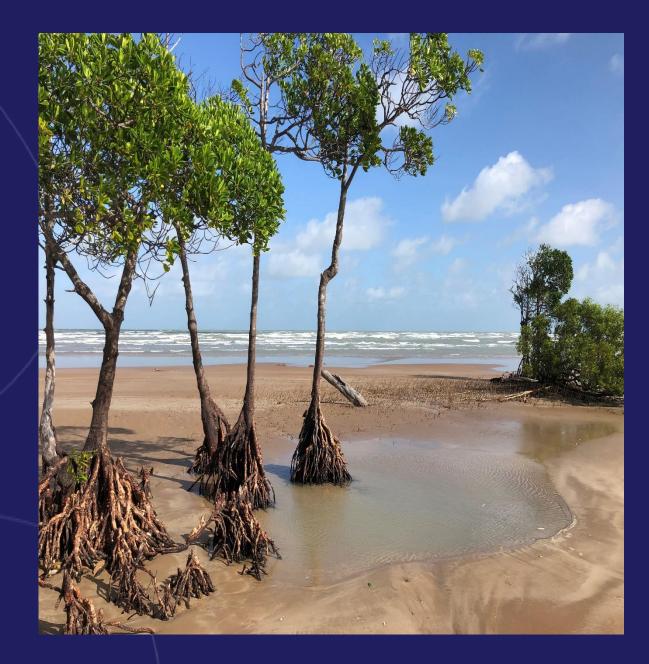
Department of Health

#### Breast Cancer Clinical Trials - 101

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#### Why do Clinical Trials matter?

Clinical trial to test potential new combination therapy for aggressive breast

cancer

Researchers are recruiting volunteers for a clinical trial they hope will improve survival rates for an aggressive form of breast cancer that affects about 1,500 women each year in New South Wales.

Women

09/12/2020

Media Release: 21 June 2022

NSW researchers are calling for volunteers for a new clinical trial to test a new strategy in cancer treatment: using a new therapy to target a 'defence switch' on cancer cells that alerts cancer to the threat of chemotherapy.

The trial aims to improve survival rates for patients with triple negative breast cancer, a treatment-resistant form of cancer that can quickly adapt against chemotherapy.

It will be led by Associate Professor Christine Chaffer and Dr Beatriz San Juan from the Garvan Institute of Medical Research, and Senior Staff Specialist in medical oncology Dr Rachel Dear of St Vincent's Hospital Sydney. The trial will be conducted at The Kinghorn Cancer Centre in Darlinghurst. **Breast Cancer Trials News** 

Anastrozole and Tamoxifen Both Prevent Breast Cancer for Postmenopausal

Long-term follow-up of the IBIS-II DCIS clinical trial has found that Anastrozole and Tamoxifen are both effective in preventing breast cancer and DCIS, providing more treatment options for postmenopausal women with an early form of breast cancer.

The results were announced at the San Antonio Breast Cancer Symposium in the United States. 2,980 women were recruited to the IBIS-II DCIS clinical trial worldwide, including 178 women at 24 institutions in Australia and New Zealand where the study was coordinated by Breast Cancer Trials.

#### **Breast Cancer Trials News**

New treatment reduces deaths by 32% for breast cancer patients with an inherited BRCA1 or BRCA2 gene abnormality

13/03/2022

#### **Breast Cancer Trials News**

\$4.9m For New Research To Address Poorer Outcomes of Young Women with Hormone Receptor-Positive, HER2 Negative Early Breast Cancer

10/02/2022

A project that aims to better understand the biology and treatment of young women with breast cancer has received \$4.9 million in funding from the Australian Government.

The funding is part of the Medical Research Future Fund's Rare Cancers, Rare Diseases and Unmet Needs clinical trials initiative, which supports high quality research, and novel and innovative treatments.

The project will include a new clinical trial called OLIO, that is specifically designed for young women with breast cancer. OLIO will be coordinated in Australia by Breast Cancer Trials and aims to address the poor outcomes of young women with hormone receptor-positive, HER2-negative early breast cancer. In addition, a new pathology test that will help identify specific biological features from the patient's tumor sample, will be developed by investigators from the Peter MacCallum Cancer Centre.

Young women with breast cancer have a higher rate of recurrence and death from breast cancer, and the reasons for this are until now unknown. Outcomes for young women can vary according to breast cancer subtype, but it has been demonstrated to be relatively worse in patients with HR+HER2- breast cancers, where molecular testing has identified evidence of homologous recombination deficiency.

