


XXXII CONGRESSO NAZIONALE AIRO  
XXXIII CONGRESSO NAZIONALE AIRB  
XII CONGRESSO NAZIONALE AIRO GIOVANI

# AIRO2022

Radioterapia di precisione per un'oncologia innovativa e sostenibile

BOLOGNA, 25-27 NOVEMBRE  
PALAZZO DEI CONGRESSI

 Associazione Italiana  
Radioterapia e Oncologia clinica

 Società Italiana di Radiobiologia

 Associazione  
Italiana  
Radioterapia  
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clinica  






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## **Radioterapia post-operatoria in pazienti con tumore della mammella trattate con chemioterapia neoadiuvante: esperienza di un singolo centro**

Caroprese M, Chioccola E, Coppola S, Goodyear CA, Barillaro A, D'Arienzo M, Petrazzuoli M, Viggiano A, Clemente S, Oliviero C, Lanzini I, Arpino G, Giuliano M, De Angelis C, Forestieri V, Farella A, Pacelli R, Conson M.



## DICHIARAZIONE

### Relatore: MARA CAROPRESE

Come da nuova regolamentazione della Commissione Nazionale per la Formazione Continua del Ministero della Salute, è richiesta la trasparenza delle fonti di finanziamento e dei rapporti con soggetti portatori di interessi commerciali in campo sanitario.

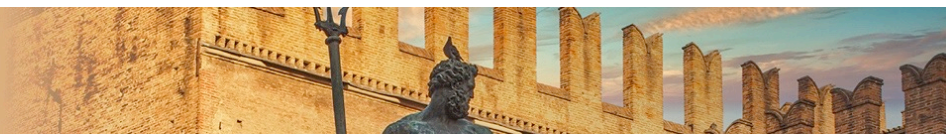
- Posizione di dipendente in aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Consulenza ad aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Fondi per la ricerca da aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Partecipazione ad Advisory Board **(NIENTE DA DICHIARARE)**
- Titolarità di brevetti in compartecipazione ad aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Partecipazioni azionarie in aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Altro



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## Pathological Complete Response in Neoadjuvant Treatment of High-Risk Early-Stage Breast Cancer: Use as an Endpoint to Support Accelerated Approval Guidance for Industry

REVIEW

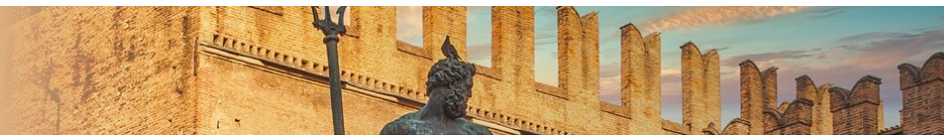
Open Access



## Selective elimination of breast cancer surgery in exceptional responders: historical perspective and current trials

Raquel F. D. van la Parra<sup>1,2</sup> and Henry M. Kuerer<sup>2\*</sup>

U.S. Department of Health and Human Services  
Food and Drug Administration  
Oncology Center of Excellence  
Center for Drug Evaluation and Research (CDER)  
Center for Biologics Evaluation and Research (CBER)



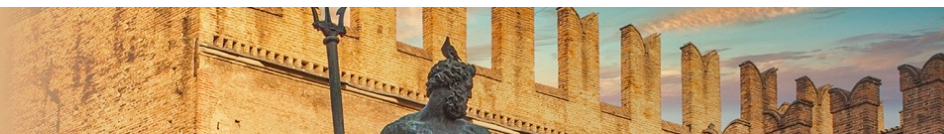
Neoadjuvant systemic therapy

Radical surgery

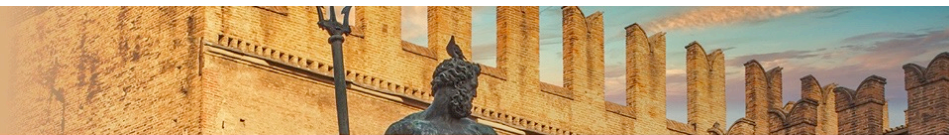
Adjuvant radiotherapy

April 2004 →  
May 2021

To investigate the patterns, timing, and risk factors for recurrence and survival outcomes



	n=127
Age, years (range)	50 (25-77)
Clinical Stage	
2	76 (59.8)
3	51 (40.2)
Clinical node	
N neg.	19 (15.0)
N pos.	108 (85.0)
Luminal subgroup	
Luminal A	27 (21.3)
Luminal B Her2 pos.	42 (33.1)
Luminal B Her2 neg.	26 (20.5)
Her 2+	14 (11.0)
Triple negative	19 (15.0)
Grading	
1-2	53 (41.7)
3	55 (43.3)
NR	19 (15.0)
Histological types	
NST	112 (88.2)
Other	14 (11.0)
NR	1 (0.8)



