

Combo therapy for advanced HER-2 breast cancer leads to slower progression

By ACSH Staff — December 9, 2011

HER-2 positive breast cancer, accounting for approximately 25 to 30 percent of breast cancer patients, is considered to be a more aggressive form of cancer, often associated with poorer outcomes. Advances in treatment, however which include the monoclonal antibody Herceptin (trastuzumab) in conjunction with chemotherapy have allowed for better outcomes in women diagnosed with this variant of the disease when it is localized and can be surgically removed. Now, a [study](#) [1] just published in the *New England Journal of Medicine* has found that combination therapy involving two drugs one new antibody against HER-2, plus Herceptin and chemotherapy increases progression-free survival among women whose cancer has spread, as compared to using Herceptin and chemo alone.

Researchers from the Massachusetts General Hospital Cancer Center randomly assigned over 800 women with HER-2 positive metastatic breast cancer to study the added benefit of the new drug in combination therapy. The trial results showed that patients undergoing combination therapy had a median progression-free survival of over 18 months, compared to about 12 months' survival in the control group.

ACSH's Dr. Gilbert Ross was impressed by the results and points out that the trial was conducted in women with metastatic breast cancer, which currently has no cure. If the results were that promising among this cohort, he observes, then the combination therapy should have an even greater efficacy among patients with non-metastatic cancer who are candidates for a cure. He does remind us, however, that progression-free survival is not the same as overall survival: Some cancer drugs improve short-term disease-free progression but, disappointingly, do not lead to long-term survival benefits.

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[1] <http://www.nejm.org/doi/full/10.1056/NEJMoa1113216>