

Combined therapy linked to lower chance of recurrence in women with small, HER2+ breast cancers

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In a new study, women with relatively small, HER2-positive breast tumors who received a combination of lower-intensity chemotherapy and a targeted therapy following surgery or radiation therapy were very unlikely to have the cancer recur within a few years of treatment, investigators at Dana-Farber Cancer Institute and other research centers will report at the 2013 San Antonio Breast Cancer Symposium.

The findings offer, for the first time, a set of standard treatment guidelines for recurrence prevention in this group of patients. Previous studies of chemotherapy plus [targeted therapy](#) in women with HER2-positive breast cancer that hadn't spread to nearby lymph nodes included few patients whose tumors were comparatively small (less than 3 cm in diameter). [Breast cancers are deemed HER2-positive if their cells have surplus human epidermal growth factor receptors on their surface, making them extra-sensitive to signals to grow and divide.]

"Smaller, HER2-positive, node-negative [no sign of spread to the lymph nodes] breast cancers are thought to have a high-enough chance of recurring that many doctors have offered patients a combination of chemotherapy and Herceptin [a targeted therapy] to reduce that risk," says the study's senior author, Eric Winer, MD, chief of the division of Women's Cancers in the Susan F. Smith Center for Women's Cancers at Dana-Farber. "But, as this approach hadn't been tested in many women with smaller tumors, we lacked a standard approach to preventing cancer

recurrence in these women."

Because of the sometimes difficult side effects of the conventional drug regimens against recurrence – which can include the chemotherapy drugs adriamycin, taxotere, and carboplatin, plus Herceptin – investigators opted for a less harsh combination of the [chemotherapy](#) agent paclitaxel and Herceptin. The study enrolled 406 patients with HER2-positive, node-negative [breast tumors](#) smaller than 3 cm. They were treated with the drug combination for 12 weeks, followed by nine months of Herceptin alone.

After a median follow-up of 3.6 years, only two or three of the study participants experienced a recurrence of their cancer – accounting for less than 2 percent of the entire group – of developed other health problems.

"The findings suggest that for many women with this type of [breast cancer](#), this regimen should be considered one of the standard strategies for recurrence prevention," Winer remarks.

Provided by Dana-Farber Cancer Institute

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