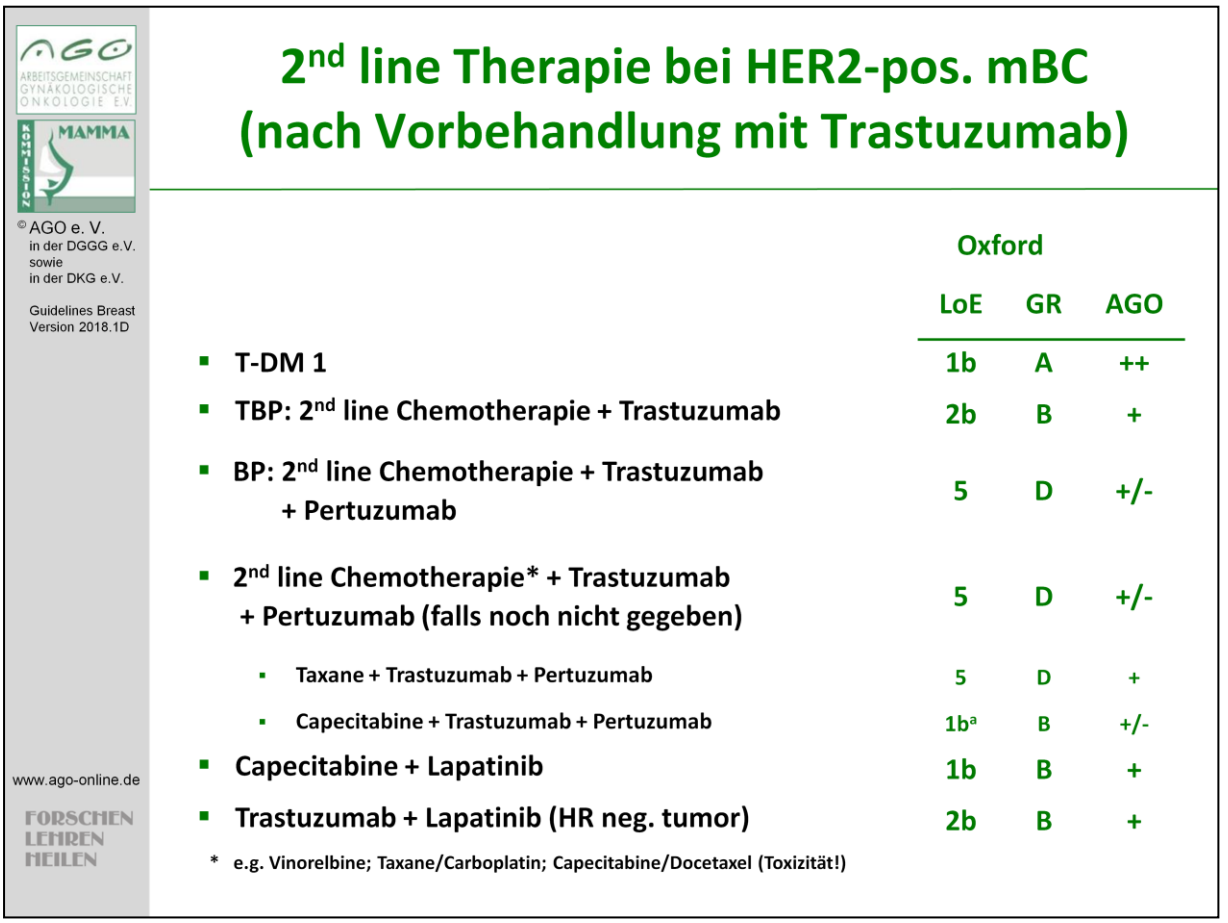
Trastuzumab + aromatase inihibitors (if ER+)

1. Kaufman B, Mackey JR, Clemens MR, et al. Trastuzumab plus anastrozole versus anastrozole alone for the treatment of postmenopausal women with human epidermal growth factor receptor 2-positive, hormone receptor-positive metastatic breast cancer:results from the randomized phase III TAnDEM Study. J

Clin Oncol 2009;27:5529–37

Lapatinib + aromatase inihibitors (if ER+)

1. Johnston S, Pippen Jr J, Pivot X, et al. Lapatinib Combined With Letrozole Versus Letrozole and Placebo As First-Line Therapy for Postmenopausal Hormone Receptor–Positive Metastatic Breast Cancer. J Clin Oncol 2009;27(33):5538-46.



