



# EFFECTIVENESS AND SAFETY OF TRASTUZUMAB-DERUXTECAN FOR THE TREATMENT OF UNRESECTABLE OR METASTATIC HER2-POSITIVE BREAST CANCER

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## BACKGROUND AND IMPORTANCE

Trastuzumab-deruxtecan has shown promising efficacy results in clinical trials for unresectable or metastatic HER2-positive breast cancer. It is crucial to assess whether these outcomes are replicated in real-world studies.

## AIM AND OBJECTIVES

To evaluate the effectiveness and safety of trastuzumab-deruxtecan in patients with unresectable or metastatic HER2-positive breast cancer in a tertiary hospital.

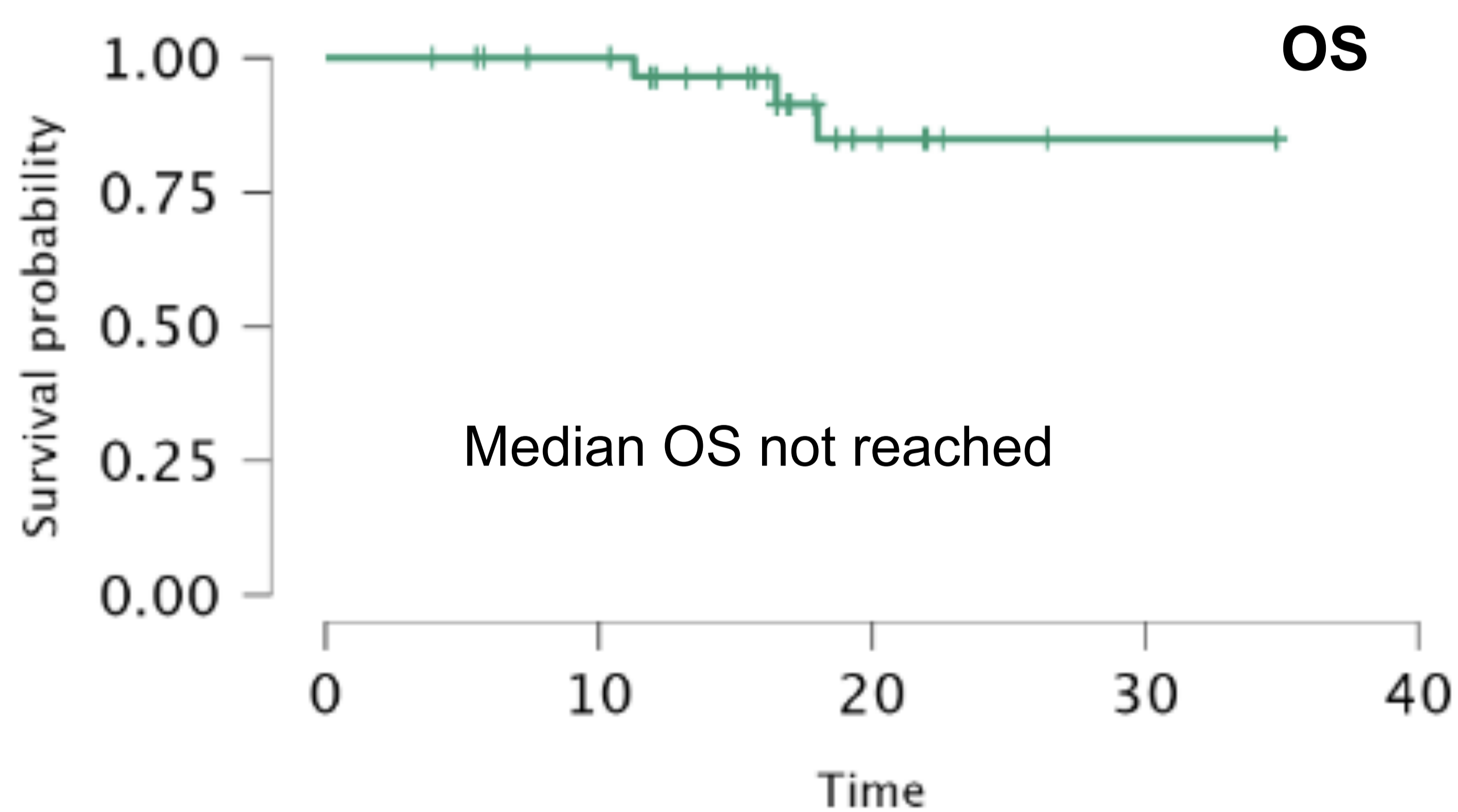
## MATERIAL AND METHODS

Retrospective observational study that included all women who received trastuzumab-deruxtecan until September-2024.

