Long-term survivors among breast cancer patients with brain metastases

We read the article by Niwinska et al. [1] in which they carried out a comprehensive analysis of 222 consecutive patients with breast cancer and brain metastases. They found that median survival from brain metastases in recursive partitioning analysis Radiation Therapy Oncology Group prognostic class I, II and III were 15, 11 and 3 months, respectively. A recent retrospective study evaluated clinical data from 420 patients who had been diagnosed with breast cancer and brain metastasis from 1994 to 2004 at M. D. Anderson Cancer Center. In this study, median follow-up after brain metastasis was 6 months (range 0.7–95.9 months) and the overall median survival was 6.8 months [2]. Although the survival outlook for patients with breast cancer metastatic to brain is generally poor, there were some long-term survivors. Eighty-two patients in this study (19.5%) were alive at least 18 months after diagnosis of brain metastasis. Of these 82 patients, 25 patients (30%) were human epidermal growth factor receptor 2 positive. Furthermore, 18 (4.2%) were alive at least 60 months after this diagnosis. Compared with an unselected series of breast cancer patients, this longer surviving population was younger and was predominantly premenopausal. Most of these patients had tumors of ductal histologic type, T stage 1 or 2, N stage 0 or 1 and M0 stage at diagnosis. About half of these patients had estrogen receptor-positive or progesterone receptor-positive disease and 73% had grade III disease. Any or all of these characteristics may explain their potential for prolonged survival. In conclusion, detailed molecular characterization of brain metastases from breast cancer may lead to a more in-depth understanding of the biologic abnormalities that drive this malignant behavior and also may lead to the discovery of new therapeutic targets with improved therapeutic indices.

Z. Arik, E. Dogan, S. Aksoy & K. Altundag*

Department of Medical Oncology, Hacettepe University Institute of Oncology, Ankara, Turkey

(*E-mail: altundag66@yahoo.com)

references


doi:10.1093/annonc/mdp553
Published online 30 October 2009