International consensus

1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

ASCO recommendation

1. Giordano SH, Temin S, Kirshner JJ, et al. Systemic therapy for patients with advanced human epidermal growth factor receptor 2-positive breast cancer: American Society of Clinical Oncology clinical practice guideline. J Clin Oncol. 2014;32:2078-99

T-DM1

1. Verma S, Miles D, Gianni L, et al. Trastuzumab emtansine for HER2-positive advanced breast cancer. N Engl J Med. 2012;367:1783-91.
2. Krop IE, Lin NU, Blackwell K, et al. Trastuzumab emtansine (T-DM1) versus lapatinib plus capecitabine in patients with HER2-positive metastatic breast cancer and central nervous system metastases: a retrospective, exploratory analysis in EMILIA. Ann Oncol 2015;26(1):113-9.

TBP: 2nd-Line chemotherapy + trastuzumab (Treatment beyond progression)

1. von Minckwitz G, Schwedler K, Schmidt M, et al; GBG 26/BIG 03-05 study group and participating investigators. Trastuzumab beyond progression: overall survival analysis

of the GBG 26/BIG 3-05 phase III study in HER2-positive breast cancer. Eur J Cancer. 2011;47(15):2273-81.

TBP: 2nd-Line chemotherapy + Trastuzumab + pertuzumab (Treatment beyond progression)

1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Any other 2nd-Line chemotherapy + trastuzumab + pertuzumab

1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Taxane + trastuzumab + pertuzumab

1. Cardoso F, Costa A, Senkus E, et al. 3rd ESO-ESMO international consensus guidelines for Advanced Breast Cancer (ABC 3). Breast 2017;31:244-259;

Capecitabine + Trastuzumab + Pertuzumab

1. Urruticoechea A, Rizwanullah M, Im SA, et al. PHEREXA: a phase III study of trastuzumab (H) þ capecitabine (X) ± pertuzumab (P) for patients (pts) who progressed during/after one line of H-based therapy in the HER2-positive metastatic breast cancer (MBC) setting. J Clin Oncol 2016;34(15_suppl). abstr. 504

Capecitabine + lapatinib

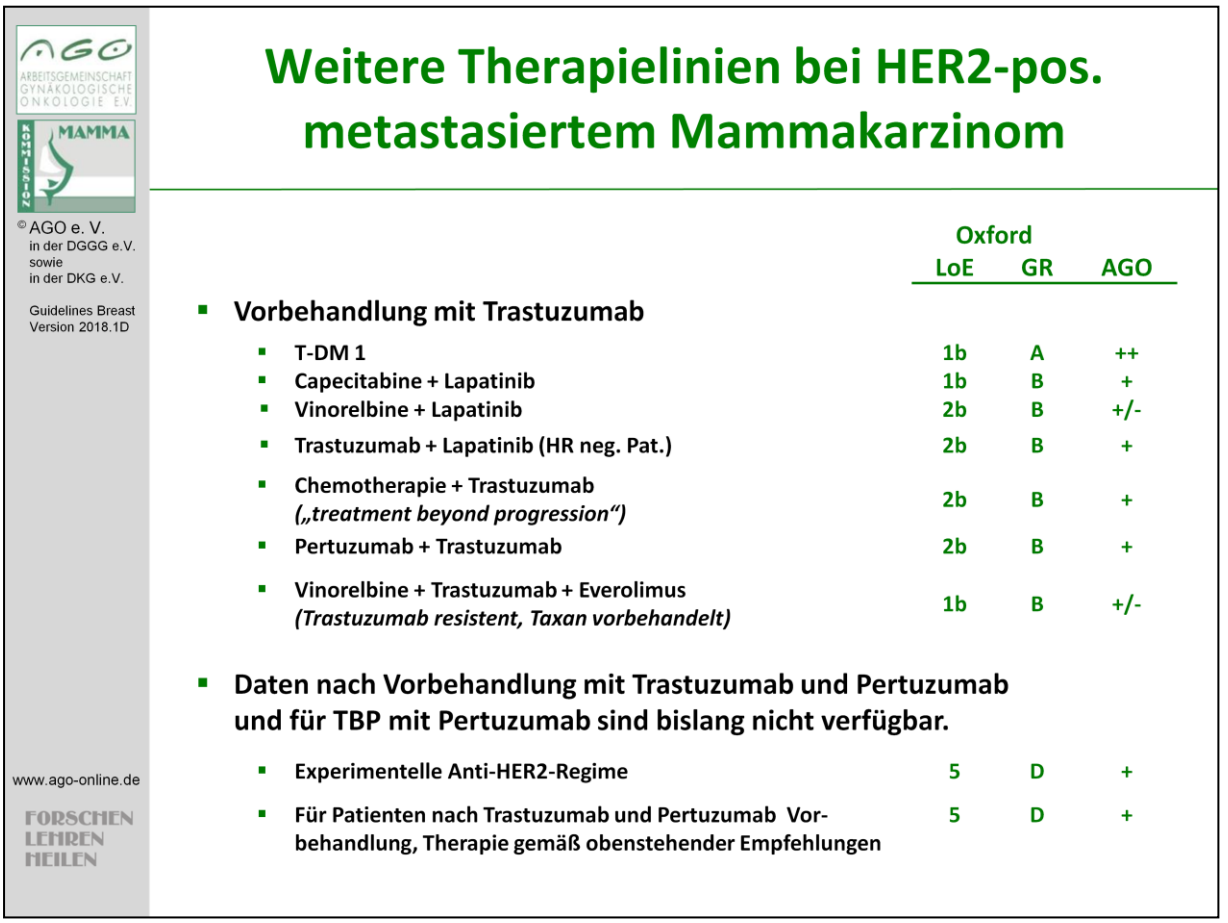
1. Cameron D, Casey M, Press M, et al. A phase III randomized comparison of lapatinib plus capecitabine versus capecitabine alone in women with advanced breast cancer that has progressed on trastuzumab: updated efficacy and biomarker analyses. Breast Cancer Res Treat. 2008;112(3):533-43.
2. Geyer CE, Forster J, Lindquist D, et al. Lapatinib plus capecitabine for HER2-positive advanced breast cancer. N Engl J Med 2006; 355(26):2733–2743.
3. When compared against capecitabine alone, the addition of lapatinib has a cost-effectiveness ratio exceeding the threshold normally used by NICE.
4. Delea TE, Tappenden P, Sofrygin O, et al. Cost-effectiveness of lapatinib plus capecitabine in women with HER2+ metastatic breast cancer who have received prior therapy with trastuzumab. Eur J Health Econ. 2012;13(5):589-603.

