Tumor Board Tuesday – Dr. Paolo Tarantino, 5/17/2022: 2nd Line Treatment of HER2+ Breast Cancer

Posttest Rationale

- 1. What 2L treatment would you select for a patient with locally advanced, recurrent, HR-, HER2+ BC?
 - a. T-DM1
 - <mark>b. T-DXd</mark>
 - c. Trastuzumab + docetaxel
 - d. Tucatinib + trastuzumab + capecitabine

Rationale: T-DXd in second line is the preference due to the DESTINY-Breast03 trial, which showed an impressive improvement in outcomes with T-DXd compared with T-DM1 (72% reduction in the risk of progression, 80% response rate, trend in improved overall survival)

- 2. How would you change this patient's treatment plan if they were to develop brain metastasis during treatment?
 - a. Add tucatinib
 - b. Switch to tucatinib, trastuzumab and capecitabine
 - c. Switch to T-DM1
 - d. No change

Rationale: The HER2CLIMB randomized trialincluded a large percentage of patients with brain metastases and showed an improvement in overall survival in this population.

We do not have data yet on the combination of T-DXd and tucatinib (a), and although T-DM1 (c) could be an option, it has less available efficacy data in patients with brain metastases. No change (d) is not an option, since the patient has experienced progression.