



IV JORNADA SUL-BRASILEIRA DE MASTOLOGIA

Interpretação dos índices prognósticos anatomo-patológicos

Betina Vollbrecht

**Mestrado e Doutorado pelo IGG PUCRS
Preceptora do Curso de Especialização em Mastologia do
Centro de Mama PUCRS
Mastologista no Hospital do Câncer Mãe de Deus, Porto Alegre**

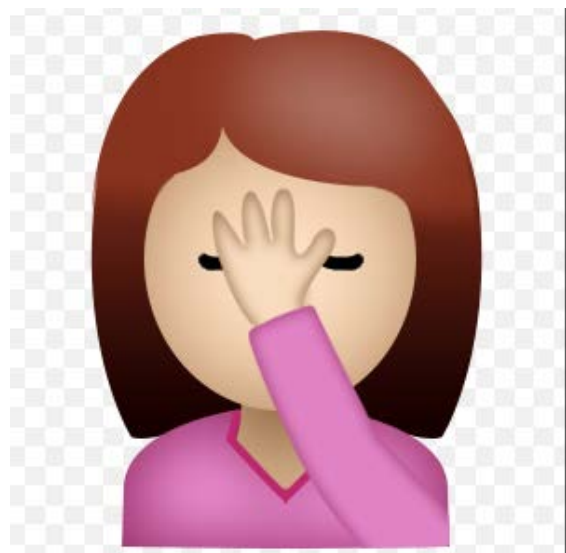




... índices prognósticos



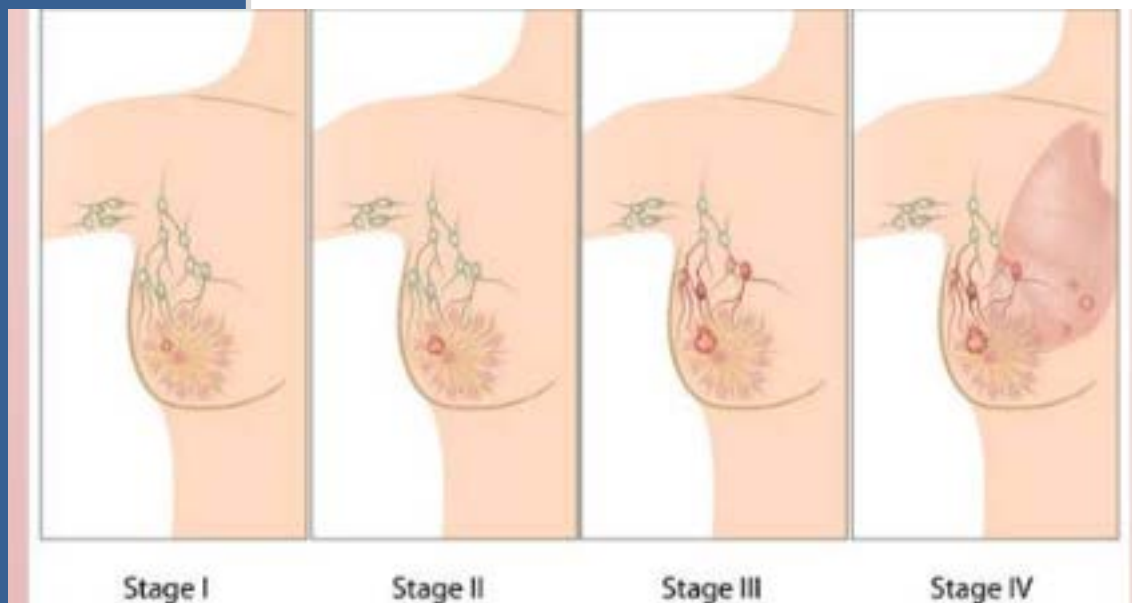
- “ Qual a chance que tenho de morrer?”