Trastuzumab + lapatinib vs lapatinib

1. Blackwell KL, Burstein HJ, Storniolo AM, et al. Overall survival benefit with lapatinib in combination with trastuzumab for patients with human epidermal

growth factor receptor 2-positive metastatic breast cancer: final results from the EGF104900 Study. J Clin Oncol. 2012;30(21):2585-92.

2. Blackwell KL, Burstein HJ, Storniolo AM, et al. Randomized study of Lapatinib alone or in combination with trastuzumab in women with ErbB2-positive, trastuzumab-refractory metastatic breast cancer. J Clin Oncol. 2010;28(7):1124-30



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1. Krop IE, Kim SB, González-Martín A, et al. TH3RESA Trastuzumab emtansine versus treatment of physician's choice for pretreated HER2-positive advanced breast cancer (TH3RESA): a randomised, open-label, phase 3 trial. Lancet Oncol. 2014;15(7):689-99. study collaborators.

Capecitabine + Lapatinib

1. Cameron D, Casey M, Press M et al. E. A phase III randomized comparison of lapatinib plus capecitabine versus capecitabine alone in women with advanced breast cancer that has progressed on trastuzumab: updated efficacy and biomarker analyses. Breast Cancer Res Treat. 2008;112(3):533-43.

2. Geyer CE, Forster J, Lindquist D, et al. Lapatinib plus capecitabine for HER2-positive advanced breast cancer. N Engl J Med 2006;355(26):2733–2743.

Vinorelbine + Lapatinib

1. Janni W, Sarosiek T, Karaszewska B, et al. Final overall survival analysis of a phase II trial evaluating vinorelbine and lapatinib in women with ErbB2 overexpressing metastatic breast cancer. Breast. 2015;24(6):769-73.

