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# Clinical and pathological characteristics of early hormone receptor-positive, HER2- negative breast cancer patients in Panama

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**Background**: Breast Cancer is the most common malignancy and the first cause of dead by cancer in women worlwide. In Latin America the characteristics and treatment varies per region. Improvement in the early detection of breast cancer and new treatments have improved the prognosis of this tumor. In Panamá we have limited information about patients with Early Breast Cancer with hormone receptor positive HER 2 negative.

**Results:** We analyzed 368 patients .

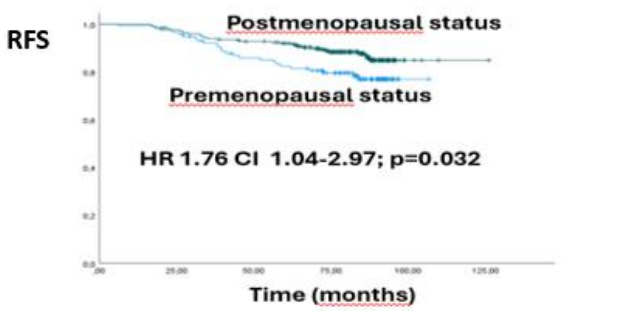
Table1. Patient Characteristics

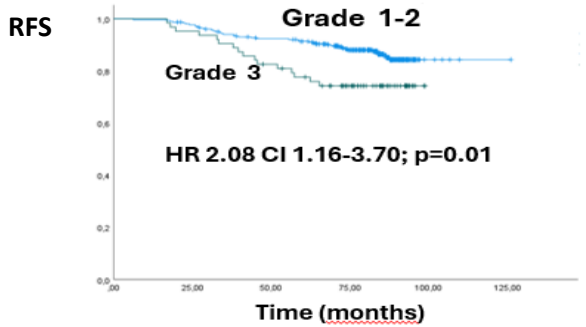
| Characteristics | Median/ percentage |
|---|---|
| **Age** | median 58 years old |
| **Stage** | |
| I | 32.5% |
| II | 45.8% |
| III | 21.1% |
| **Menopausal status** | |
| Postmenopausal | 68.3 % |
| Premenopausal | 31.7% |
| **Tumor size** | Median size of 2.5 cm |
| **Grade** | |
| 1 | 22% |
| 2-3 | 78% |
| **Hormonal Receptors** | |
| ER | 90% |
| PR | 60% |
| **Histology** | |
| Ductal | 87.2% |
| Lobular | 7.3% |
| Others | 5.4% |
| **Nodal stage** | |
| N0 | 55% |
| N1 | 31.1% |
| N2-N3 | 13.4% |

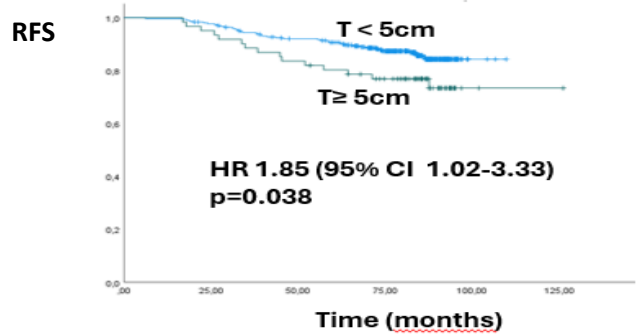
Table 2. Treatments receveid

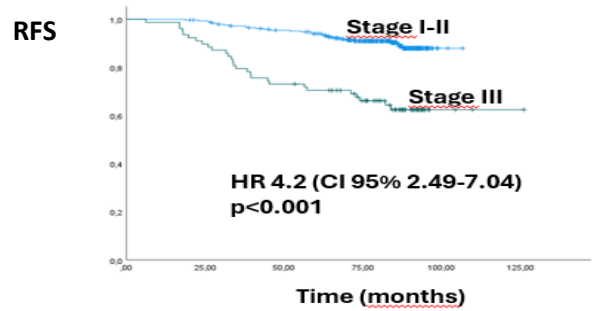
| Treatment | Median/ Percentaje |
|---|---|
| **Neoadjuvant treatment** | |
| Hormonoterapia(IA) | 6.9% |
| AC | 2% |
| Taxanes | 2.9% |
| AC→ Taxanes | 66.7% |
| DC | 3.9% |
| Otros | 17.6% |
| **Surgery** | |
| Total Mastectomy | 35.5% |
| Partial mastectomy | 64.5% |
| **Axillary management** | |
| Axillary dissection | 53.3% |
| Sentinel node | 46.7% |
| **Adjuvant treatment** | |
| Hormonoterapy alone | 41.1%% |
| Hormonoterapy after neoadjuvant chemotherapy | 23.7% |
| chemotherapy + hormonoterapy | 35.2% |
| **Adjuvant Radioterapy** | |
| Yes | 85.6% |
| No | 14.4% |

**Methods** : This retrospective study described clinical and pathological characteristics of early breast cancer hormone receptor-positive, HER2-negative patients treated at Instituto Oncologico Nacional between January 2017- December 2019. Clinical and Demographic results were resumed in tables, we used Kaplan-Meier curves to analyze overall survival and recurrence. Factors possibly associated to recurrence where evaluated with univariate analisis with log-rank test and after we performed multivariate analysis with Cox regression.




**Multivariate analysis reported :**

- Stage III (HR 2.91 CI 2.49-7.04; p<0.001) and adjuvant treatment with tamoxifen vs Aromatase Inhibitor (HR 2.27 CI 1.14-4.54; p = 0.02) where significatively associated with recurrence
- grade 3 tumors showed a tendency to significance to increased recurrence (HR 1.84 CI 0.98-3.44; p = 0.055 ).

**Conclusions**: Stage III, high grade tumors and use of tamoxifen are asociated with higher risk of recurrence. This show the necesity of strategies like use of analogues of human chorionic gonadotropin (hCG) in premenopausal women and implementation of inhibitors of cycline 4/6 in patients with high risk in our institution