

REAL-WORLD EFFECTIVENESS OF TRASTUZUMAB DERUXTECAN IN HER2-POSITIVE AND HER2-LOW METASTATIC BREAST CANCER

C. GONZÁLEZ GONZÁLEZ¹, M.E. CARDABA GARCIA¹, A. FIJÓ PRIETO¹, S. FERNÁNDEZ PEÑA¹, E. CONTRERAS MACIAS², M. MONTERO LÁZARO¹, S. MAGANTO GARRIDO¹, M. FERNÁNDEZ PRIETO¹, A. SALVADOR PALACIOS¹, M.T. SÁNCHEZ SÁNCHEZ¹. ¹HOSPITAL CLÍNICO UNIVERSITARIO DE VALLADOLID, PHARMACY DEPARTMENT, VALLADOLID, SPAIN. ²HOSPITAL SAN JUAN DE DIOS, HOSPITAL PHARMACY, SEVILLA, SPAIN.

BACKGROUND AND IMPORTANCE: Trastuzumab deruxtecan (T-DXd) is an antibody–drug conjugate with proven efficacy in HER2-positive metastatic breast cancer and, more recently, in HER2-low disease. However, real-world data on its effectiveness outside clinical trials are limited. Assessing clinical outcomes in daily practice is essential to confirm its benefit and optimise therapeutic strategies for metastatic breast cancer.

AIM AND OBJECTIVES: To evaluate the real-world effectiveness of T-DXd in patients with unresectable or metastatic breast cancer (UMBC), including HER2-positive and HER2-low subgroups:
 - to assess progression-free survival (PFS) and overall survival (OS).
 - to compare outcomes between both indications.

MATERIALS AND METHODS

Retrospective observational study → metastatic breast cancer treated with T-DXd for approved indications:
 -HER2-positive UMBC after at least one prior anti-HER2 regimen
 -HER2-low UMBC after previous chemotherapy.

Variables: sex, age, treatment indication, treatment start date, date of progression or death.