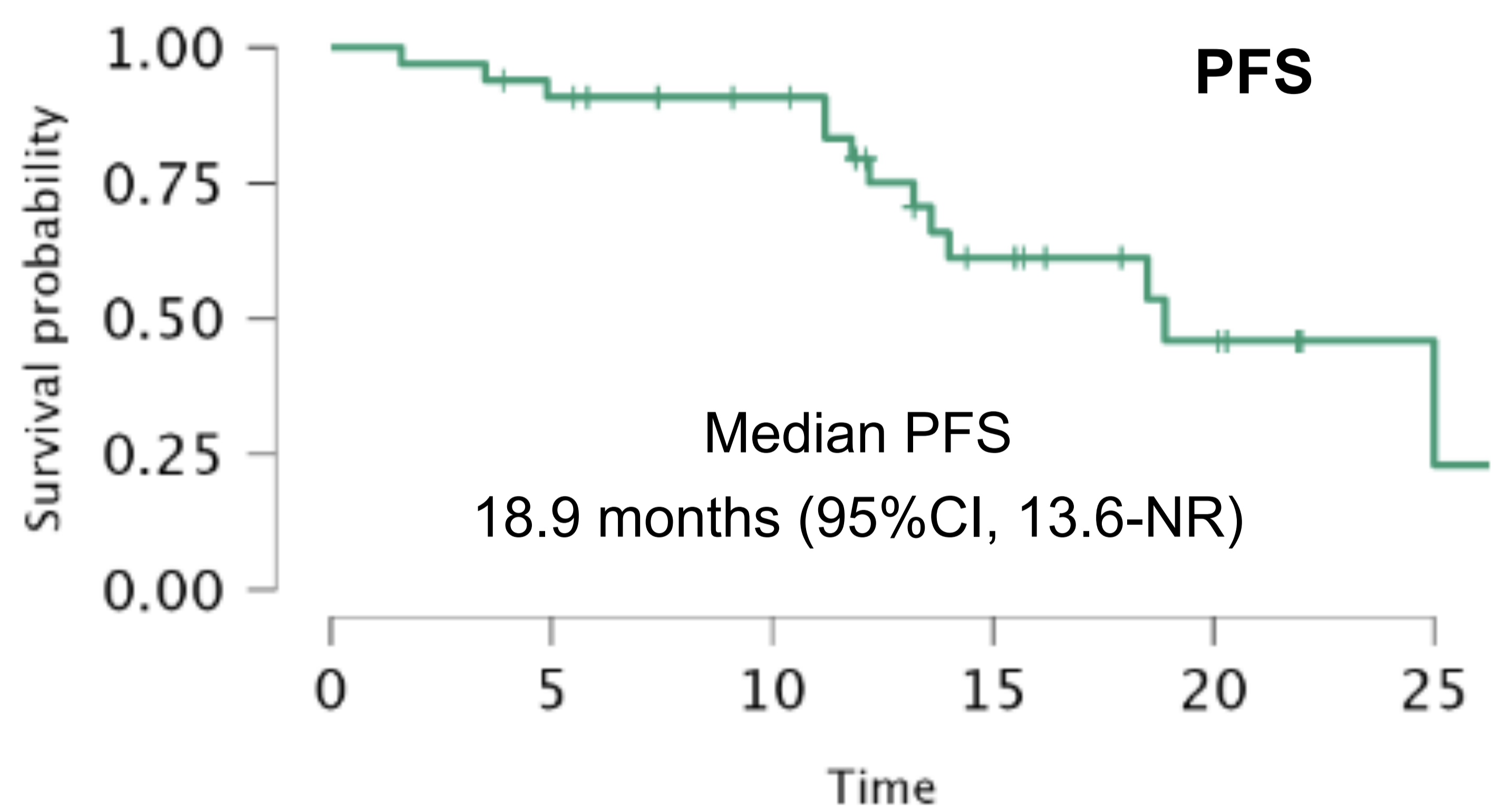
### VARIABLES

Age, cancer staging, estrogen and progesterone receptor status, metastatic or non-metastatic debut, metastases at baseline, performance status, treatment-line which trastuzumab-deruxtecan is used in, number of cycles and treatment reductions/delays.

Effectiveness was assessed by OS and PFS, while safety was assessed by recording AEs.



## RESULTS



- ✓ 33 patients, median age 54 years (37-80)
- ✓ 72.7% estrogen + and 48.5% progesterone +
- ✓ 48.5% had metastatic cancer at diagnosis
- ✓ 57.6% of patients had bone metastases, 48.5% had liver, 27.3% brain, 24.2% lung, 21.2% lymph node, 6.1% skin, and 3% had ovarian, pleural, and pericardial metastases
- ✓ 48.5% ECOG-0, 48.5% ECOG-1 and 3% ECOG-2
- ✓ Used as first-line in 3%, second-line in 42.5% and third-line or higher in 54.5% of patients
- ✓ Median number of cycles received was 17 (3-35)
- ✓ 48.5% and 60.6% of patients required at least one dose reduction or treatment delay due to drug toxicity respectively

## AEs occurred in 93.9% patients

nausea (87.1%), asthenia (67.7%), anaemia (38.7%), vomiting (32.3%), diarrhea and neutropenia (25.8%), skin rash and headache (22.6%), hyporexia and neurotoxicity (19.4%), hepatotoxicity, abdominal pain, and thrombopenia (12.9%), dysgeusia (9.7%), constipation, mucositis, pneumonitis (6.5%), and heart failure (3.2%).

## BACKGROUND AND IMPORTANCE

Trastuzumab-deruxtecan is effective, with a 18.9-month PFS median, but it is associated with a high rate of adverse events, necessitating close clinical monitoring. Pharmacists play a key role in managing toxicities and adjusting treatment to optimize patient outcomes.