n= 127

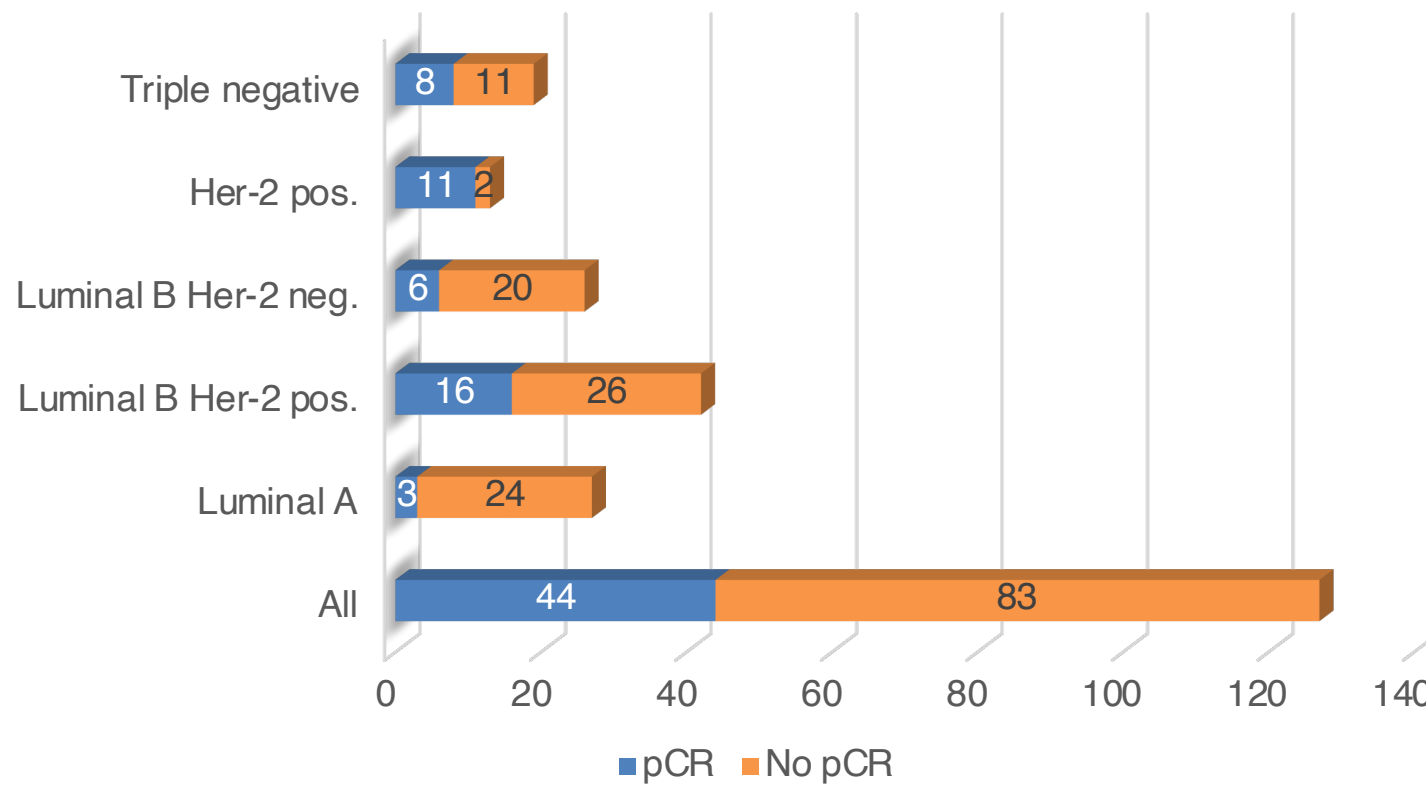
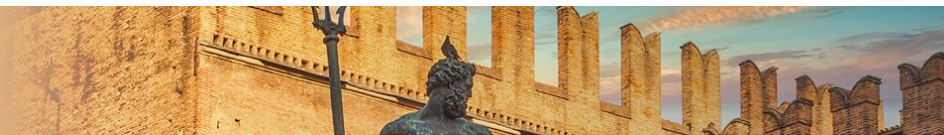
BCS  
n= 73 (57.5)

Mastectomy  
n= 54 (42.5)

