



Federaal Kenniscentrum voor de Gezondheidszorg
Centre Fédéral d'Expertise des Soins de Santé
Belgian Health Care Knowledge Centre

Breast cancer in women diagnosis, treatment and follow-up

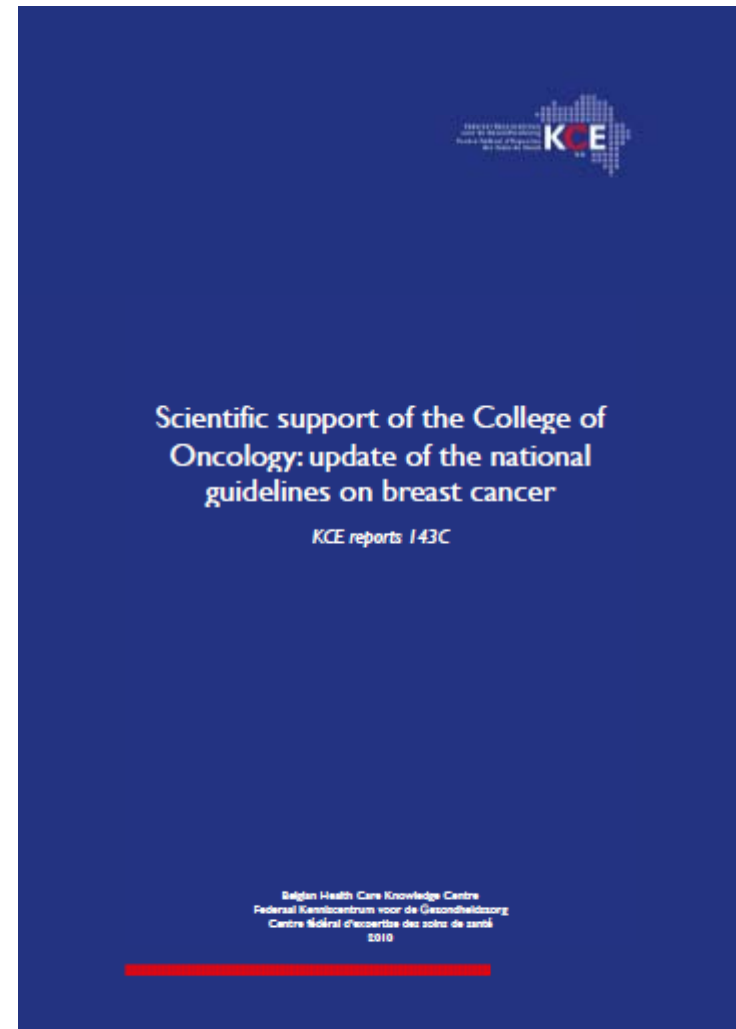
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Background

First global update
published in 2010
(KCE report 143)

Recommendation: In
view of the changing
evidence, this
guideline should be
regularly updated

More efficient
approach: by **alert**
messages from the
GDG



Four main topics to update

SLND vs. ALND

- Sentinel lymph node(s) dissection vs. axillary lymph node dissection after positive sentinel lymph node biopsy

