DGI077

USE OF EVEROLIMUS IN COMBINATION WITH EXEMESTANE FOR THE TREATMENT OF ADVANCED BREAST CANCER IN A TERTIARY HOSPITAL

Sánchez M., Alcácera M.A., Gimeno M., Allende M.A., Arenere M., Fernández E.
Pharmacy Service. Universitary Hospital Clínico "Lozano Blesa", Zaragoza, Spain

Background

Everolimus has been approved recently by the European Medicines Agency (EMA) for the treatment of postmenopausal women with advanced breast cancer in combination with exemestane, after failure of treatment with letrozole or anastrozole. The approval was based on the results of BOLERO-2study. The **aim** of this study is to compare the use of everolimus plus exemestane in breast cancer in our hospital with Bolero-2 Study.

Methods

Retrospective study: All patients treated with everolimus in combination with exemestane from February 2008 to August 2010.

Analyzed variables: Age, disease stage, metastases and localization, previous treatment, adverse reactions, duration of treatment, discontinuation of treatment and reasons. Safety was evaluated by the appearance of adverse reactions.

Data source: Clinical history and Pharmacy Department records.

Results

SAMPLE DESCRIPTION (n=9)

Median age	54 years old (range 76-45)
Stage IV disease	100%
Bone metastases	100%
Visceral involment	22%

TREATMENT

Duration of treatment (median) → 16 weeks

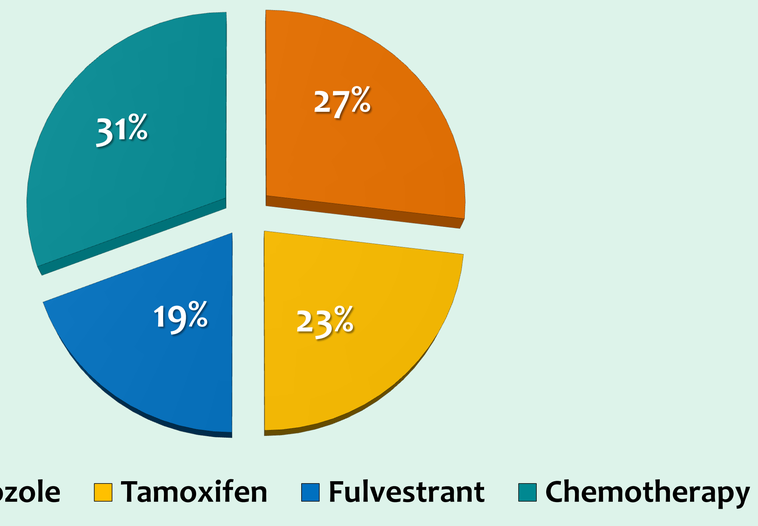
Duration of treatment in BOLERO-2 trial (median) → 14.6 weeks

Discontinuation: 7 patients

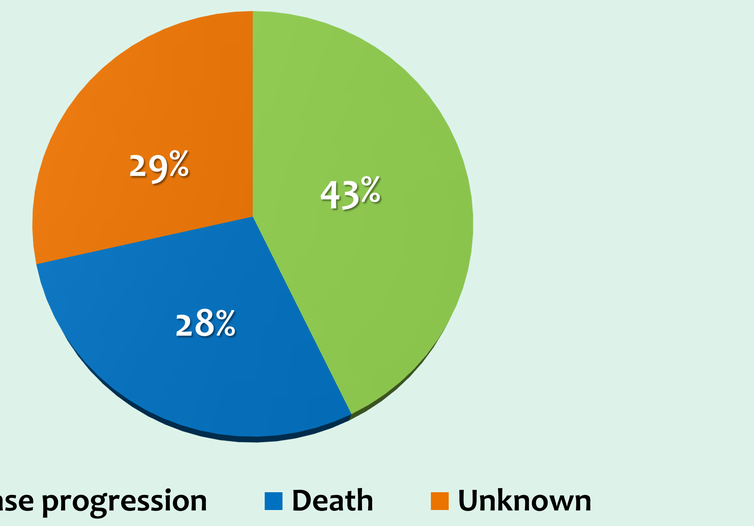
5 patients met the inclusion criteria

Postmenopausal women
HER2-
Refractory disease to previus Letrozole/Anatrozole
Single prior chemotherapy regimen
Bone metastases
ECOG<2
No brain metastases
No previus treatment with exemestano and m-TOR inhibitors

PREVIOUS TREATMENT



REASONS FOR DISCONTINUATION OF EVEROLIMUS PLUS EXEMESTANE (n=7)



SIDE EFFECTS

The main **side effect** was stomatitis (55.6%) as in BOLERO-2 trial. Other side effects in our study were: epistaxis, rash, fatigue, infection and gastrointestinal reactions.

Conclusions

- 55.55% patients met the inclusion criteria of BOLERO-2 trial. The median duration of treatment was 16 weeks, in BOLERO-2 trial it was 14.6 weeks.
- Stomatitis has been the main adverse effect observed.

Conflict of interest: None

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