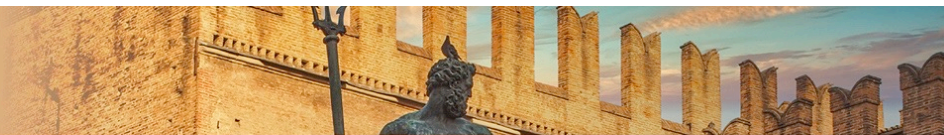
1-2 dissected lymph  
nodes  
n= 11

3-9 dissected  
lymph nodes  
n= 64

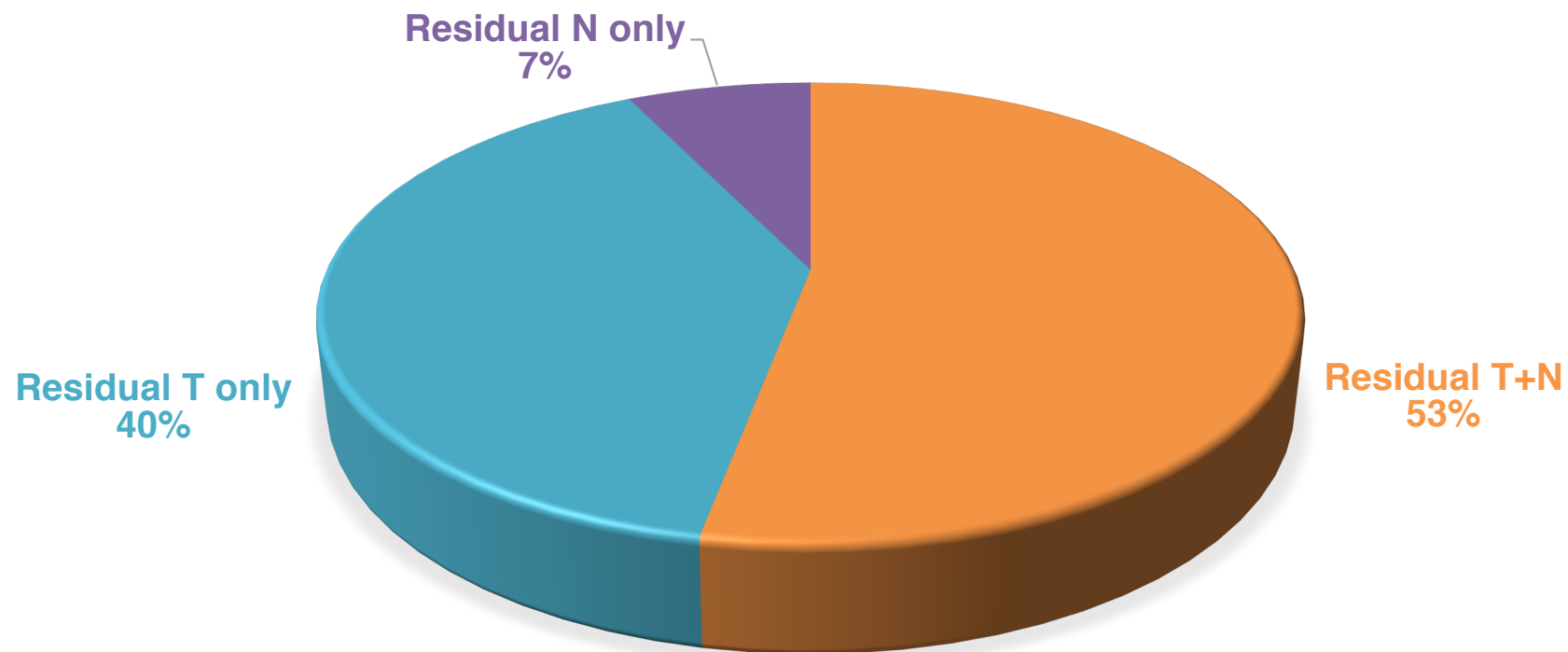
>9 dissected  
lymph nodes  
n= 49

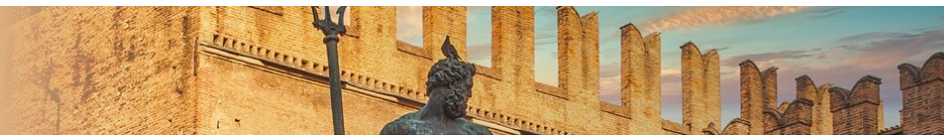