Bisphosphonates

- The use of bisphosphonates in early non-metastatic cancer

Trastuzumab

- The combination of trastuzumab with chemotherapy regimens

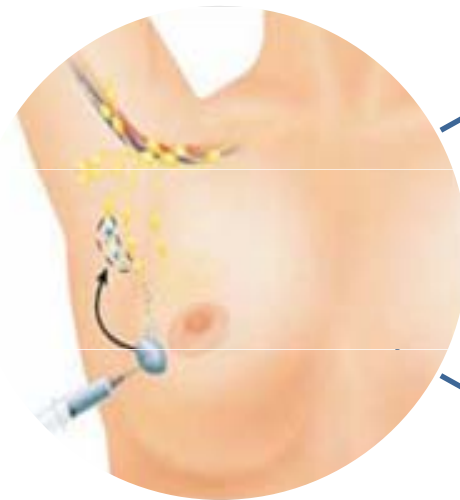
Bevacizumab

- The use of bevacizumab in metastatic breast cancer

1. Standard care: axillary treatment

SENTINEL LYMPH NODES
the lymph nodes closest to the tumor

Sentinel
Lymph Nodes

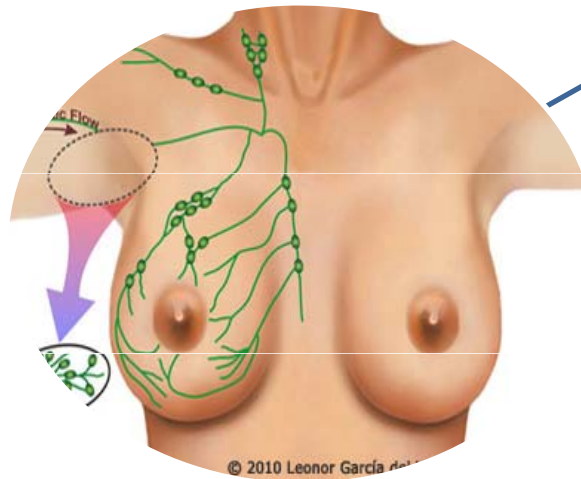


Negative
SLN
biopsy

Positive
SLN
biopsy

- No other treatment for the axilla
- Axillary lymph node dissection (ALND)

1. Consequences of ALND



Targeted objectives

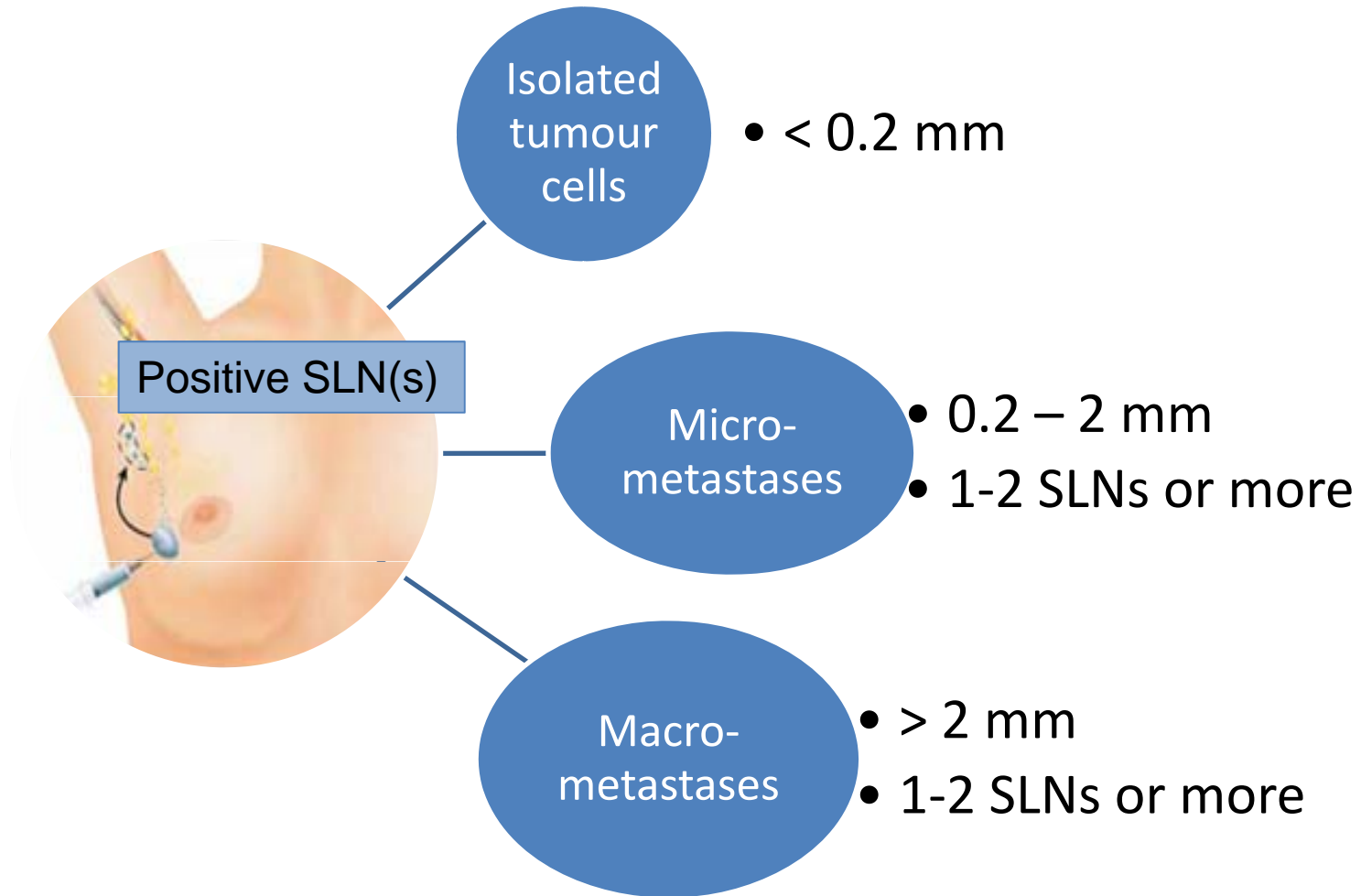
- **Local control**
- 5-y overall survival
- 5-y disease-free survival

