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NEOADJUVANT CHEMOTHERAPY OF BREAST CANCER WITHOUT FURTHER SURGICAL INTERVENTION

Hagigat Valiyeva¹, Nigar Mehdiyeva¹, Elcin Huseynov¹, Tahmina Kosayeva¹, Emil Aghayev¹, Ismail Gafarov¹

¹Azerbaijan Medical University – Baku, Azerbaijan.

Objective: Neoadjuvant chemotherapy (NCT) is an accepted treatment approach for locally advanced and some early-stage breast cancers. The development in systemic NCT in last few years has progressively increased pathological complete response (pCR). As a result, breast surgeons sometimes perform surgery on breasts that contain no tumor cells. This study sought to evaluate the survival outcomes for patients with clinical complete response (cCR) to NCT who did not undergo surgery. **Methods:** This retrospective study has been carried out at the Oncology Clinic of Azerbaijan Medical University. The study identified 108 women with a diagnosis of invasive breast cancer cT1-4, N0-3, and M0 tumors who received NCT between 2013 and 2018 and who did not have surgery. Overall survival (OS) was compared between the cCR group and no-cCR group of patients after NCT. **Results:** In patients who did not undergo surgery, 44 (40.7%) had cCR, 51 (47.2%) had a partial response, and 13 (12.0%) had no response/progression. The median age was 45.6, median tumor size was 51.2 mm, and immunohistochemistry were as follows: luminal 53 (49.1%), HER2+ 31 (28.7%), and triple-negative 24 (22.2%), with a follow-up of 48–108 months. The 5-year OS was better in the cCR group than in the no-cCR group (90.9% vs 61.5%; $p=0.011$). **Conclusion:** To avoid surgery, it is critical to have the tools to accurately detect residual tumor disease and predict pCR after NCT. This study demonstrated that active surveillance or de-escalation therapy may be an option for patients who achieve cCR. Prospective studies are underway to determine whether a subgroup of patients may forgo surgery in the setting of cCR after NCT.

Keywords: Breast surgery. Neoadjuvant chemotherapy. Therapy.