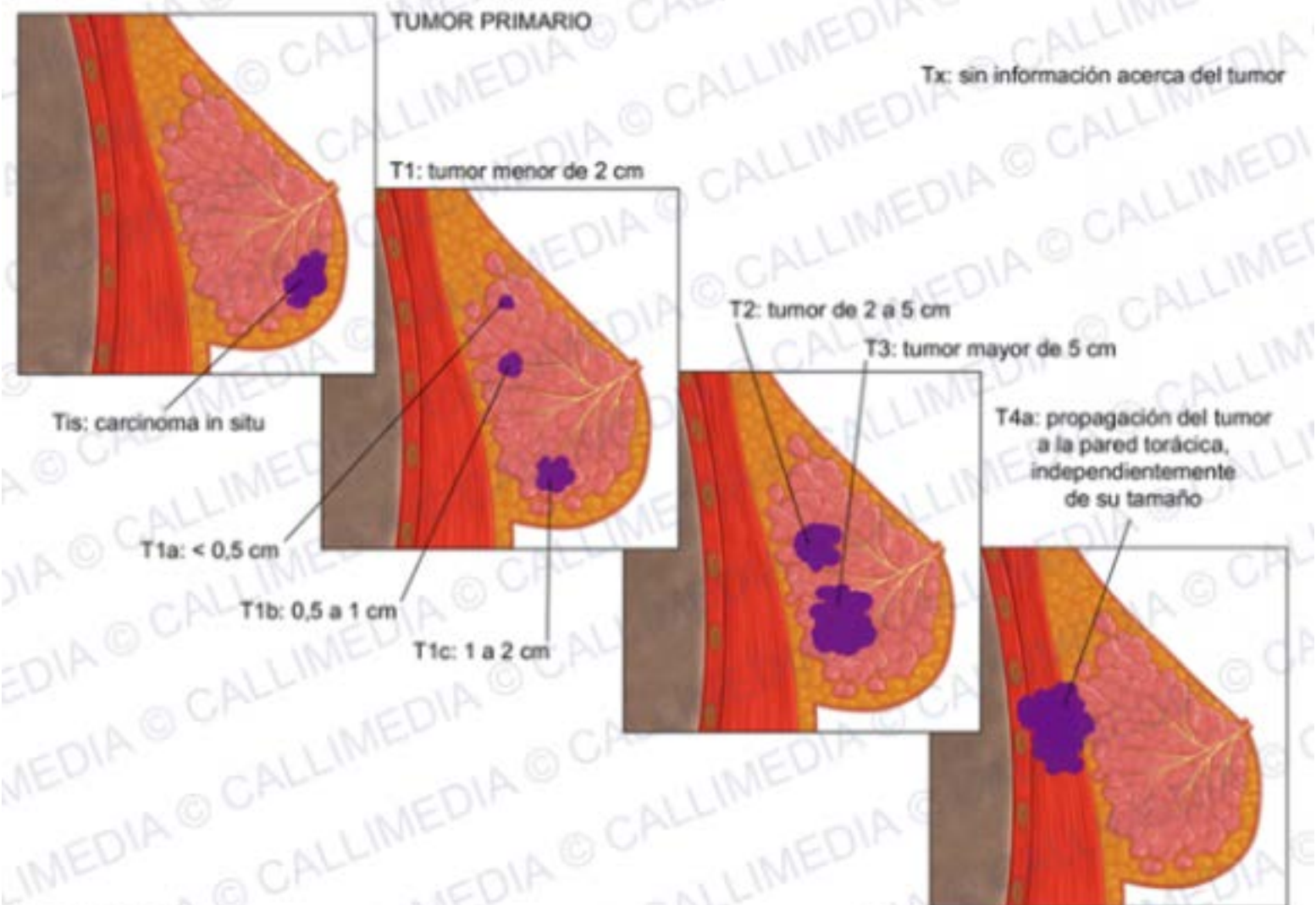
- “ Qual a chance que tenho de ficar CURADA deste câncer de mama?”
- “ Preciso fazer quimioterapia?”

índices pronósticos anatomo-patológicos

T
N
M

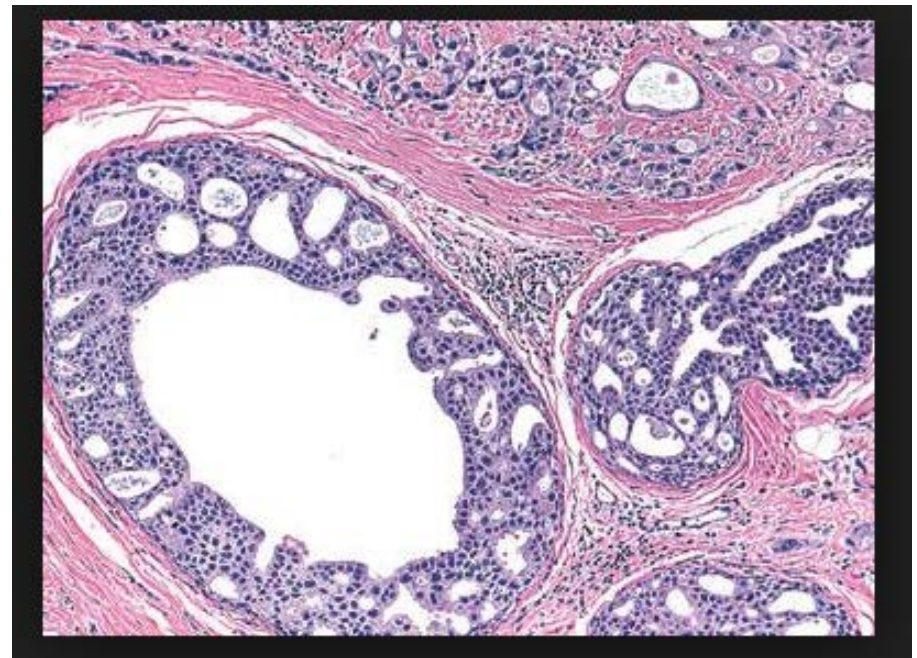


CLASIFICACIÓN TNM DEL CÁNCER DE MAMA



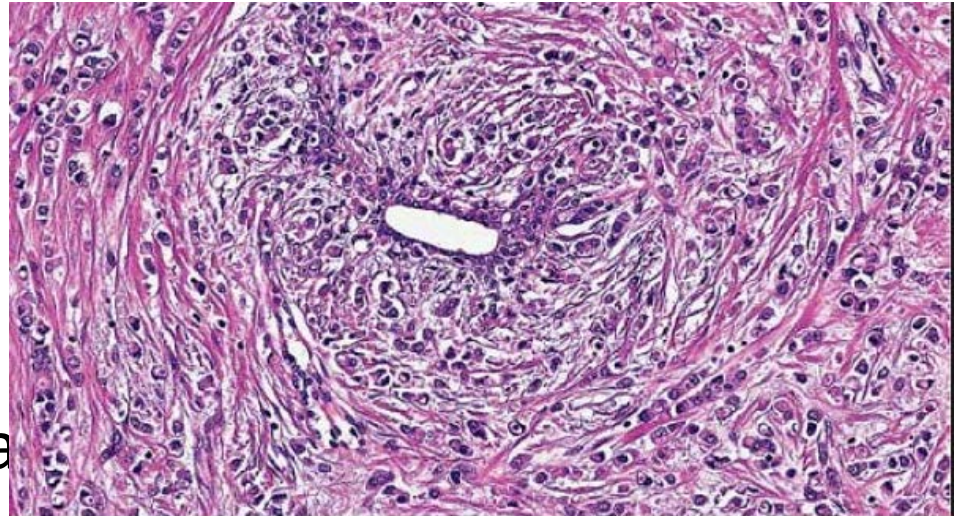
Tipo histológico

- excelente prognóstico:
tubular, cribriforme,
mucinoso e tubulo
lobular
- bom prognóstico:
tubular misto, lobular
alveolar, medular atípico

