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BACKGROUND

- The therapeutic landscape for hormone receptor-positive, HER2-negative metastatic breast cancer (HR+/HER2- MBC) has evolved with the introduction of CDK 4/6 inhibitors in routine clinical practice.
- With this registry we sought to collect real-world data on the current therapeutic approaches regarding HR+/HER2- MBC patients in Greece.

METHODS

- In this multicenter study (2019-2023) retrospective and prospective data from HR+/HER2- MBC patients were collected.
- The primary objective of this study was to record treatment patterns and clinical characteristics.

Table 1 - MBC patient characteristics

Sample (n=232)	
Age (median)	68
Post/ Pre menopausal	151/81
De novo/ Recurrent	83/149

References

- Finn RS, Martin M, Rugo HS, et al. Palbociclib and Letrozole in Advanced Breast Cancer. *N Engl J Med* 2016; 375:1925.
- Hortobagyi GN, Stemmer SM, Burris HA, et al. Ribociclib as First-Line Therapy for HR-Positive, Advanced Breast Cancer. *N Engl J Med* 2016; 375:1738.
- Slamon DJ, Neven P, Chia S, et al. Phase III Randomized Study of Ribociclib and Fulvestrant in Hormone Receptor-Positive, Human Epidermal Growth Factor Receptor 2-Negative Advanced Breast Cancer: MONALEESA-3. *J Clin Oncol*. 2018 Aug 20;36(24):2465-2472
- Goetz MP, Toi M, Campone M, et al. MONARCH 3: Abemaciclib As Initial Therapy for Advanced Breast Cancer. *J Clin Oncol* 2017; 35:3638.
- Robertson JF, Bondarenko IM, Trishkina E, et al. Fulvestrant 500 mg versus anastrozole 1 mg for hormone receptor-positive advanced breast cancer (FALCON): an international, randomised, double-blind, phase 3 trial. *Lancet* 2016; 388:2997.
- Harbeck N, Iyer S, Turner N, et al. Quality of life with palbociclib plus fulvestrant in previously treated hormone receptor-positive, HER2-negative metastatic breast cancer: patient-reported outcomes from the PALOMA-3 trial. *Ann Oncol* 2016; 27:1047.
- Sledge GW Jr, Toi M, Neven P, et al. MONARCH 2: Abemaciclib in Combination With Fulvestrant in Women With HR+/HER2- Advanced Breast Cancer Who Had Progressed While Receiving Endocrine Therapy. *J Clin Oncol* 2017; 35:2875.
- Baselga J, Campone M, Piccart M, et al. Everolimus in postmenopausal hormone-receptor-positive advanced breast cancer. *N Engl J Med* 2012; 366:520.
- Bachelot T, Bourgier C, Cropet C, et al. Randomized phase II trial of everolimus in combination with tamoxifen in patients with hormone receptor-positive, human epidermal growth factor receptor 2-negative metastatic breast cancer with prior exposure to aromatase inhibitors: a GINECO study. *J Clin Oncol* 2012; 30:2062.
- Klein P, et al. PrECOG 0102: A randomized, double-blind, phase II trial of fulvestrant plus everolimus or placebo in post-menopausal. *SABCS* 2016; S1-02.

RESULTS

- From the 232 HR+/HER2- MBC Caucasian patients enrolled 65.09% were postmenopausal and 35.78% were de novo metastatic.
- Histologic type was invasive ductal in 77.59%, lobular in 14.22%, and other in 8.19%.
- In the 1st line setting, 7.33% of patients received chemotherapy, 28.02% received chemotherapy followed by maintenance hormonotherapy, and 64.65% received hormonotherapy alone.
- Overall, in 60.00% of those who received hormonotherapy, a combination with a CDK4/6 inhibitor was administered (22.79% palbociclib-AI; 19.07% palbociclib-fulvestrant; 13.02% ribociclib-AI; 5.12% ribociclib-fulvestrant), 36.74% received hormonotherapy alone, and 3.26% received hormone therapy with an mTOR inhibitor.
- Assessments in hormonotherapy revealed a low progression rate (12.93%), with only 4 cases experiencing treatment discontinuation due to toxicity.
- More patients undergoing chemotherapy were found to have liver metastasis (45.12% vs 19.07%) and bone marrow infiltration (3.66% vs 2.33%).
- Among those with second-line data, 80.52% received hormonotherapy as a standalone treatment, which was either monotherapy in 35.48% or combined with targeted agents in 64.52%.