Trastuzumab + lapatinib vs lapatinib

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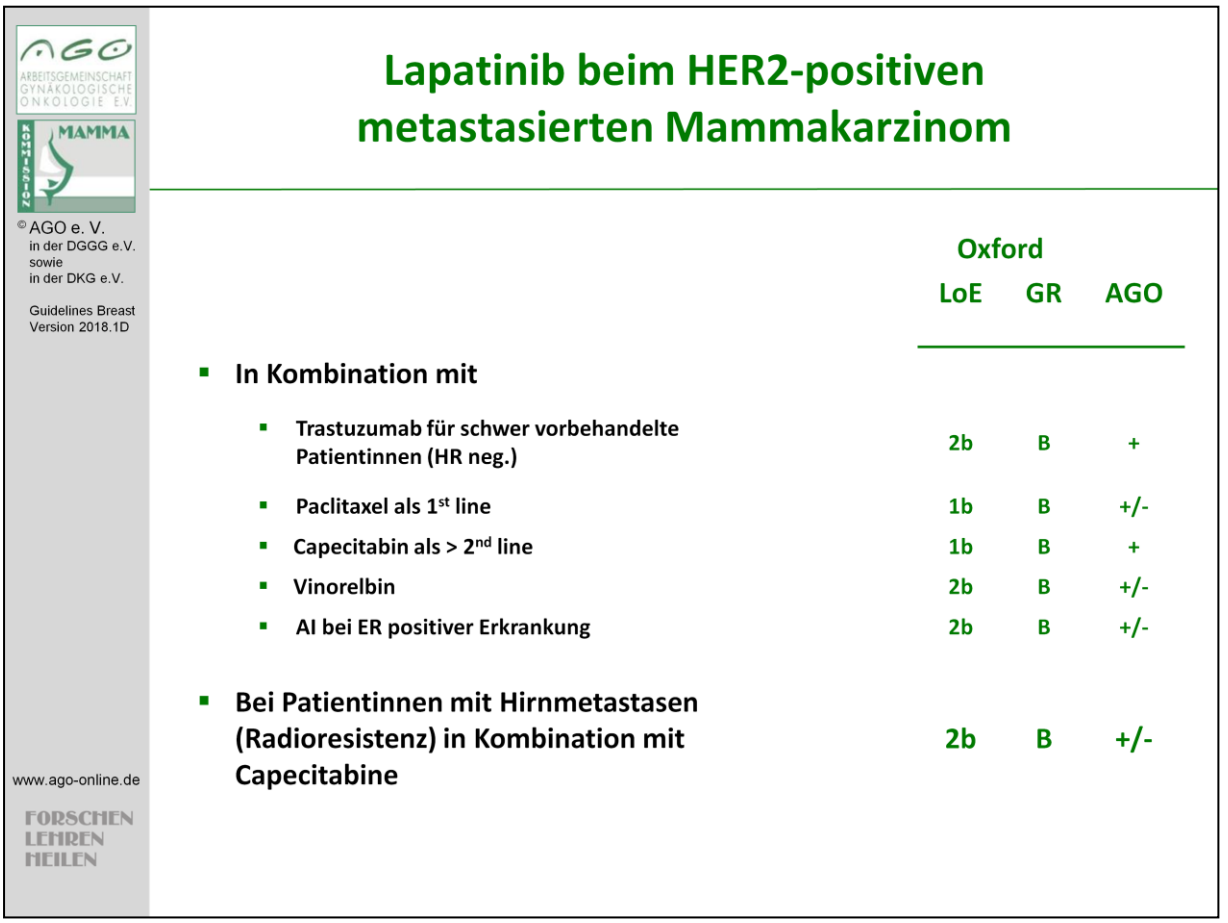
Trastuzumab + pertuzumab

1. Baselga, J. et al. Phase II trial of Pertuzumab and Trastuzumab in patients with human epidermal growth factor receptor 2 – positive metastatic breast cancer that progessed during prior Trastuzumab therapy. JCO 2010;28:1138-1144

Vinorelbine + Trastuzumab + Everolimus

1. André F, O'Regan R, Ozguroglu M, et al. Everolimus for women with trastuzumab-resistant, HER2-positive, advanced breast cancer (BOLERO-3): a randomised, double-blind, placebo-controlled phase 3 trial. Lancet Oncol. 2014;15(6):580-91



Trastuzumab + lapatinib vs lapatinib

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Brain metastases (radioresistance)

1. Lin NU, Carey LA, Liu MC, et al. Phase II trial of lapatinib for brain metastases in patients with human epidermal growth factor receptor 2-positive breast cancer. J Clin Oncol. 2008;26:1993-9.

Guidelines Breast
Version 2018.1D

Immundiagnostik und Immuntherapien*

	Oxford LoE	Oxford GR	AGO
Immundiagnostik			
▪ Bestimmung von immunologischen Parametern im peripheren Blut	5	D	--
Lokale Immuntherapien:			
▪ Imiquimod topisch bei Hautmetastasen	4	C	+/-
Systemische Immuntherapien (einschließlich u.g. Therapien) nur in kontrollierten klinischen Studien			++
▪ HER2-Vakzinierung in Hochrisikokollektiven Immunomodulation (z.B. Zugabe von Nov-2 zur Chemo AC –T)			
▪ Intradermale Vakzinierung von Dendritischen Zellen			
▪ Aktive Vakzinierungen			
▪ Passive Vakzinierungen			
▪ Therapie mit Onkoviren			
▪ Zytokine			
▪ Checkpoint inhibitors (PD1; PDL-1;…)			

* Studienteilnahme empfohlen