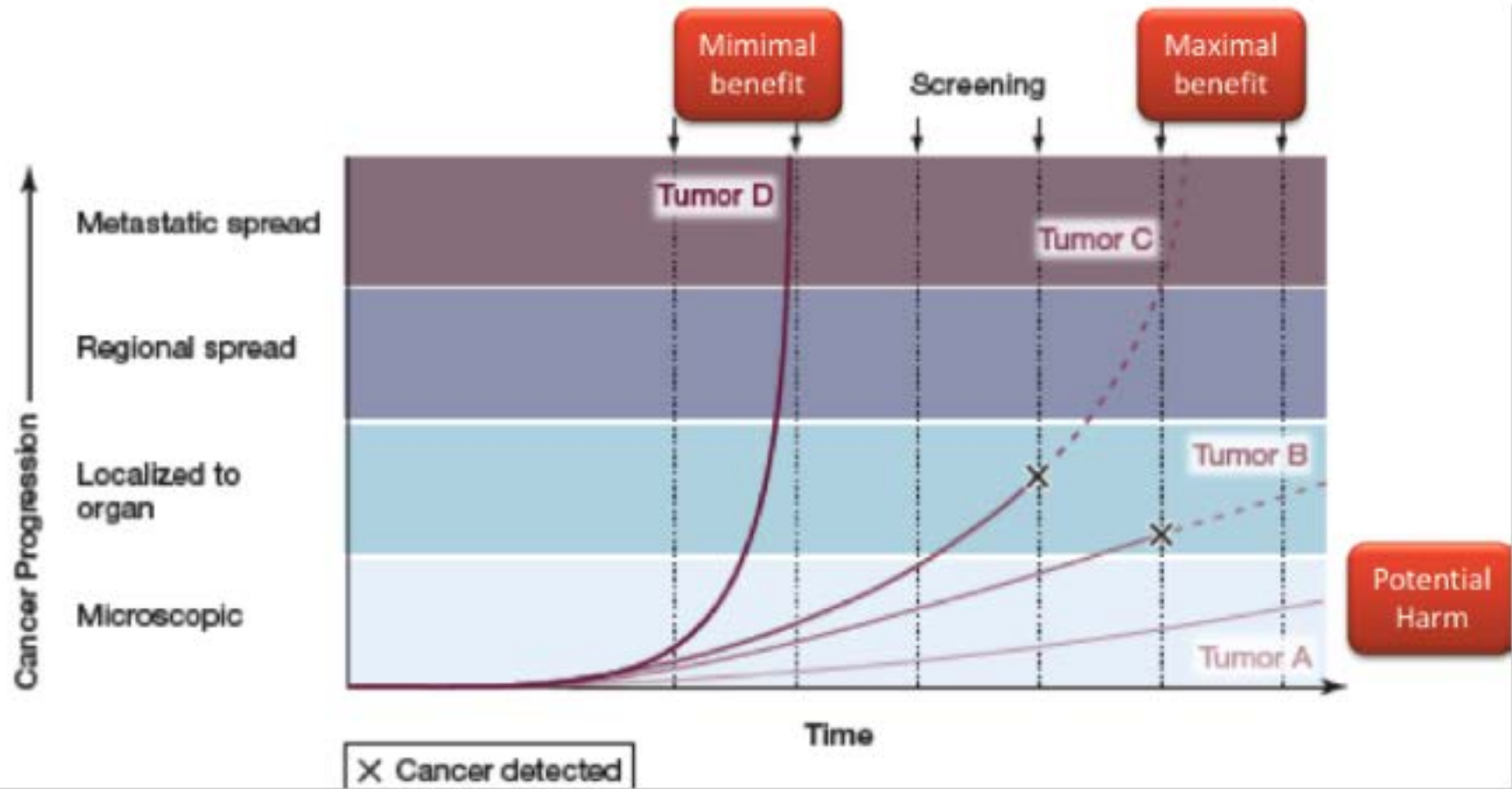


Tipo histológico

- Prognóstico reservado: medular, papilar invasivo e lobular clássico
- Prognóstico ruim: ductal SOE, lobular sólido e inflamatório