#### Treatment advances as a result of Clinical Trials

•That breast conserving surgery followed by radiotherapy can be a safe alternative to mastectomy for many women diagnosed with early breast cancer.

•The introduction of trastuzumab (Herceptin) for treatment for HER2-positive breast cancer

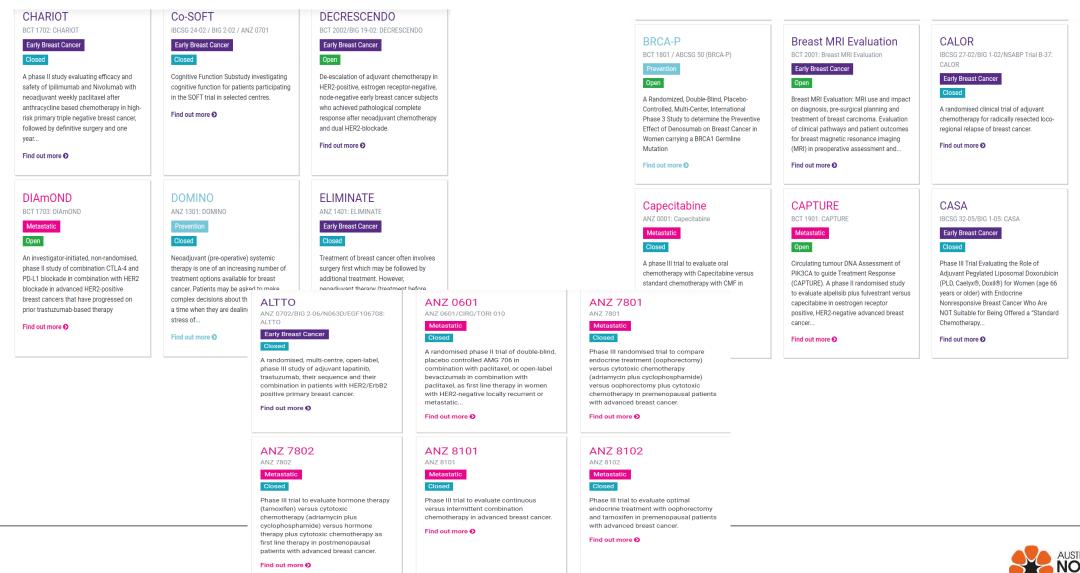
•That adding a CDK inhibitor, such as ribociclib and palbociclb, to hormone therapy can slow down the progression of hormone positive, HER2-negative metastatic breast cancer.

•That extending aromatase inhibitor treatment from five to ten years can provide further protection against a breast cancer recurrence for women with hormone positive early breast cancer.

•That hypofractionated radiotherapy (i.e. a shorter, more intense course of radiotherapy) may be as effective as conventional radiotherapy for some women aged 50 and over who have cancer at an early stage and who have had breast conserving surgery with clear surgical margins.



#### **Types of Breast Cancer Trials**



## Why consider a Clinical Trial

- You may get access to a new type of treatment.
- You will get an excellent standard of care and be closely monitored by doctors, research nurses and other health professionals.
- Research shows that patients treated in clinical trials usually fare better than those who are not involved.
- You will be helping researchers develop new treatments for breast cancer that will help others in the future.



### Some types of Clinical Trials

- Prevention trials the switch from 5 to 10 years of endocrine therapy for hormone positive early BC
- Screening trials CAPTURE
- Treatment trials breast conserving surgery followed by RT can have similar outcomes to mastectomy for early BC

STARs outcomes for women given hormone therapy before or after radiotherapy 10 year follow up

• Supportive care trials – unmet needs

there are many others.....



#### **Considerations in a Treatment Clinical Trial**

- The new treatment may not be better than or as good as standard treatment
- You may receive the standard of care treatment not the trial treatment or even a placebo
- New treatments may have unexpected side effects or worse that those from standard treatment
- You may need to make more visits to the doctor and be required to undergo extra investigations than if you were on standard treatment
- A new treatment may benefit some patients but not all
- Access to a clinical might involve travel interstate with added expenses and separation from support network



## Questions to you might ask

- ✤What is the aim of the clinical trial?
- Who is running the clinical trial?
- ↔What are the possible benefits and risks of taking part in the clinical trial?
- ↔Why am I eligible to take part in this trial?
- How long will I participate in the clinical trial?
- ↔Why do the researchers think this treatment will work for my cancer?
- What is known about the drug/s being used in this trial?
- How is it decided which treatment I will receive? Will I know? Will my doctor know?
- How often will I have to attend appointments as part of the trial?
- ✤Who will be part of my clinical trial team?
- If I gain benefit from this trial, will I be able to keep receiving the treatment after the trial ends?
  When will I know the results of the clinical trial?

