UNDERSTANDING EARLY BREAST CANCER AND THE RISK OF RECURRENCE
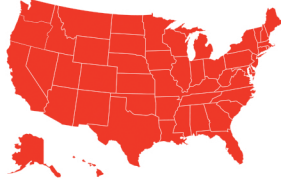
ABOUT BREAST CANCER

Breast cancer is the **most common cancer among women** worldwide, **surpassing lung cancer** as the most commonly diagnosed cancer with **~2.3 million** new cases in a year.[1]

In the United States:

➤ More than **300,000** new cases of breast cancer will be diagnosed in 2023 (**~298,000** women and **2,800** men).[2]

➤ Breast cancer is the second leading cause of cancer death in women.[2]

➤ There is a **~41%** higher mortality rate among Black women compared with white women.[3]

NOT ALL TYPES OF BREAST CANCER ARE THE SAME

How breast cancer is treated depends upon many different factors, including[4]:

- **Molecular subtype** (based on gene expression in cancer)
- **The stage of disease** (i.e., 0, I, II, III, A-B-C and IV)
- **Increased levels of certain proteins** (e.g., estrogen or progesterone hormone receptor [HR], human epidermal growth factor receptor 2 [HER2]) or **mutations**
- **Other clinical** (e.g., physical exams, imaging) and/or **pathological** (e.g., found during biopsy) factors

WHAT TO KNOW ABOUT THE RISK OF HR+, HER2- BREAST CANCER RECURRENCE

➤ It is estimated that **90%** of all breast cancers are detected at an early stage. Approximately **70%** of all breast cancer cases are the HR+, HER2- subtype.[5,6]

➤ Although the prognosis for **HR+, HER2- early breast cancer** (EBC) is generally favorable, high risk patients are **three times more likely** than those with low risk characteristics to experience recurrence — with the majority being incurable metastatic disease.[7]

➤ Risk of recurrence is greatest within the initial years after diagnosis.[8]

GOALS OF TREATMENT

The ultimate goal of breast cancer treatment is to prevent the cancer from spreading or coming back and also to help patients live longer. Endocrine therapy, also known as hormonal therapy, is appropriate for many patients and some may need other treatment options to help prevent cancer from returning.[9]

RISK OF RECURRENCE IS THE LIKELIHOOD THAT THE CANCER WILL COME BACK. SCIENTISTS ARE LEARNING WHY SOME CANCERS ARE MORE LIKELY TO RECUR THAN OTHERS.

WHAT ARE RECURRENCE RISK FACTORS?

Identifying breast cancer that has a greater risk of coming back involves looking at a variety of factors that extend beyond assessment of estrogen receptor (ER), progesterone receptor (PR), and HER2 status and can include[10,11]:

**NUMBER OF POSITIVE LYMPH NODES**
to which the breast cancer has spread (also known as nodal involvement)

TUMOR SIZE AND GROWTH WITHIN THE BREAST
to measure the tumor's width at the widest point in centimeters or millimeters

TUMOR GRADE
as an indicator of how fast a tumor is likely to grow and spread

MULTIGENE ASSAYS
which look at expression levels of some selected genes and may help predict likelihood of recurrence or, in some cases, response to chemotherapy

Researchers are investigating ways to better understand the risk of breast cancer coming back and what can be done to prevent recurrence. Identifying these factors can help patients and health care providers have informed conversations about suitable treatment options.

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