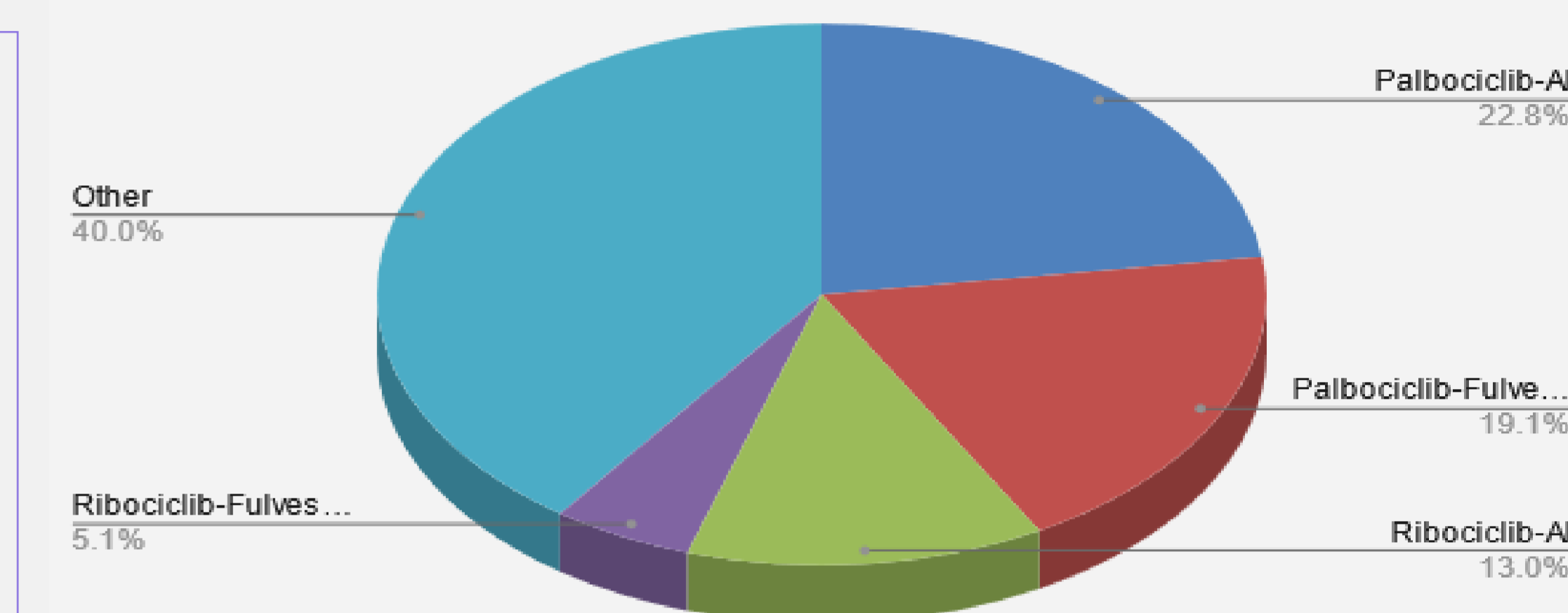


Figure 1 - Hormonotherapy in the 1st line setting

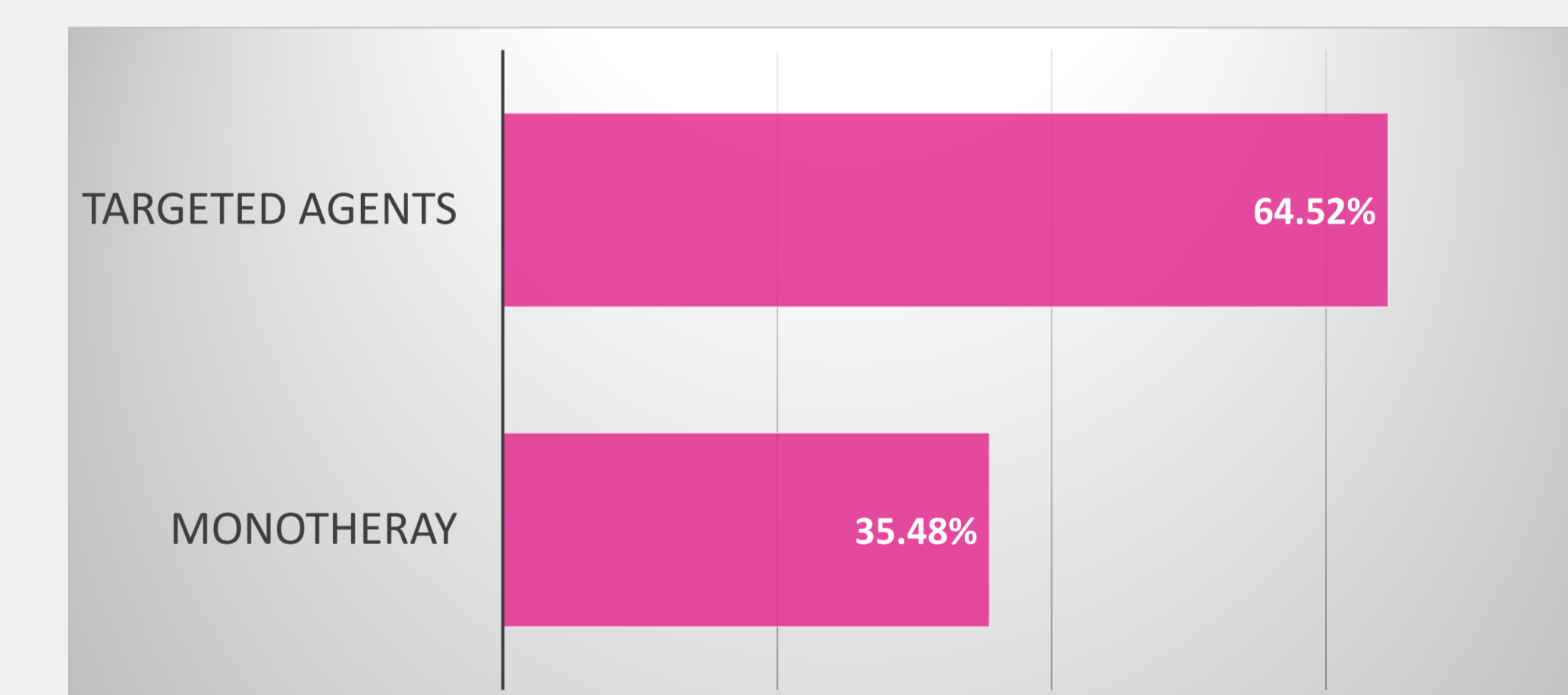


Figure 2 - Hormonotherapy in the 2nd line setting

CONCLUSIONS

- Hormonotherapy emerged as the main therapeutic approach for HR+/HER2- MBC in Greece, aligning with international trends. CDK4/6 inhibitors played a prominent role in both first and second-line settings.
- The study is a collection of real-world data about therapeutic strategy in patients with metastatic ER+/HER2- breast cancer between Greek oncologists, suggesting positive patient outcomes in the Greek population.
- These findings contribute valuable insights to opportunities for incorporation of novel therapies and/or clinical trials in Greece.

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