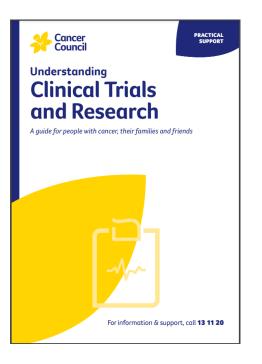


# Some barriers to participating in clinical trials

- Regional & rural location
- Culturally and linguistically diverse, including indigenous
- Other health conditions
- Male breast cancer
- Lack of information



#### Resources





What are clinical trials? For me, the nequest to participate in a clinical trial carrie at a time when there were so many other important decisions to make. And what was a clinical fail anyway? Clinical trials are scientific research studies that involve patients. They help find before treatments.

Why do we need clinical triats?

Breast Cancer Networ

When we think of treatments for breast cancer, we often think that only means drugs. However, there are clinical trials for other treatments too, including reliationarys, surger, supportive care programs, complementary therepies and even esercise.



Clinical trials are conducted under supervision by noisearchers so that the effects of the treatments or interventions being studied are properly monitored. Clinical Itials also found that Herceptin is an Christal hash also found that Hercapfin is an effective brackman for HER2-positive sarily breast cancer. These trials were conducted after Hercapiti had good results in installation HER2-positive breast cancer. As a result, 12 months of Hercapith is now standard treatment for people with HER2-positive early breast cancel.

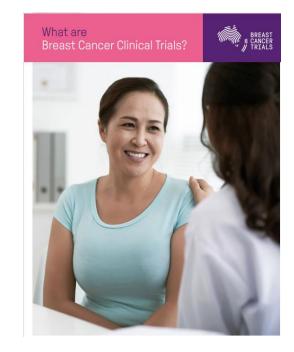
Why do we need clinical insta? We need clinical trials because they help us to know whether heatment options are sale and effective. For example, a drug can look permissing in the laboratory and may even have been used in laboratory mice with positive neurILs. However, neareschen neurot is laboly how the treatment works for people before it can be made widely available. Who runs clinical trials Circles Itials are not by in-

Some trails compare new treatments with current beatments, while others look at affluent ways of using treatments, but an activiting to or more existing treatments to see if his leads to bebit outcomes. Some sites lackly while the subwittent care be grown and all actives good outcomes. Common dugs that the table of granding (a, guptin becoming the streak of granding (a, guptin becoming the everyday beatments they are non-

What are the different o are of climical trial

Most of the improvements in breast cencer treatment have happened because hay were first shown to work through a clinical this. For example, clinical tasks showed that breast conservation argany is a safe adamatist to maintectomy and that settinal node bipsay can be used instead of removing all the undersmit hymrh node, (adathor disacction). ants are no longer helping them (usual with metastatic treast cancer).







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#### Resources

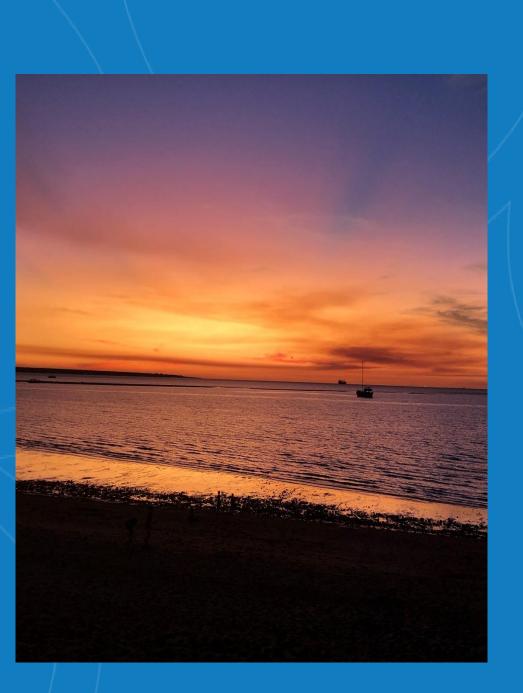
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#### Herceptin – HERA trial







" improving the quality of life of breast cancer patients and helping them to live longer is always at the front of our minds when we conduct our research "

> Associate Professor Shom Goel Peter MacCallum Cancer Centre

#### Thank you