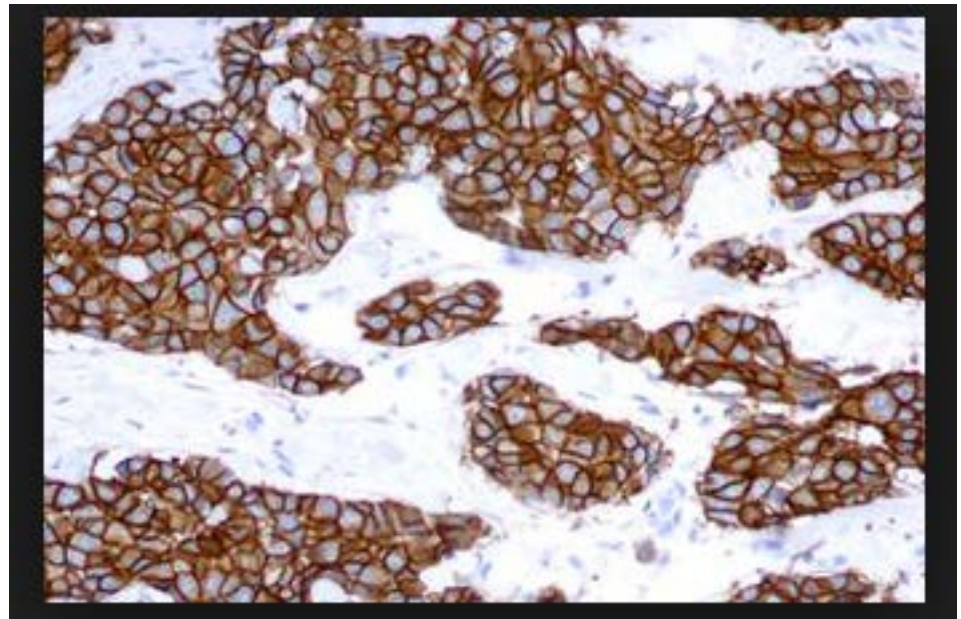
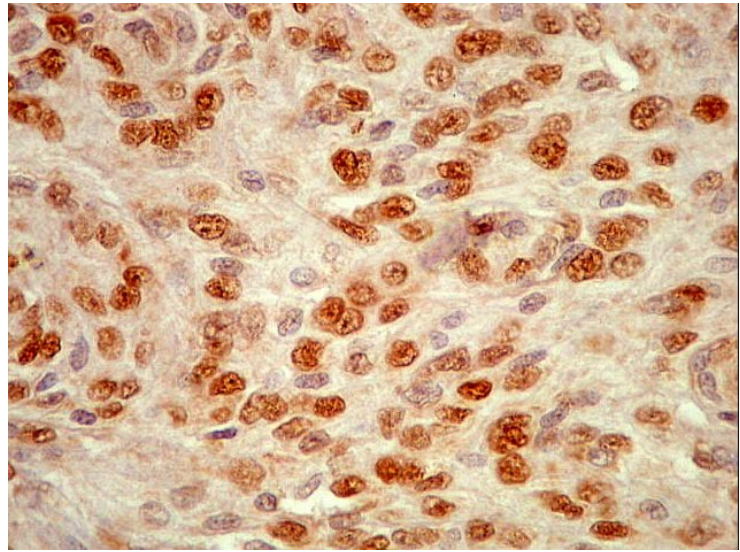


