# USE OF ERIBULIN IN LOCALLY ADVANCED OR METASTASIC BREAST CANCER

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## BACKGROUND

Eribulin has been approved for locally advanced or metastatic breast cancer after at least one previous chemotherapy regimen for advanced disease, including an anthracycline and a taxane.

## OBJECTIVES

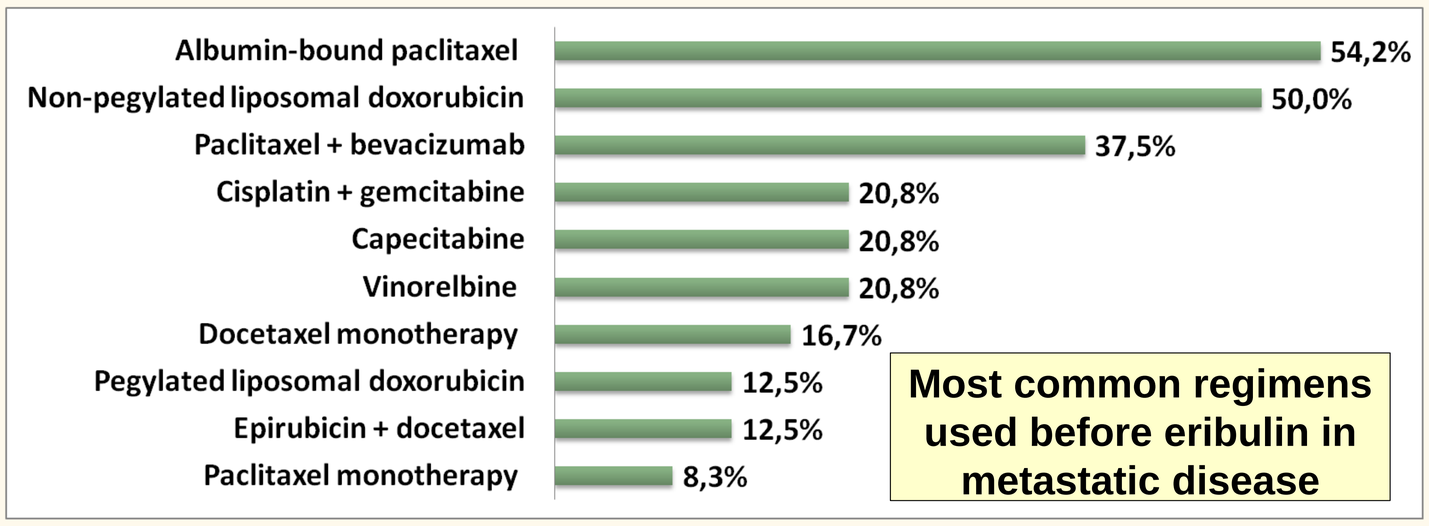
To evaluate the effectiveness and safety of eribulin in a tertiary level hospital.

## METHODS

- Retrospective observational study.
- Patients treated with eribulin (01 February 2014 - 11 October 2017).
- Variables: age, number of cycles, duration of treatment, number and type of previous chemotherapy regimens, progression-free survival (PFS), reported adverse events (AEs), dose reductions and dose delays between cycles.
- Data obtained from: electronic clinical records and the chemotherapy management software.

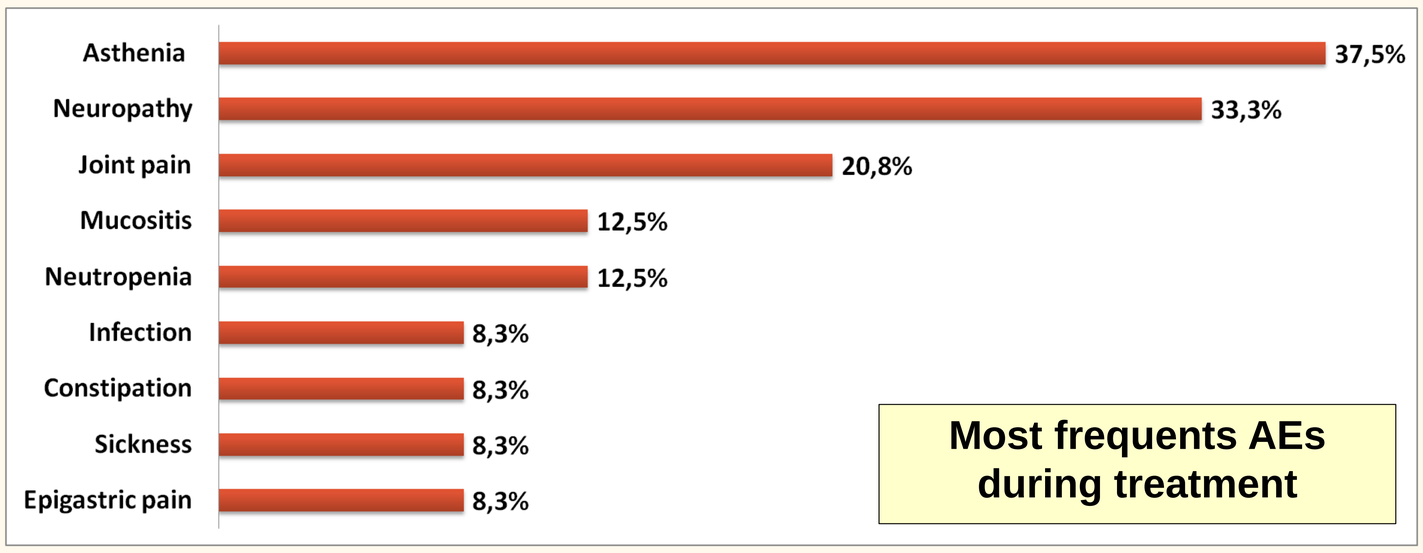
## RESULTS

•24 patients included, mean age 50.9 years (SD 9.4, range 32-67). At the data analysis, 4 were still in treatment with eribulin and 20 had finished it: median duration 3.15 months (4.5 cycles, range 1-8).
•Median of previous chemotherapy lines in locally advanced or metastatic stage: 3 (range 1-6).




**Most common regimens used before eribulin in metastatic disease**

Median PFS in the 17 patients who progressed during or after eribulin (but without having received a later treatment) was 2.8 months




**Most frequents AEs during treatment**

- 62.5% of patients had any AE
- 1 patient interrupted the treatment due to AEs
- In patients who finished treatment, there were 2 delays because of neutropenia and 3 dose reductions due to toxicity

## CONCLUSIONS

•In our patients, eribulin median PFS was lower than in EMBRACE trial. It could be explained because our patients received more previous regimens of chemotherapy for metastatic disease. In addition, our sample size was smaller.
•Regarding safety, eribulin was well tolerated and in most cases the AEs didn't forced to interrupt treatment.