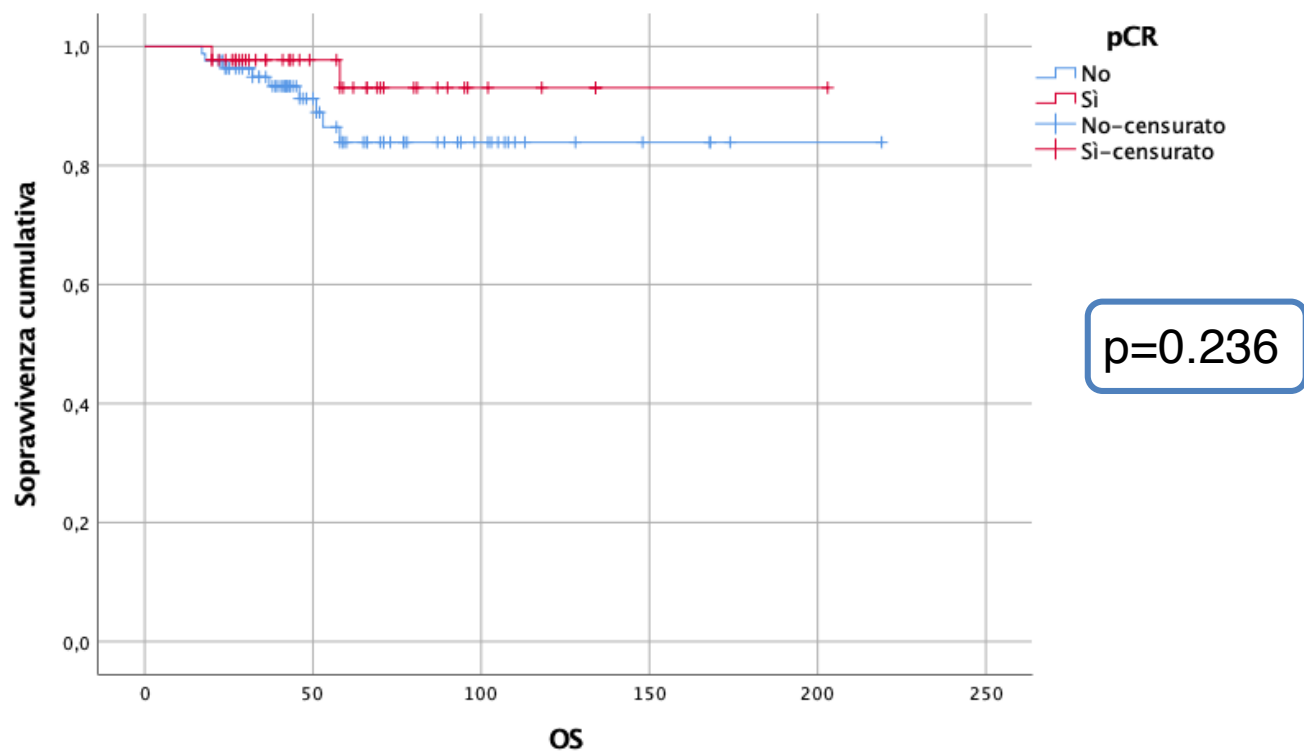


## NO pCR

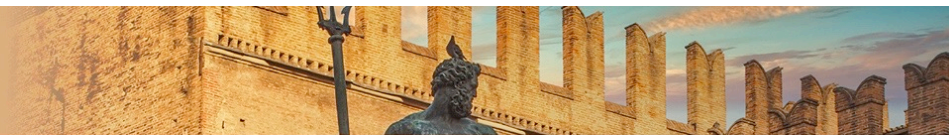




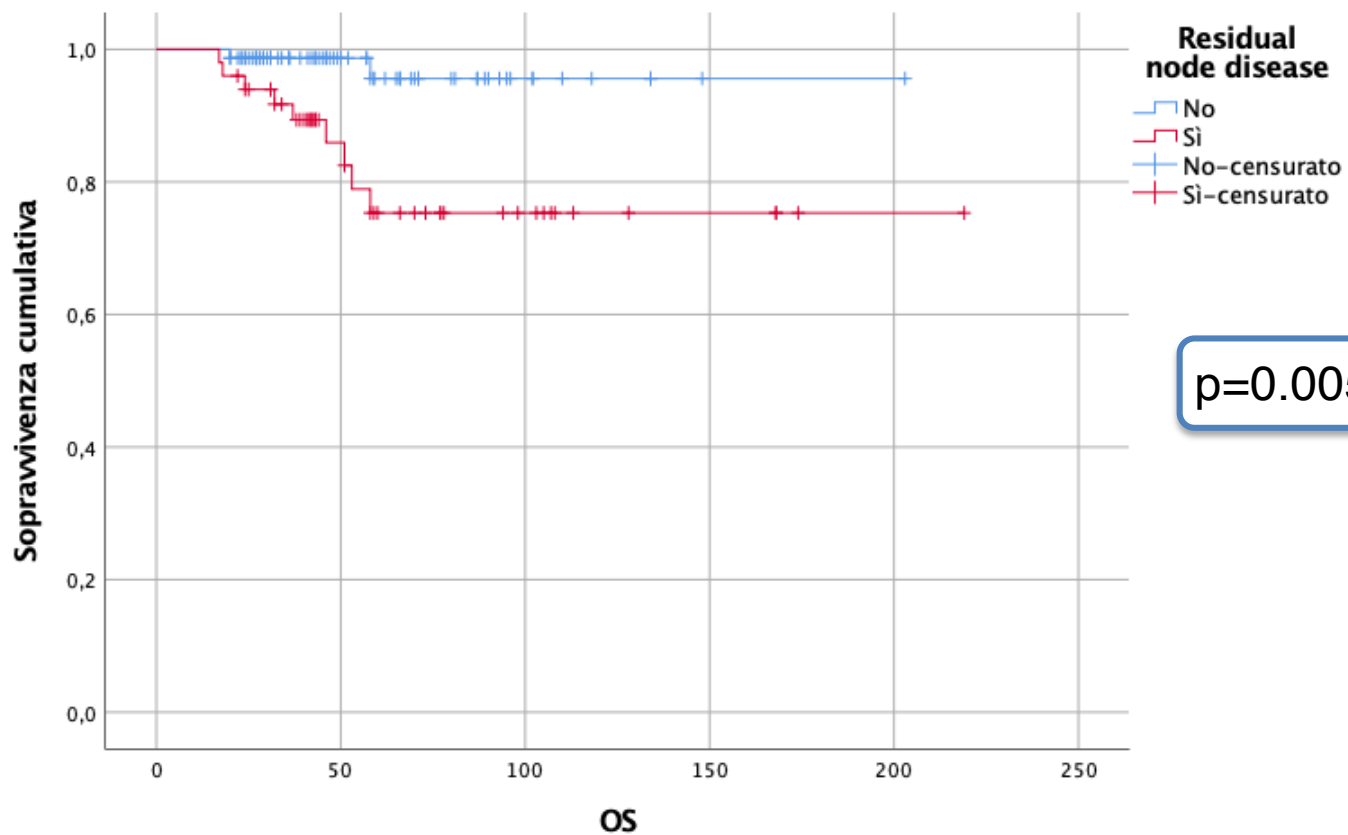
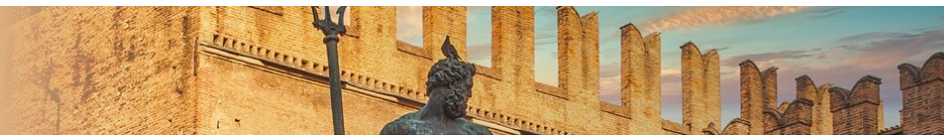
## FUP mediano 36 mo (5-209)