Diferentes tipos de Câncer de mama



Marcadores imunohistoquímicos

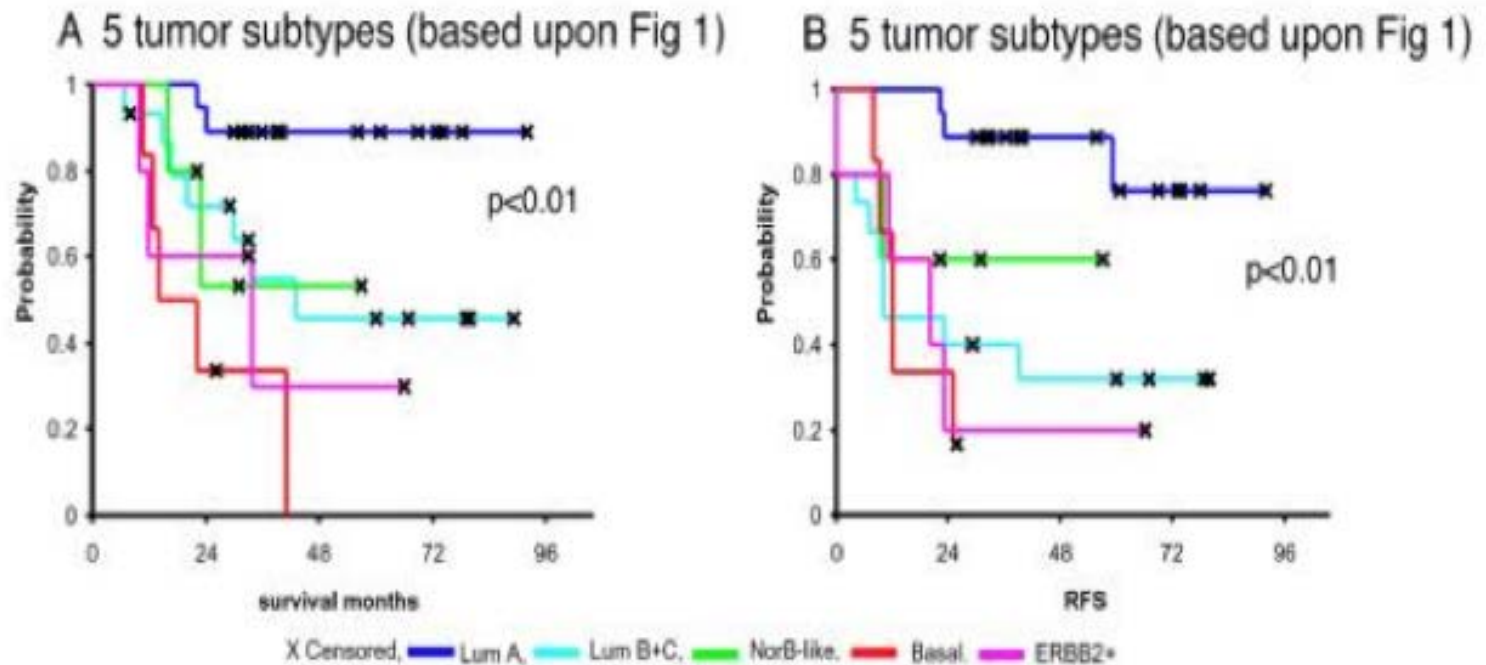
- RE
- RP
- status HER2
- Ki67



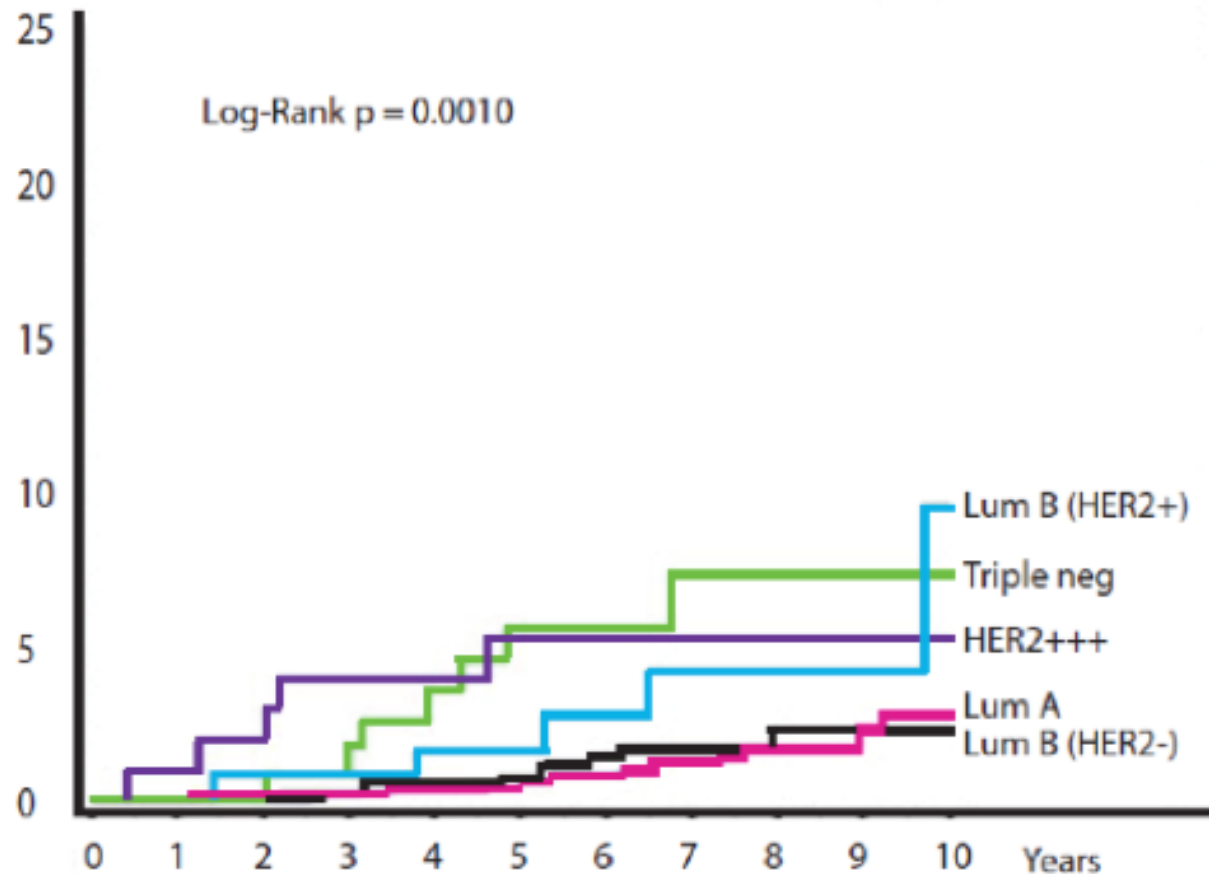
Subtipos Moleculares

	LUMINAL A	LUMINAL B	HER-2	BASAL-LIKE
	40%	20%	10-15%	15-20%
RE	+++	+++	-	-
RP	+++	++	-	-
Ki 67	<14%	≥14%	↑	↑
HER-2	-	-	+++	-