Complications

- Sensory changes in the arm
- Pain syndromes
- Limited arm range of motion
- Frozen shoulder
- Lymphoedema



1. ALND: always useful?



1. SLN dissection vs. axillary dissection

5-year overall survival

- Macrometastases: SLND non inferior to ALND
- Micrometastases: SLND non inferior to ALND

5-year disease-free survival

- Macrometastases: SLND non inferior to ALND
- Micrometastases: SLND non inferior to ALND

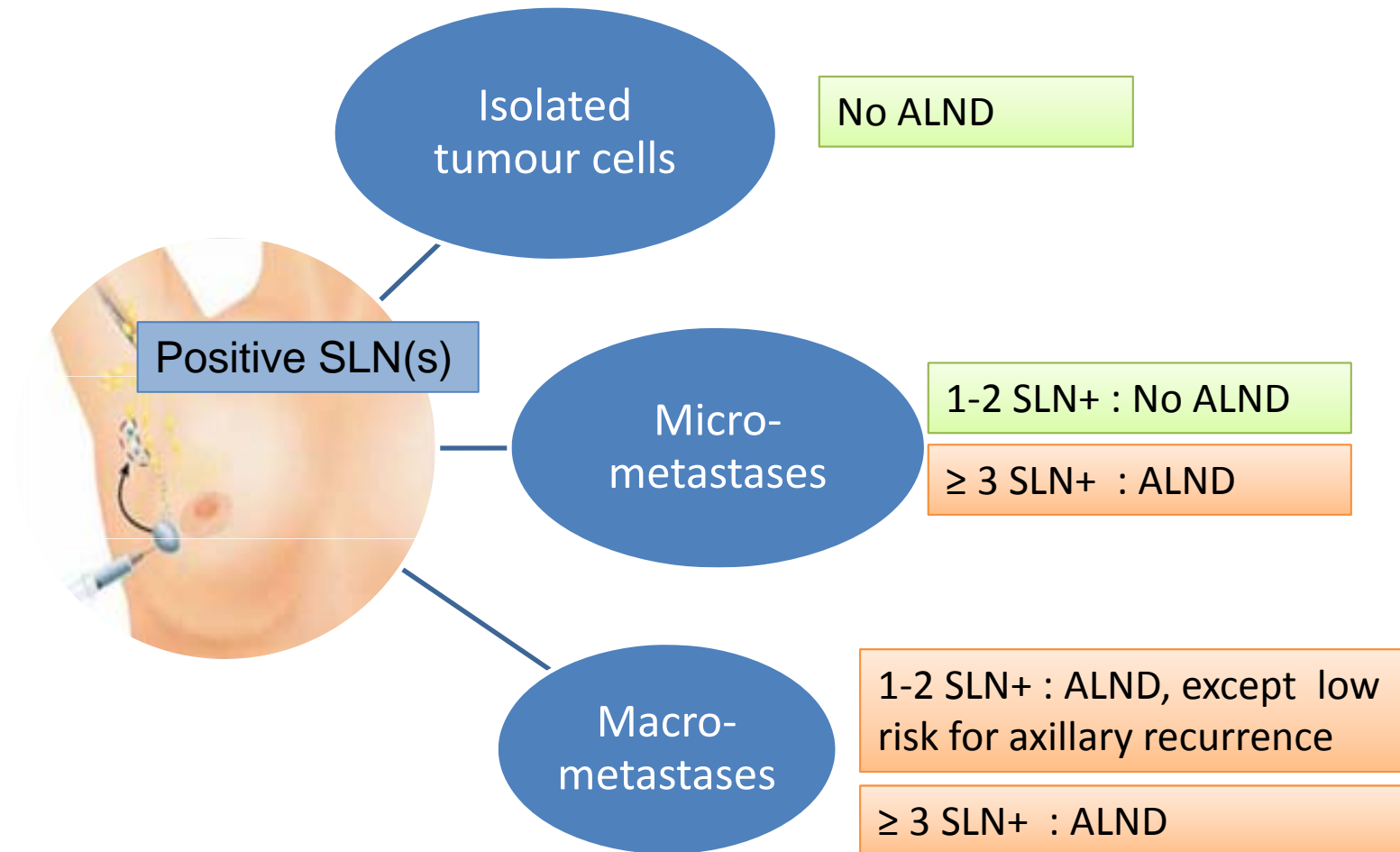
Axillary recurrence

- Macrometastases: risk difference +0.14% [95%CI -0.12% to 0.41%]
- Micrometastases: risk difference +1.51% [95%CI -1.59% to 4.62%]
- Isolated tumour cells: risk difference +0.94% [95% CI -0.77% to 2.66%]

Complications

- Less axillary paresthesias after 12 months
- Less lymphoedema after 12 months

1. Clinical recommendations



2. Bisphosphonates in early breast cancer without bone metastases

Overall Survival

- 8 studies – 11 198 women
- RR= 0.85 (0.72 – 1.00)

Disease-free survival

- 5 studies – 8 874 women
- RR= 0.90 (0.76 – 1.06)

Osteonecrosis of the jaw

- 3 studies – 5 269 women
- RR= 18.79 (2.52 – 139.88)

Clinical recommendations

- Bisphosphonates cannot be recommended as an adjuvant therapy

3. Trastuzumab and chemotherapy

Trastuzumab

- Indicated for women with HER2-positive, node-positive or high-risk node-negative breast cancer (tumour size > 1 cm) with a left ventricular ejection fraction of $\geq 55\%$ and no important cardiovascular risk factors
- To combine with chemotherapy

Non-anthracycline or anthracycline?

