

**BACKGROUND**

In 2012, nearly 52,400 women received a new diagnosis of breast cancer in the United Kingdom.1 Approximately 80% of these cases were diagnosed in women aged 50 years or older and 12% in younger women.1

- Although endocrine therapy is the usual treatment for estrogen receptor–positive (ER+) and human epidermal growth factor receptor 2–negative (HER2–) metastatic breast cancer in postmenopausal women, patients ultimately experience disease progression on currently available therapies, resulting in an ongoing need in the population.
- Although there are several studies comparing the efficacy of metastatic breast cancer treatments within clinic trial settings, real-world data on treatment patterns, healthcare utilization, and outcomes for patients diagnosed with ER+/HER2– metastatic breast cancer are limited.

**STUDY OBJECTIVES**

The study aimed to describe the demographic profile, clinical characteristics, and real-world treatment patterns of postmenopausal women with ER+/HER2– metastatic breast cancer in the UK. The following objectives were assessed:

- The aim of the study was to describe the demographic profile, clinical characteristics, and real-world treatment patterns of postmenopausal women with ER+/HER2– metastatic breast cancer in the UK. The following objectives were assessed:

**METHODS**

- **Study design:** Retrospective cohort study.
- **Data source:** Medical record abstraction carried out in 2015 by 41 physicians across the UK.

**Physician inclusion criteria**

- Physicians and their oncology practices who were in practice for 2–30 years after the completion of formal training or board certification.

- **Study population:**
  - **Total:** 209 patients with ER+/HER2– metastatic breast cancer in the last 12 months.

**RESULTS**

**Physician Characteristics**

- All participating physicians were medical or clinical oncologists. Most practiced in the Greater London and South-East region (41.9%) or the Midlands and East (31.7%).

- Physicians had been in practice for an average of 11.7 years and treated an average of 91.6 patients with postmenopausal ER+/HER2– metastatic breast cancer in the last 12 months.

**Patient Demographic and Clinical Characteristics**

- Data from the medical records of 209 patients were abstracted in the UK. Most patients were required to have received at least 2 lines of therapy in the metastatic setting. Consequently, TTP and OS estimates do not include those who initiated third-line treatment (n= 116), 30.2% progressed. Disease progression was the most common reason for discontinuing first- (60.3% ), second- (68.4% ), and third-line (63.4% ) treatment.

- Table 3: Demographic and Clinical Characteristics of Female Patients with ER+/HER2– Metastatic Breast Cancer by Treatment Regimen

- **Table 3.** Demographic and Clinical Characteristics of Female Patients with ER+/HER2– Metastatic Breast Cancer by Treatment Regimen

- **Table 4.** Treatment Patterns of Patients with ER+/HER2– Metastatic Breast Cancer

- **Table 5.** Characteristic Total Characteristic Total

**TREATMENT PATTERNS**

- Although endocrine therapy is the recommended treatment for patients with ER+/HER2– metastatic breast cancer,1 a substantial proportion of patients received chemotherapy. In our sample, the proportion of patients with visceral disease was higher among those who received first-line chemotherapy than those who received endocrine therapy only, suggesting those who received chemotherapy may have required a more aggressive treatment.

- The median TTP was 15.1 months following first-line treatment, 10.1 months following second-line treatment, and 7.7 months following third-line treatment.

- Endocrine therapy only was the most common treatment for both first-line (41.1%) and second-line (54.1%) therapy and was administered for a median duration of 15.1 months (Table 3).

- **CONCLUSIONS**

- **Limitations**
  - Only 60% of patients were followed up through the 12-month period.
  - No predictor of treatment effectiveness could be identified.

- **REFERENCES**

- **Figure 2.** Time to Progression Among Patients With ER+/HER2– Metastatic Breast Cancer

- **Figure 3.** Treatment Patterns of Patients with ER+/HER2– Metastatic Breast Cancer

- **Figure 4.** Kaplan-Meier survival curve for overall survival (OS) of patients with ER+/HER2– metastatic breast cancer.