Biologia tumoral: sobrevida livre de doença e recidiva local

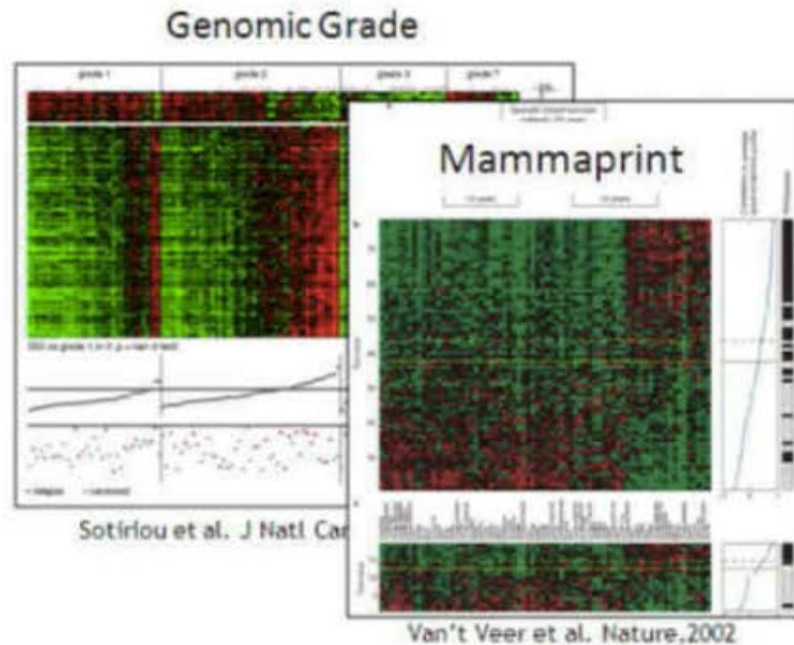


Recorrência locoregional em T1mic, T1a, T1b conforme biologia tumoral

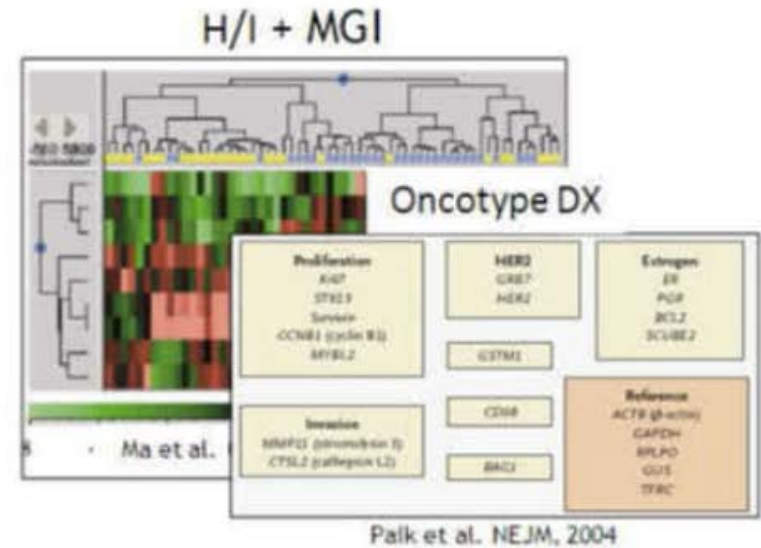




Gene Prognostic Signatures



Population: Untreated
Tissue: FFPE

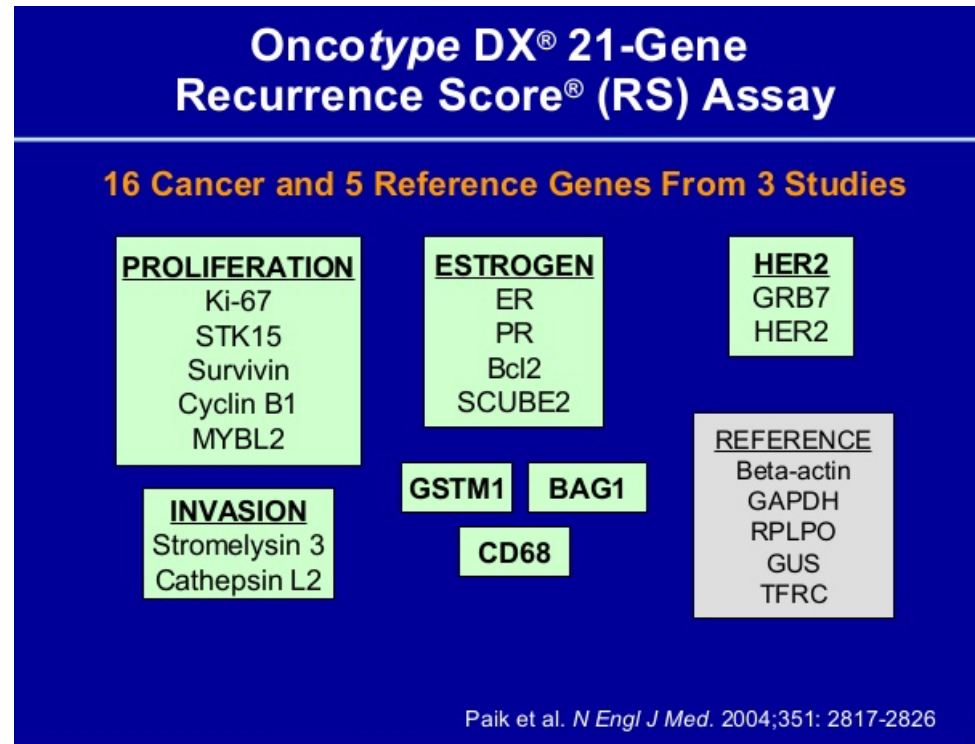


Population: Tamoxifen-treated
Tissue: FFPE

Add **additional information** to current clinico-pathological parameters for treatment decision making

