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THE CHALLENGE OF SURVIVAL OF PATIENTS WITH METASTATIC DE NOVO BREAST CANCER

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Introduction: Breast cancer is the most common cancer in women worldwide, whose treatment is increasingly effective with survival above 90% in initial tumors, while it ranges from 20% to 40.8% in metastatic tumors. However, metastatic breast cancer persists and the survival of these women and treatments remain a challenge for oncology. Objective: To analyze the prognostic factors associated with the survival of patients with metastatic de novo breast cancer. Material and Methods: This is a retrospective cohort of women with stage IV (metastatic) breast cancer, conducted from January 1, 2000 to 31 December 2012, treated at the AC Camargo Cancer Center. The overall 5-year survival (OS) by using the Kaplan-Meier product-limit estimator and the differences between the curves and Cox multiple regression by using log-Rank method were observed. Results: Out of 265 patients analyzed, 182 (68.7 %) were alive at the end of the follow-up. The 5-year survival rate was 29.9%. There was a significant difference in survival rates, according to the categorized age (\leq 50 years, 51–70 years, and \geq 71 years; p<0.046), primary breast tumor surgery (mastectomy and quadrantectomy; p<0.001), exclusive hormone therapy or multimodal treatment (p<0.001), chemotherapy when used in conjunction with radiotherapy, hormone therapy, target therapy, or surgery (p<0.088), treatment initiation period 2000-2005 and 2006-2012 (p<0.004), education, where the greater the school degree, the greater the survival (p<0.001), and luminal tumors (p<0.003). In multiple regression, surgery (p=0.001), chemotherapy (p=0.038), hormone therapy (p<0.001), luminal tumors (p=0.03), having HER2 tumor and using target therapy (p=0.001) and have been treated in the period from 2006 to 2012 (p=0.043) remained as predictive factors for a better prognosis. Conclusion: Patients undergoing resection of the primary tumor had longer survival and better prognosis.

Keywords: Breast Cancer; Survival; Metastasis.