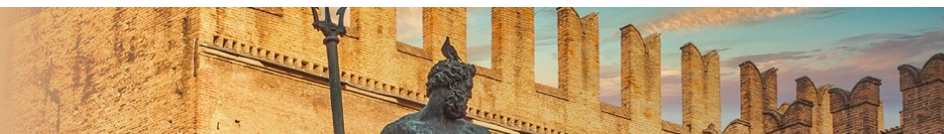




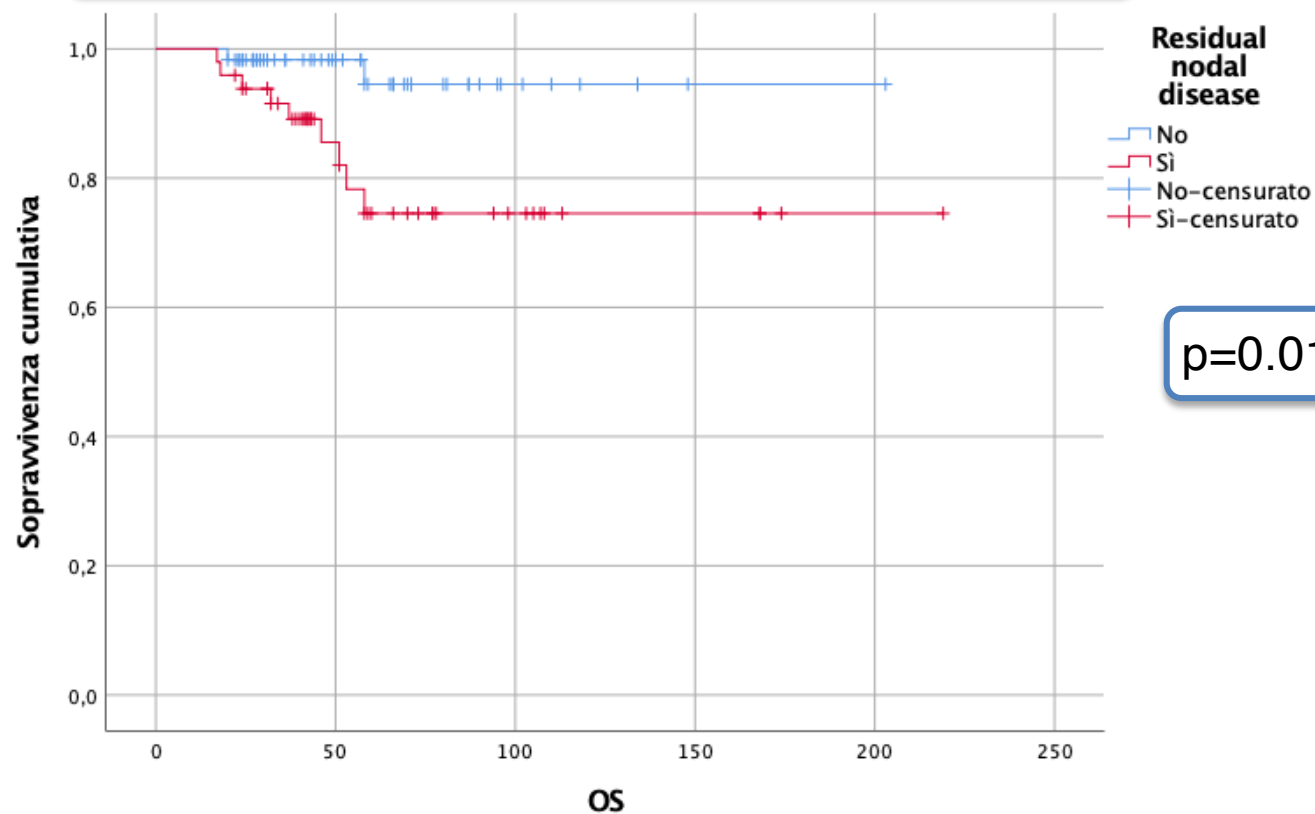
	<i>p-value</i>
Menopausal status ( <i>pre vs post</i> )	0.278
Clinical Stage ( <i>2 vs 3</i> )	0.788
Clinical node status ( <i>negative vs positive</i> )	0.146
Grading ( <i>1-2 vs 3</i> )	0.685
Hormonal receptor ( <i>positive vs negative</i> )	0.372
Her-2 ( <i>positive vs negative</i> )	0.431
Ki-67 ( <i>&lt;20 vs &gt;20</i> )	0.854
Residual T	0.390
Residual N	0.003

