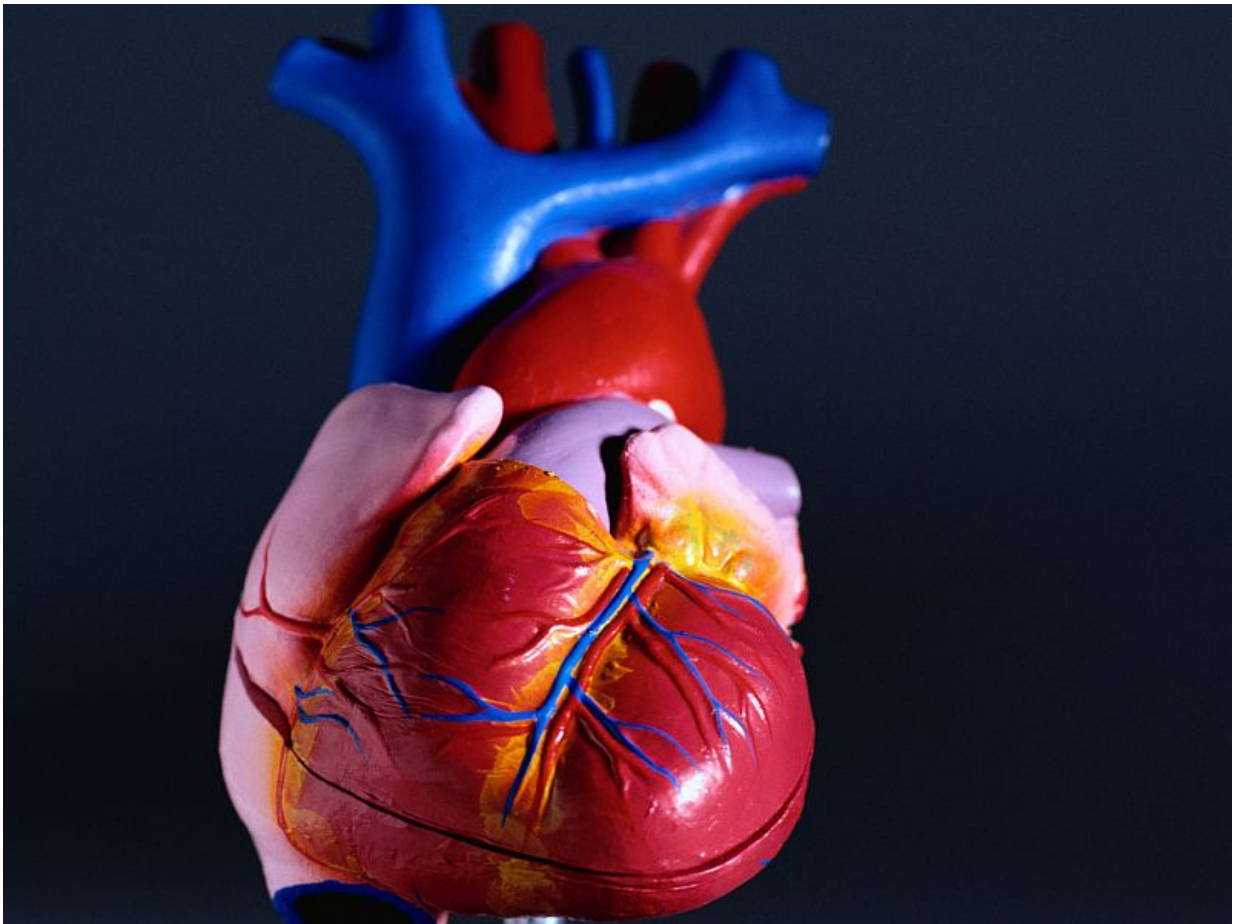


Meds don't cut trastuzumab-tied left ventricular remodeling

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(HealthDay)—For patients with human epidermal growth factor receptor

2-overexpressing (HER2-positive) early breast cancer, perindopril and bisoprolol do not prevent trastuzumab-mediated left ventricular remodeling, according to a study published online Nov. 28 in the *Journal of Clinical Oncology*.

Edith Pituskin, R.N., Ph.D., from the University of Alberta in Edmonton, Canada, and colleagues conducted a placebo-controlled trial involving patients with HER2-positive early breast cancer. Participants were randomized to receive perindopril (33 patients), bisoprolol (31 patients), or placebo (30 patients) for the duration of trastuzumab adjuvant therapy. Left ventricular volumes and left ventricular ejection fraction (LVEF) were determined by cardiac magnetic resonance imaging at baseline and post-cycle 17.

The researchers found that the drugs were well tolerated, with no serious adverse events reported. The indexed left ventricular end diastolic volume increased in patients treated with perindopril, bisoprolol, and placebo ($P = 0.36$). The trastuzumab-mediated decline in LVEF was attenuated in bisoprolol-treated patients relative to patients treated with perindopril and placebo in secondary analyses ($P = 0.001$). On multivariable analysis, perindopril and bisoprolol use independently predicted maintained LVEF.

"Perindopril and bisoprolol were well tolerated in [patients](#) with HER2-positive early [breast cancer](#) who received trastuzumab and protected against cancer therapy-related declines in LVEF; however, trastuzumab-mediated [left ventricular](#) remodeling—the primary outcome—was not prevented by these pharmacotherapies," the authors write.

Two authors disclosed financial ties to the pharmaceutical industry.

More information: [Full Text](#)

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