

Advanced Breast Cancer Workshop

E6. Can an international consensus meeting change the future of advanced breast cancer patients? Highlights from ABC1 Consensus Meeting

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Every year there are half a million deaths worldwide due to advanced breast cancer (ABC). In recent decades, survival and quality of life of ABC patients have increased, but progress has been painfully slow. Management of advanced disease has suffered from the lack of strong international collaboration in both clinical and translational research that could lead to faster advances and evidence-based standards of care. As a consequence, both care-givers and patients often feel lost in a labyrinth of so many different expert opinions and scattered guideline efforts.

As highlighted by some important and large international surveys – e.g. the Bridge survey and the Living Beyond Breast Cancer (LBBC) online survey – many ABC patients suffer from feelings of guilt, abandonment, isolation, and loneliness. There is a huge lack of dedicated sources of information and support, as the needs of advanced cancer patients are very different from those with early disease, and few patients have the opportunity to participate in clinical trials, even in developed countries. Worrisome also is the perception by too many oncologists that, because ABC is an incurable disease and there are few therapies with a high level of evidence for this patient group, any treatment strategy can be applied.

To tackle this important problem, the European School of Oncology (ESO) has established a Task Force on Metastatic Breast Cancer in 2004 with the aim of developing strong, standardized, scientifically sound consensus guidelines that can be applied internationally. After publishing the main principles that should guide the management of ABC, the Task Force has discussed in detail some of these principles during sessions at European Breast Cancer conferences (EBCCs) 5, 6 and 7, and has published several articles (see references).

Finally, this work has led to the world's first consensus conference on ABC that took place in Lisbon, Portugal, in November 2011; this was attended by more than

800 clinicians, scientists, advocates and patients from all continents. ABC will be a regular, 2-yearly meeting, taking place in the same year as its counterpart for early breast cancer, the St. Gallen Consensus Conference.

In this workshop, a summary of ABC 1 guidelines will be presented by several ABC 1 experts. After the presentation on aims and challenges of ABC 1 by Dr. Alberto Costa, Dr. Roger Gomis will present a summary of available knowledge about the metastatic process. Dr. Ian Krop will focus on HER-2⁺ advanced breast cancer, Dr. Nadia Harbeck on ER⁺ advanced breast cancer, and Dr. Eric Winer on triple-negative advanced breast cancer. The workshop will close with an overview of the most important consensus recommendations issued through ABC 1 and published early in 2012 in *The Breast*, presented by Dr. Fatima Cardoso. These recommendations include: treatment of all ABC patients by a multidisciplinary team in a specialised breast unit; clear and gentle communication about the incurable but treatable nature of metastatic disease; specific management of each subtype of ABC according to evidence; increased patient inclusion in clinical trials and easy access to appropriate psychosocial support; and high-quality supportive and palliative care for symptom control, including pain.

Implementation of high-quality guidelines in the early breast cancer setting has had a proven significant impact in the survival of these patients. We believe ABC guidelines, if implemented by all oncologists treating breast cancer, will provide advanced breast cancer patients with the same benefit.

In the words of advanced breast cancer advocate Musa Mayer: 'If the confusion patients face in making treatment decisions can be reduced, and meaningful guidelines can be crafted that account for individual differences and respect patient preferences, it will help women and men with ABC manage the anxiety and loss of confidence they feel when a treatment fails. This will

also help meet the ambitious goal of ABC1 of improving survival through better use of available knowledge and therapies. ABC1 is a crucial first step and patients and advocates are watching and grateful that our time has finally come.'

Conflict of interest statement

For this specific abstract the authors have no conflict of interests.

References

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