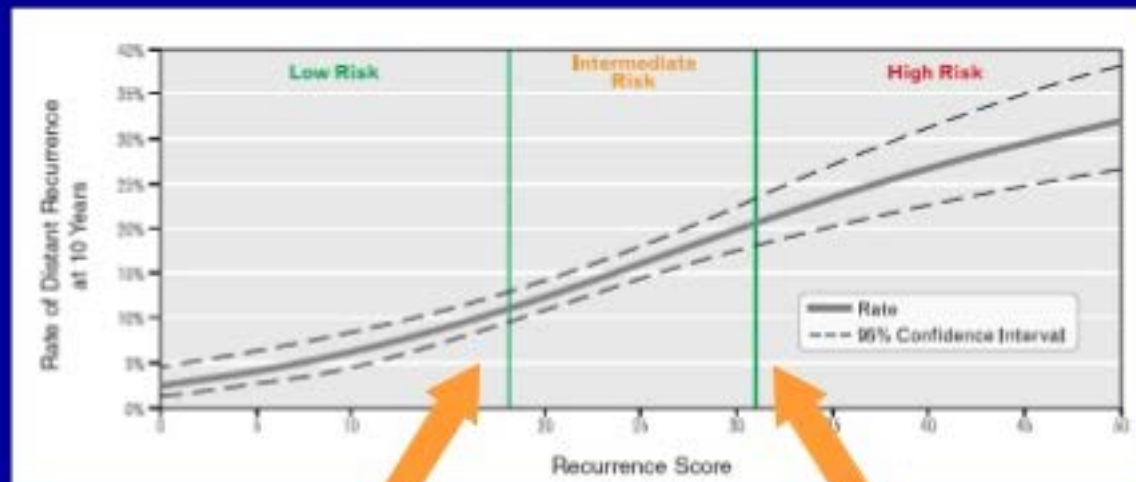
Oncotype DX

- 21 genes RT-PCR
- Recurrence score (RS) <18, 18 - 31, >31
- TAILORx
- RxPONDER
- PlanB



Oncotype DX® is a Standardized and Quantitative Assay

Recurrence Score® in N-, ER+ patients



Lower RS's

- Lower likelihood of recurrence
- Minimal, if any, chemotherapy benefit

Higher RS's

- Greater likelihood of recurrence
- Clear chemotherapy benefit

Paik et al. *NEJM* 2004, 2) Habel et al. *Breast Cancer Research* 2006

Paik et al. *JCO* 2006, 4) Gianni et al. *JCO* 2005

Oncotype DX - TAILORx

- ER
- RS baixo risco <11
- TH
- 99,3% livres de doença MTX 5 anos
- 98% sobrevida em 5 anos

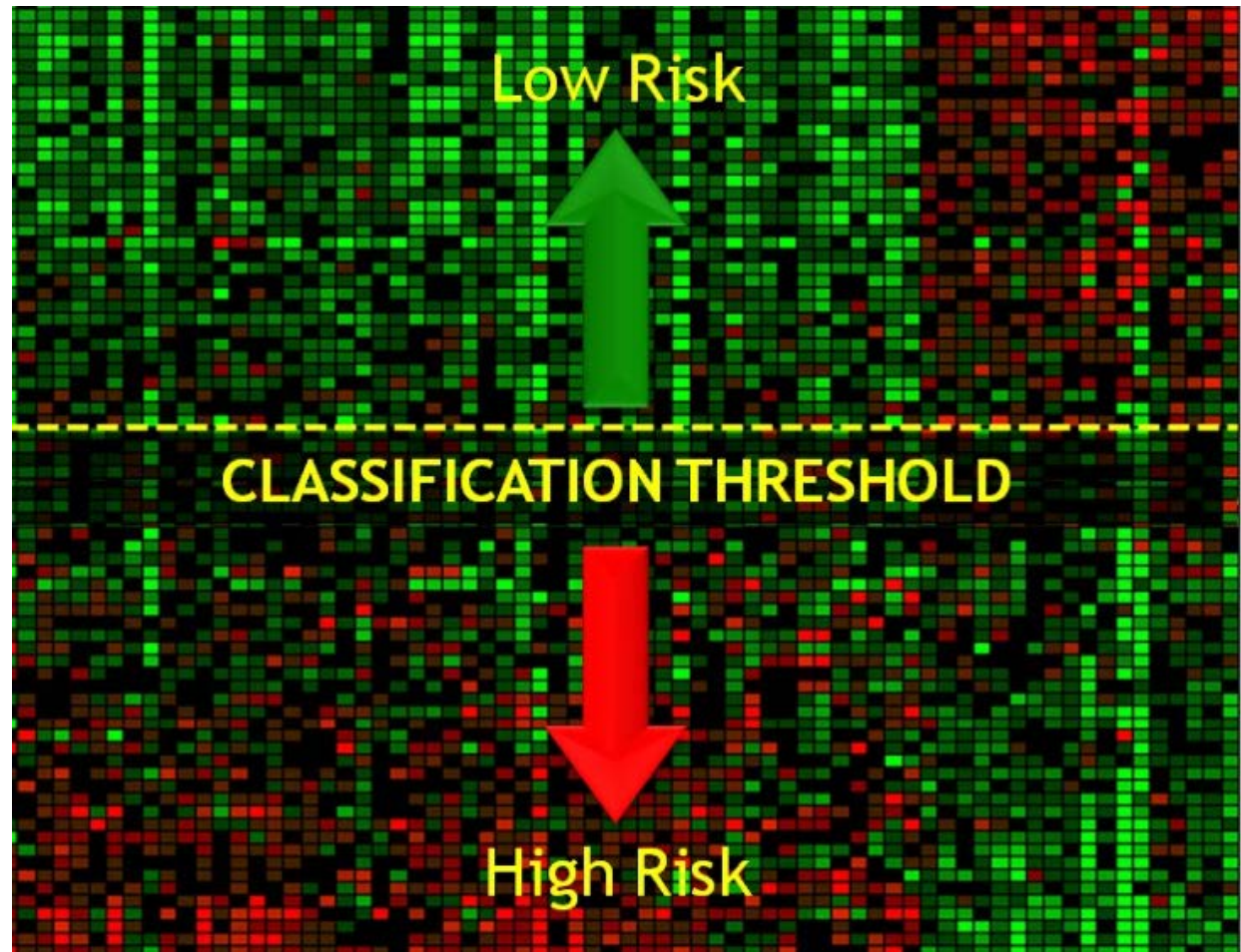
70% grupo intermediário (?)

