

Real-world cancer registries: news on the use of chemotherapy for Italian breast cancer cases

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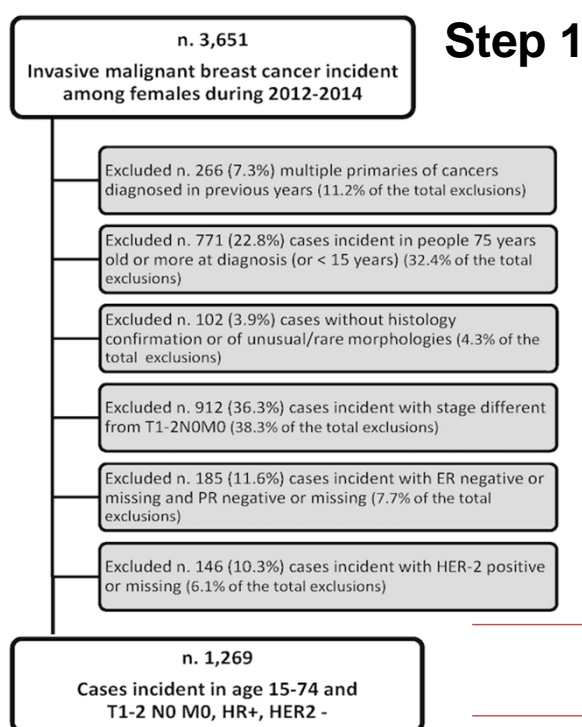
Aim: At the 2018 ASCO meeting, the results of the TAILORx trial showed that women with localised breast cancer, with positive hormone receptors and negative HER2 who, based on the Oncotype DX® genetic test on tumour tissue belonged to the intermediate recurrence risk group, had in the arm treated with only anti-hormonal therapy the same progression-free survival as that with also adjuvant chemotherapy.

Airtum has estimated 52300 new female breast cancer cases in Italy for 2018.

How many of these women may not have indications for chemotherapy?

Methods: **Step 1:** We used data from the Romagna Cancer Registry to assess how many of the incident cases had the characteristics of eligibility for such trial (age <75 years, T1-2 N0M0 and HR +). **Step 2:** For national and regional estimates we adjusted data observed in Romagna for the known geographical differences in the epidemiology of breast cancer in Italy. Finally, the risk class distribution of the Oncotype DX® test observed by Stemmer et al. was applied to the estimated number.

Results: Based on these estimates, among the cases of female breast cancer incident in Italy in 2018, around 18255 have the characteristics of those analysed in TAILORx. Among these, 3025 belong to the low risk recurrence class for which chemotherapy was not, and is not indicated, 3664 to that with a high score, who must undergo chemotherapy and finally 11536 to the intermediate one which, based on the results of TAILORx can avoid chemotherapy without a decrease in disease-free survival.



	Years of incidence	Cases	Elegible for TailorX	RS <11	RS 11-25	RS ≥26
Romagna	2012-4	3651	1269			
Stemmer's study	2006-0	1801	1774	16.6	63.3	20.1
Estimates for Italy	2018	53200	18225	3025	11536	3664

Conclusion: This is an example of how Registries can contribute in the Real World to quantify the burden of cancer. Such data are vital for reliable cost-benefit assessments that should advice policy choices. Patient associations should also enter the debate to make this test freely available to all the women who may benefit from it. For further details on methods and on results at regional level please see the paper just published in Tumori Journal <https://doi.org/10.1177/0300891619849291>