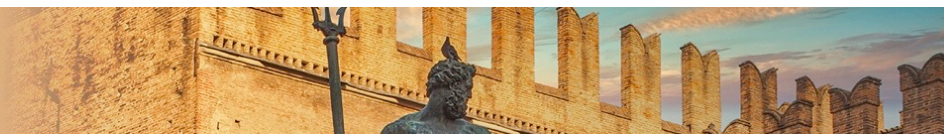






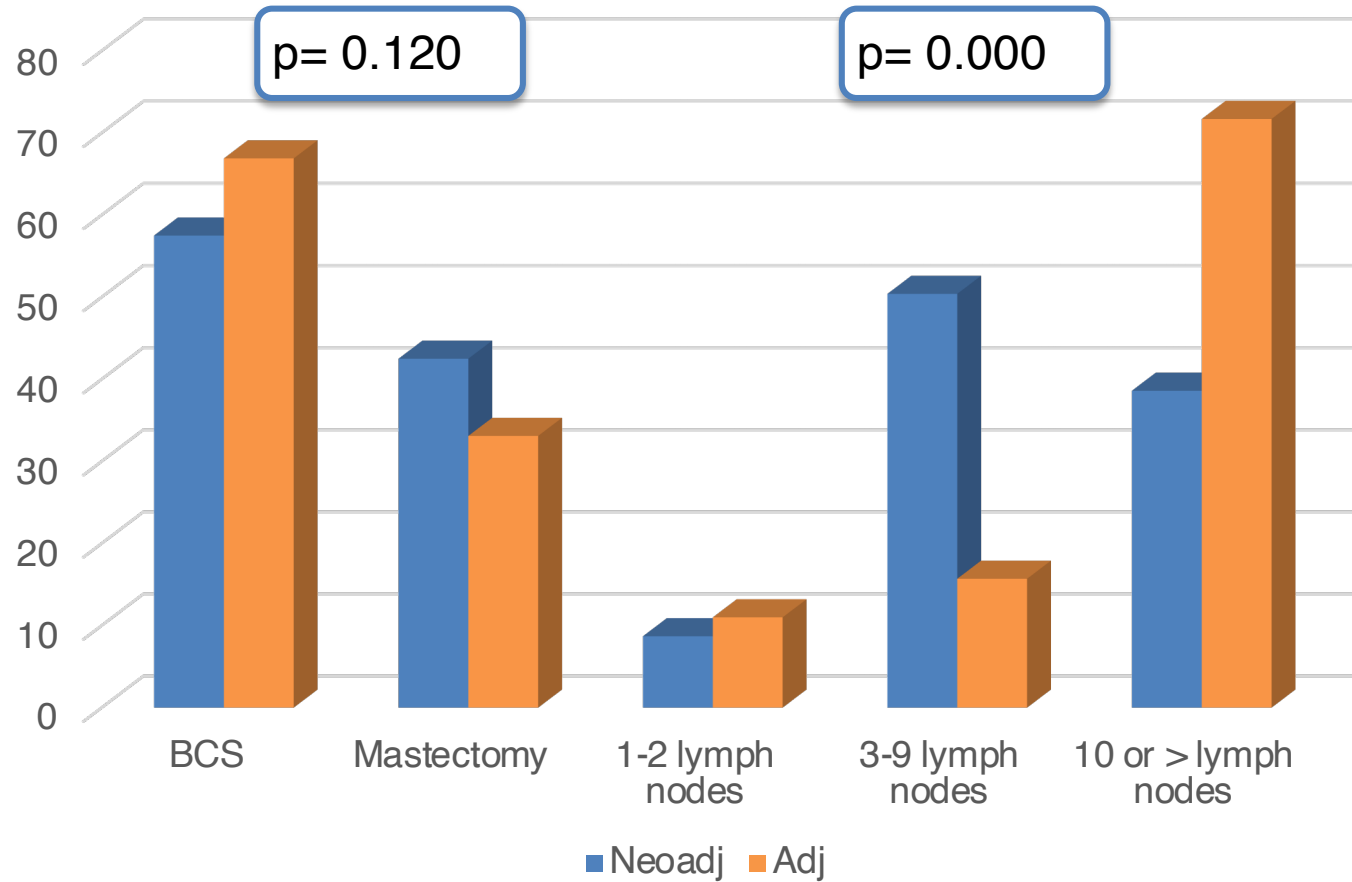
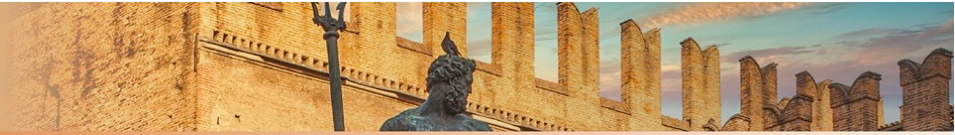
## cN positive patients

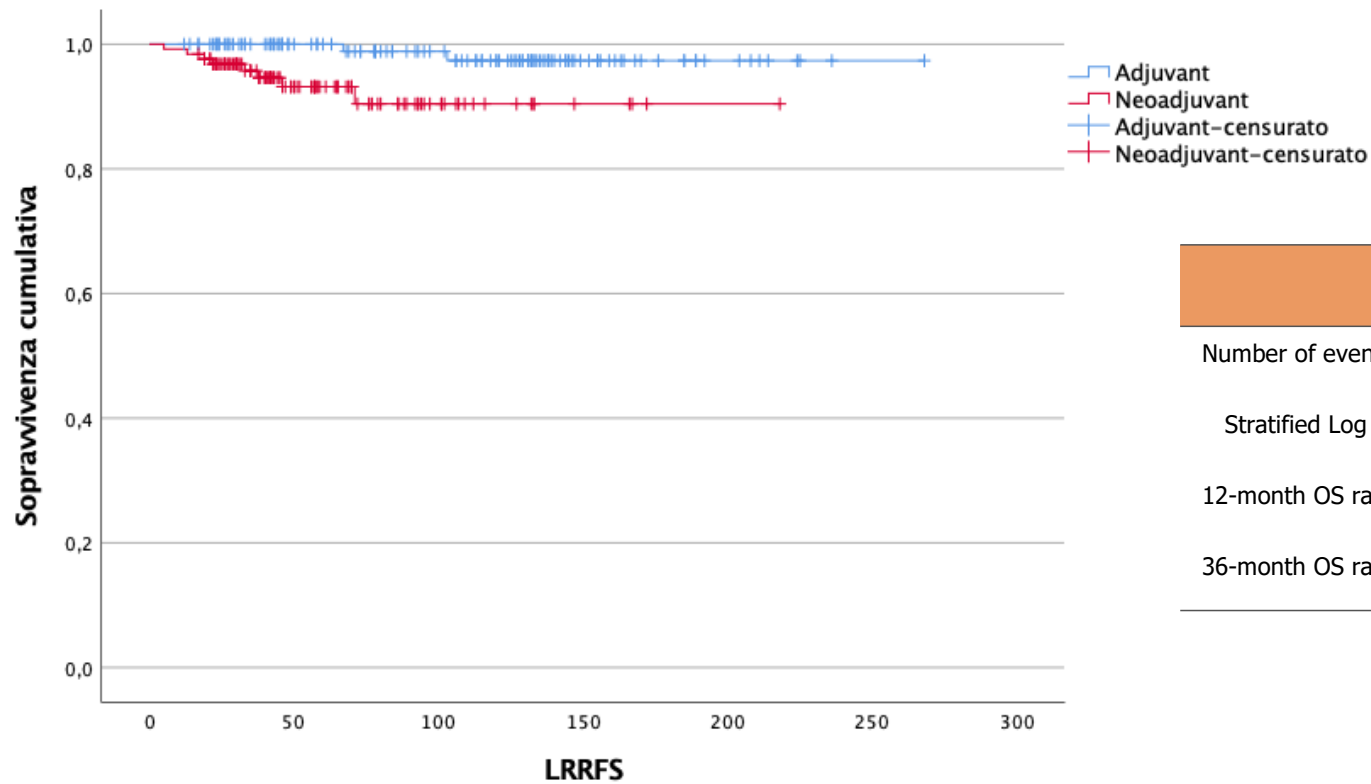
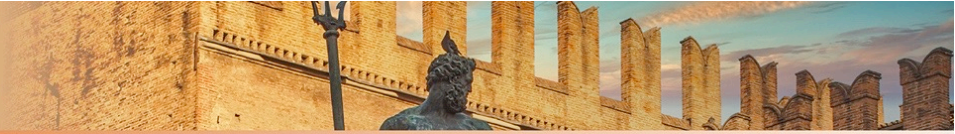