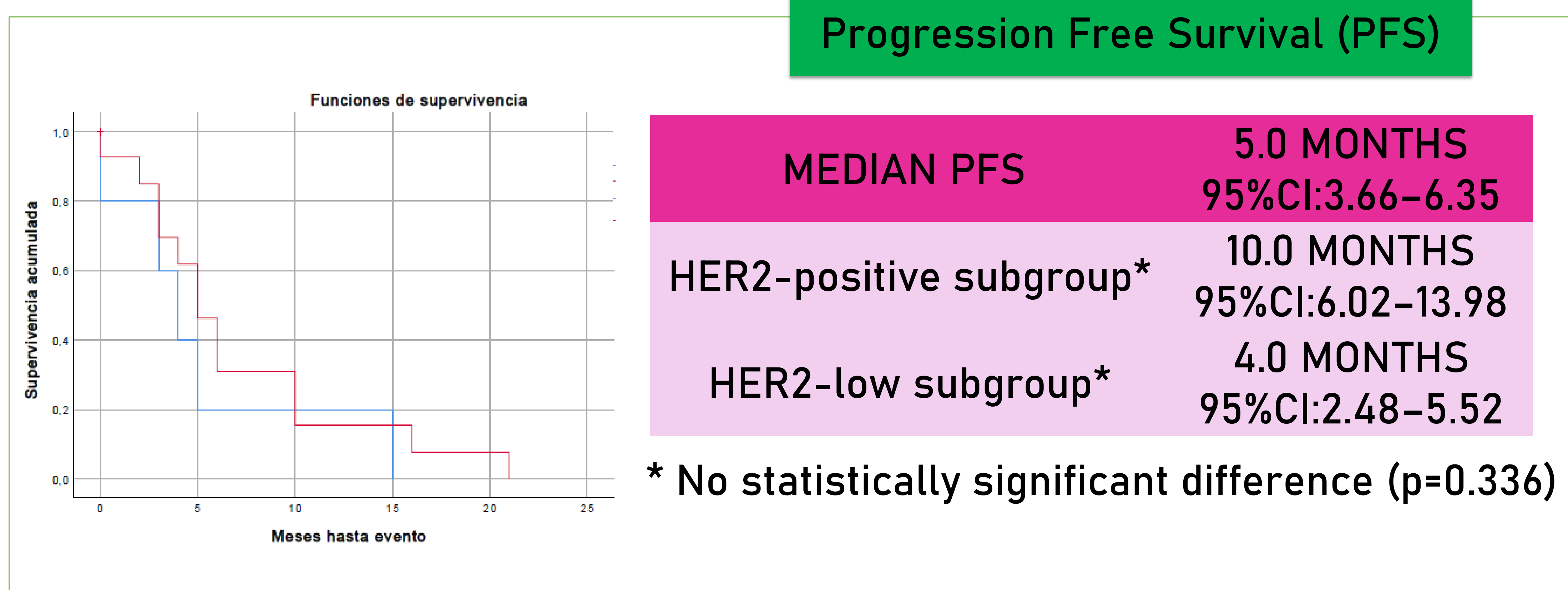
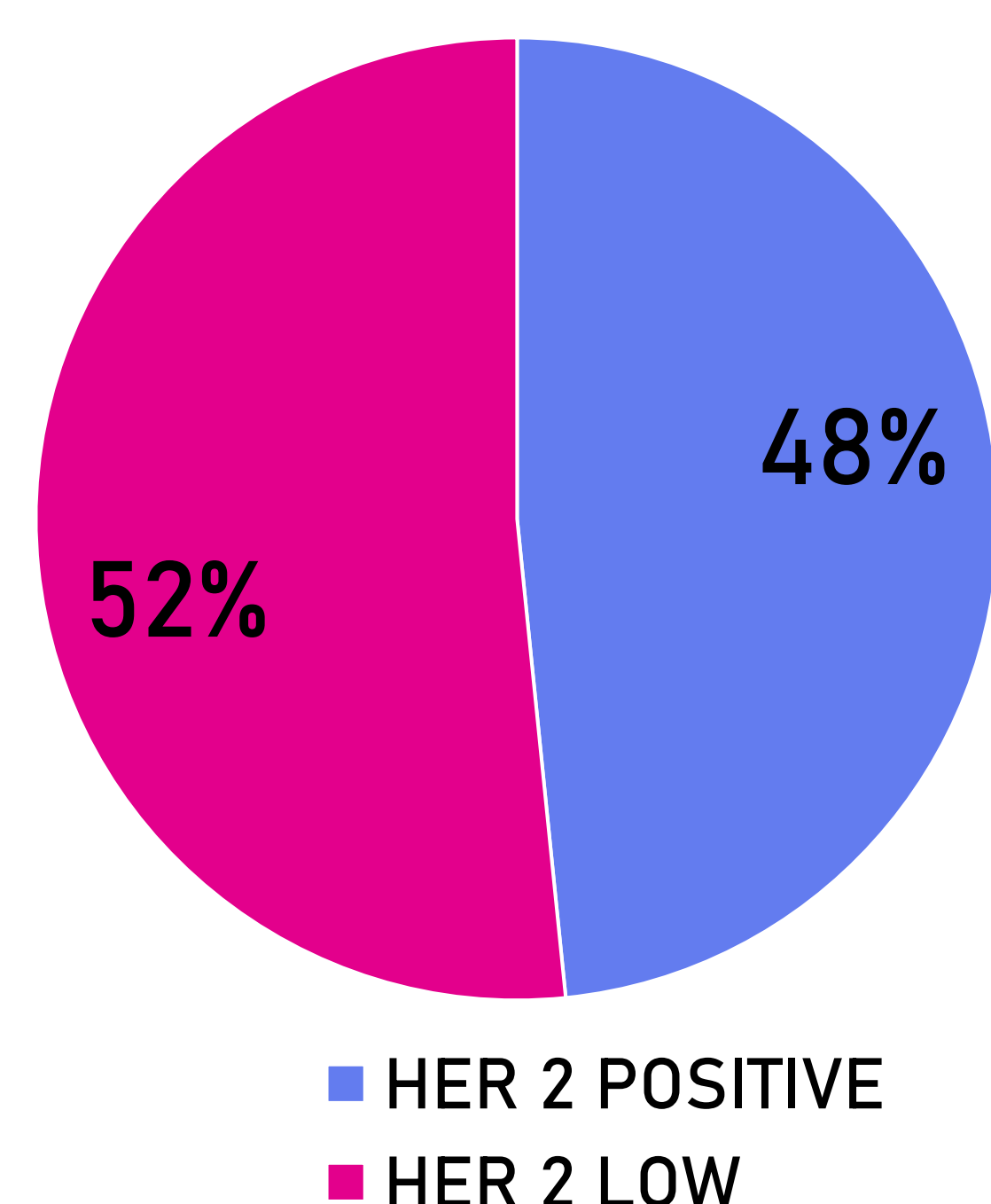
PFS and OS were estimated using the Kaplan–Meier method, and subgroup comparisons were performed with the log-rank test. Analyses were carried out using IBM-SPSS Statistics 28.0 for iOS.

RESULTS



31 women
(61.47±10.49 years)

DIAGNOSIS



- ❖ Not estimable in either subgroup
- ❖ Comparison between indications showed no significant differences (p=0.930).
- ❖ Patients treated in later therapy lines (>3) had significantly longer OS than those treated in second–third lines (p = 0.024).

Overall Survival (OS)

CONCLUSIONS

- ✓ In real-world practice, T-DXd demonstrated clinical activity in both HER2-positive and HER2-low UMBC, with median PFS values comparable to those observed in pivotal trials.
- ✓ Although no significant differences were observed between subgroups, later line treatment was associated with improved survival.
- ✓ These findings support the effectiveness of T-DXd in a routine clinical setting and highlight the need for continued real-world evaluation to optimize patient outcomes.



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