Oncotype Dx - PlanB

- RS <11
- TH
- 15,3% DAS PACIENTES
- SLV 98% em 3 anos

Mammaprint

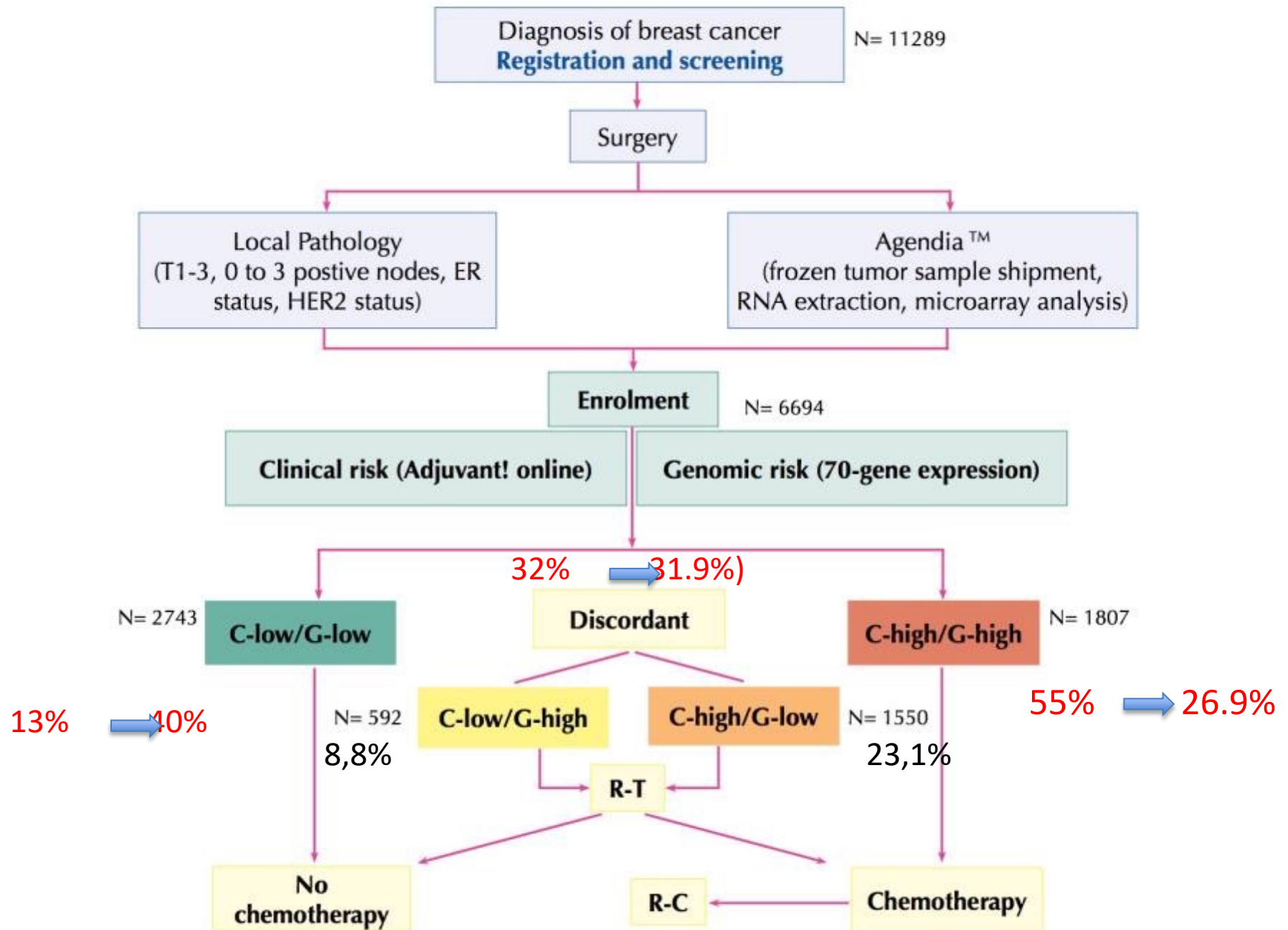
- 70 genes
- Instituto do câncer da Holanda
- modo binário



EORTC 10041/**MINDACT TRIAL**

Mi croarray in
N ode 0-3 positive
D isease May
A void
C hemo
T herapy)

TRIAL DESIGN AND COHORT DIAGRAM



Mammaprint - MINDACT

- alto risco clinico e baixo risco genômico = sem benefício com QT em SLD
- 43% redução de QT
- ASCO - recomenda em RE+ N0 OU 1-3Linf +

Cardoso F. NEJM 2016

Krop I. JCO 2017

PAM50

- 50 genes
- RR
- estudios prospectivos-retrospectivos
- linfonodos positivos

Breast Cancer Index (BCI)

- 11 genes
- proliferação celular e via de sinalização RE
- Tempo de terapia endócrina

Situações Desnecessárias de assinaturas genéticas...

- Baixo risco clinico (T1NO grau 1 RE+)
- Triplo negativo
- HER2 positivo





PENSAMENTOS FINAIS

- 2018 TNM, GRAU TUMORAL, TIPO HISTOLÓGICO, RH, HER2, KI67...
- PODEMOS OFERECER MAIS PARA NOSSAS PACIENTES = ASSINATURA GENÉTICA



OBRIGADA

betina.v@me.com