	n=127	n=127	p-value
Age, years (range)	50 (25-77)	55 (26-80)	0.864
Clinical Stage			
2	76 (59.8)	76 (59.8)	1.000
3	51 (40.2)	51 (40.2)	
Clinical node			
N neg.	19 (15.0)	19 (15.0)	1.000
N pos.	108 (85.0)	108 (85.0)	
Luminal subgroup			
Luminal A	27 (21.3)	27 (21.3)	1.000
Luminal B Her2 pos.	42 (33.1)	42 (33.1)	
Luminal B Her2 neg.	26 (20.5)	26 (20.5)	
Her 2+	13 (10.2)	13 (10.2)	
Triple negative	19 (15.0)	19 (15.0)	
Grading			
1-2	53 (41.7)	50 (39.4)	0.378
3	55 (43.3)	74 (58.3)	
NR	19 (15.0)	3 (2.4)	
Histological types			
NST	112 (88.2)	113 (89.0)	0.549
Other	14 (11.0)	13 (10.2)	
NR	1 (0.8)	1 (0.8)	







	Neoadjuvant	Adjuvant
Number of events	8	2
Stratified Log Rank P value	0.010	
12-month OS rate, %	96.8	100
36-month OS rate, %	96.8	100



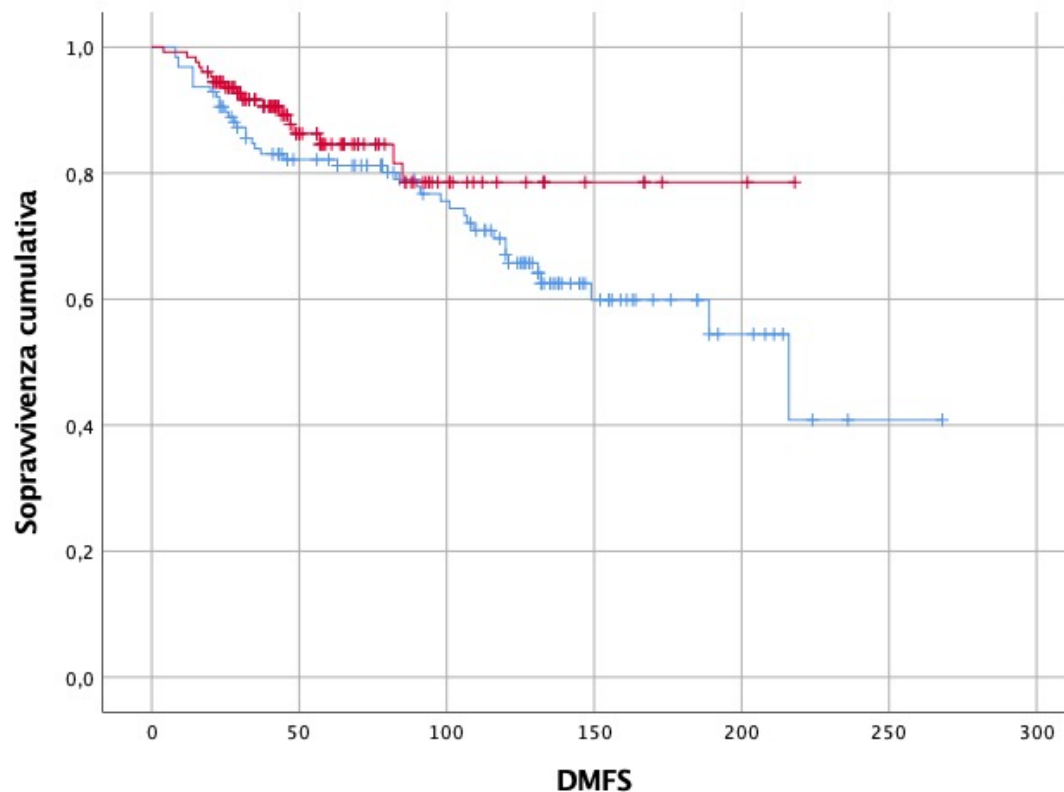
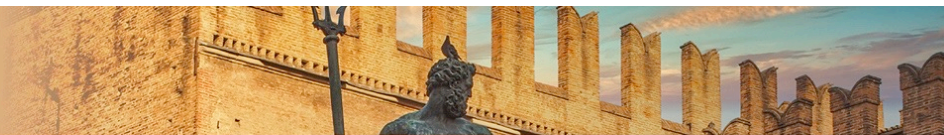
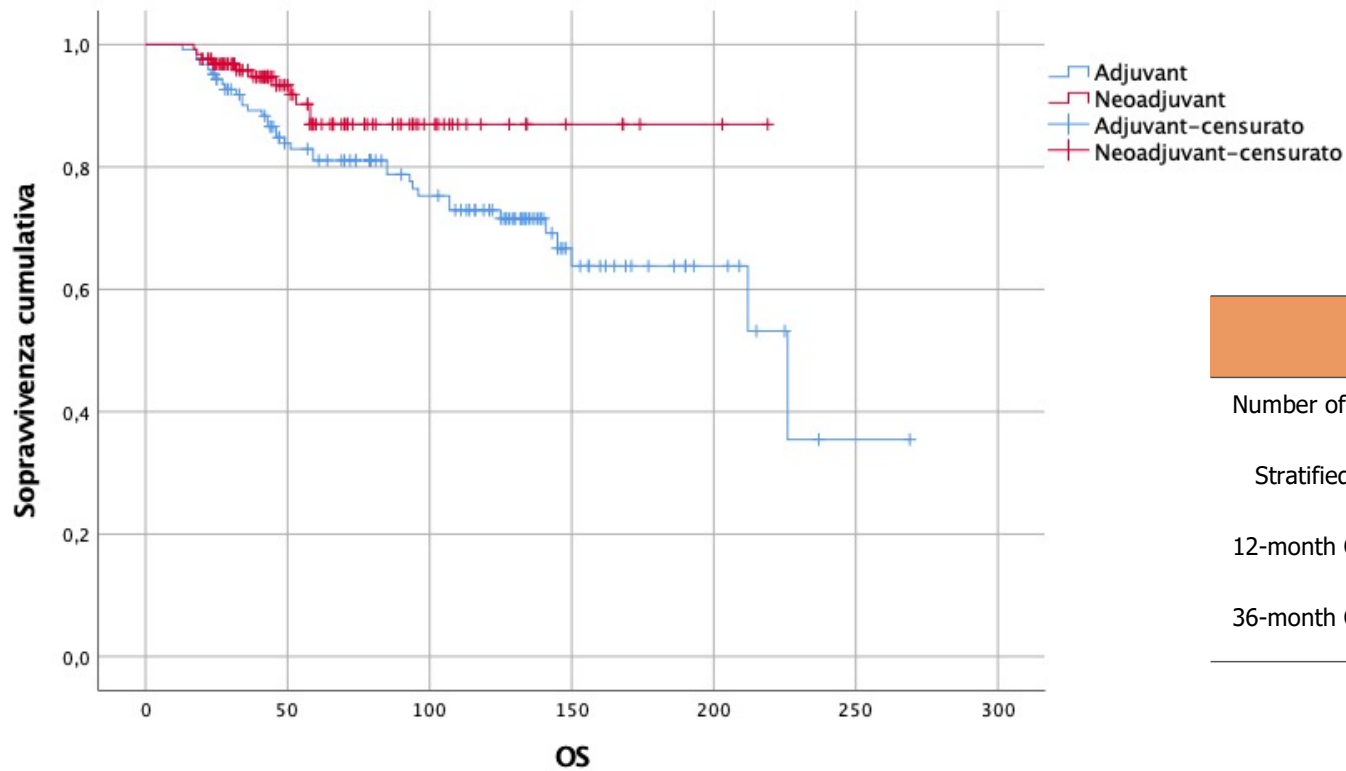


Tavola di contingenza IM \* DMFS\_dic

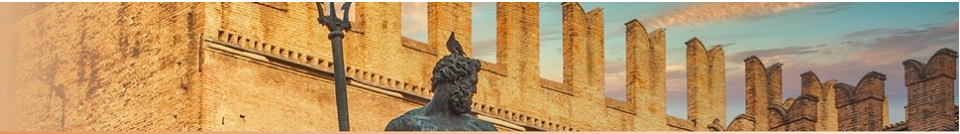
		DMFS_dic		Totale	
		0	1		
IM	0	Conteggio	108	39	147
		% in DMFS_dic	85,0%	97,5%	88,0%
1	Conteggio	19	1	20	
	% in DMFS_dic	15,0%	2,5%	12,0%	
Totale	Conteggio	127	40	167	
	% in DMFS_dic	100,0%	100,0%	100,0%	

Test del chi-quadrato

	Valore	gl	Significatività asintotica (bilaterale)	Sign. esatta (bilaterale)	Sign. esatta (unilaterale)
Chi-quadrato di Pearson	4,480 <sup>a</sup>	1	,034		
Correzione di continuità <sup>b</sup>	3,376	1	,066		
Rapporto di verosimiglianza	5,846	1	,016		
Test esatto di Fisher				,047	,024
Associazione lineare per lineare	4,454	1	,035		
N di casi validi	167				



	Neoadjuvant	Adjuvant
Number of events	11	35
Stratified Log Rank P value	0.037	
12-month OS rate, %	96.8	93.5
36-month OS rate, %	95.8	82.9



## Take home messages

- NAC, surgery and postoperative RT are an effective treatment in patients with high-risk BC.
- Residual nodal disease after NAC seems to be a more important prognostic factor of survival than residual breast burden.
- The increase in locoregional recurrence with NAC was not associated with any significant increase in distant recurrence or breast cancer mortality.