

Considering combination versus sequential chemotherapy in metastatic breast cancer

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Both combination and sequential single-agent chemotherapy are reasonable options to treat metastatic breast cancer, but the choice between the two should ultimately be based on patient- and disease-related factors, according to a new commentary published online August 5 in the *Journal of the National Cancer Institute*.

Whether to use several [chemotherapy drugs](#) simultaneously or single agents sequentially, one after the other, is a controversial issue. To explore this question, the European School of Oncology Metastatic Breast Cancer Task Force held an open debate on the relative benefits of combination versus sequential therapy at the 6th European Breast Cancer Conference.

In this commentary, Fatima Cardoso, M.D., of the Jules Bordet Institute in Brussels, and colleagues summarize the recommendations of that task force, which includes the use of sequential chemotherapy with a single agent for patients with advanced metastatic breast cancer without rapid progression or life-threatening metastasis, and for those who do not need rapid symptom or disease control.

The authors do not take one side over the other. Instead, they discuss the contributions and caveats of existing data on the two therapies. They do, however, note that because metastatic breast cancer is incurable, quality of life and overall survival should be the endpoints against which any systemic therapy is evaluated.

"Ultimately, the choice between combination and sequential systemic therapy for metastatic [breast cancer](#) must involve an open discussion of potential side effects and logistical requirements with patients, taking into consideration the cost and availability of chemotherapeutic agents in local clinical practice settings," the authors write.

Source: [Journal of the National Cancer Institute](#) ([news](#) : [web](#))

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