

cutoff value (10% or 20%), and a worse survival was observed in the triple-negative subgroup (60.5%). In Figures 3 and 4, survival curves of the patients according to the Ki-67 index are shown. Worse survival rates were observed in the groups with a higher Ki-67 index, both in those groups with a Ki-67 >10% and >20%. **Conclusion:** Our study is in accordance with some findings of the AMAZONA study. A higher percentage of breast cancer diagnoses in the population under 50 years of age and a lower percentage of initial breast cancer were observed in our study when compared to data from high-income countries. We also observed that survival was related to staging as shown in previous studies from developed countries. Another finding was that classification of breast tumors by IHQ reflects different survival curves between Luminal A, hybrid, HER2-enriched, and TN groups regardless of the Ki-67 level. Although we were unable to establish a cutoff value that would separate survival rates between luminal groups, Ki-67 had an independent prognostic value, and high values of this marker were associated with a greater use of chemotherapy.

Keywords: Breast cancer. Ki-67. Survival. Molecular.