- No difference on survival
- Higher cardiotoxicity when Trastuzumab is administered after anthracycline-containing chemotherapy
- Either with a taxane in an anthracycline containing regimen or with a non-anthracycline regimen (TCH)

Monitoring & information

- Cardiac function should be monitored during treatment (e.g. every 3 months) and during follow-up
- Benefits and risks of each combined treatment have to be discussed with the patient

4. Bevacizumab in metastatic cancer

Disease-free survival

- 1st line - HR 0.67 (0.61 to 0.73)
- 2nd line - HR 0.78 (0.64 to 0.93)

Overall Survival

- 1st line - HR 0.93 (0.84 to 1.04)
- 2nd line - HR 0.90 (0.71 to 1.14)

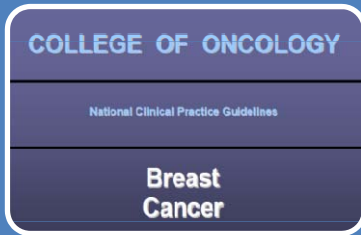
Adverse events

- High blood pressure, blood clots in arteries, haemorrhages and bowel perforations
- OR 1.77 (1.44 to 2.18)

Clinical recommendations

- Bevacizumab cannot be recommended
- FDA withdrew approval for bevacizumab for MBC in 2011 → *KCE has read for you*

Policy recommendations



To facilitate the implementation of this guideline (online tool).

To be updated according to new evidence.



To reassess the quality of care using the KCE quality indicators and compare the results with the baseline evaluation (2001-2006 data).



Professional associations: key role in the dissemination (websites, continuing medical education, attractive and user-friendly tools).



Colophon

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Colophon

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