

BACKGROUND

- TBCRC 013 is a multi-center prospective registry study with the primary goal of evaluating the role of surgery of the primary tumor in patients presenting with *de novo stage IV breast cancer*.
- Here we describe patient reported factors associated with the decision to proceed (or not proceed) with elective surgery.

METHODS

TBCRC013 Overall Eligibility

- de novo stage IV breast cancer with an intact primary tumor (cohort A)*
- Metastatic disease identified within 3mos of primary surgery (cohort B) – *not included in analysis*

Registry Study Design

- 1st line systemic treatment according to standard guidelines per treating MD
- Responders to therapy—discuss elective surgery
- Response defined as stable, partial, or complete response at distant sites
- Decision for surgery, type/extent of surgery per patient and physician discussions and preferences

Survey & Analysis

- Patient reported surgical decision making questionnaires completed after surgery decision**
- Patient demographics, tumor characteristics, and decision making responses compared by surgery**

RESULTS

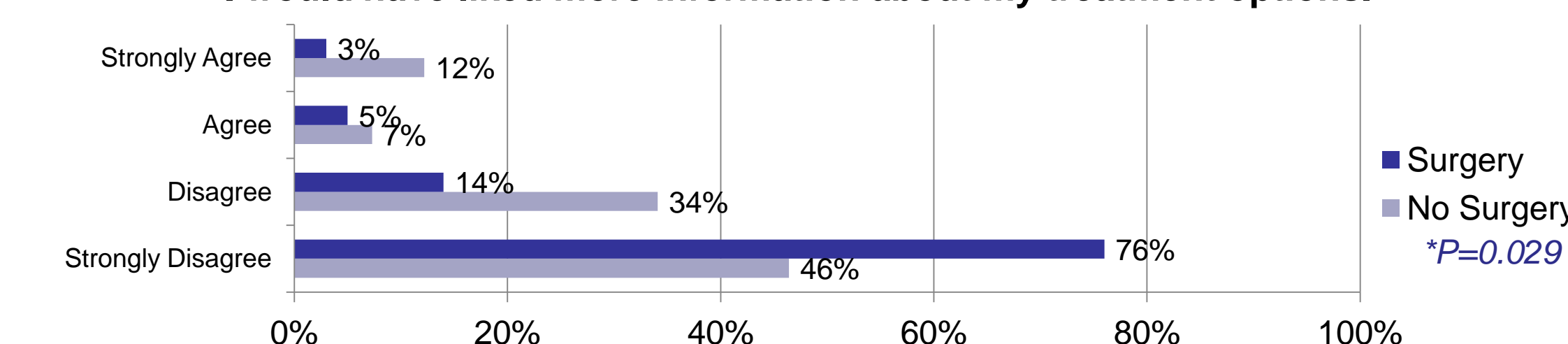
- 112 enrolled in TBCRC013 → 94 (85%) responded to 1st line tx → 39 (41%) proceeded with elective surgery.
- Demographics, comorbidities, tumor subtype, and site of metastasis at diagnosis did not differ by surgery.
- Patients undergoing surgery had larger tumors, were more likely to present with single site of metastatic disease, and were more likely to receive 1st line chemo.*

SURVEY RESULTS

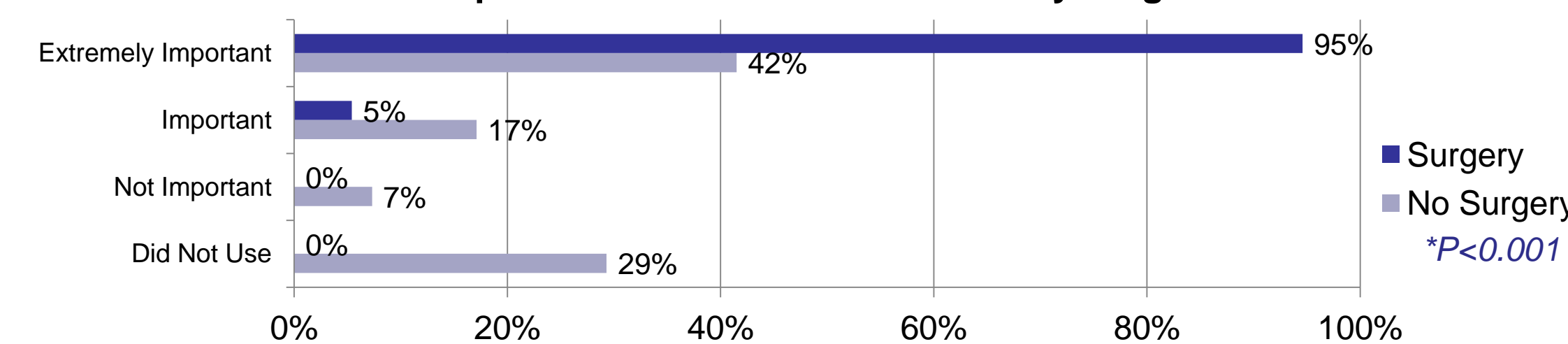
Table. Summary of patient-reported answers to the surgical decision-making survey.

	Response	Surgery N=37	No Surgery N=41	P-Values
I am satisfied that I was adequately informed about the issues important to my decision.	Strongly Agree	23 (62.2%)	20 (48.8%)	0.145
	Agree	13 (35.1%)	13 (31.7%)	
	Neutral	1 (2.7%)	5 (12.2%)	
	Disagree	0	3 (7.3%)	
I wish I would have given more consideration to other treatment options.	Strongly Agree	1 (2.7%)	2 (4.9%)	0.180
	Agree	2 (5.4%)	2 (4.9%)	
	Neutral	4 (10.8%)	12 (29.3%)	
	Disagree	30 (81.0%)	25 (61.0%)	
I would have liked to have been more active in the decision-making process.	Strongly Agree	1 (2.7%)	3 (7.3%)	0.059
	Agree	1 (2.7%)	3 (7.3%)	
	Neutral	4 (10.8%)	12 (29.3%)	
	Disagree	31 (83.7%)	23 (56.1%)	
I did not have as much say as I would have liked in my surgery decision.	Strongly Agree	2 (5.4%)	2 (4.9%)	0.046
	Agree	1 (2.7%)	2 (4.9%)	
	Neutral	1 (2.7%)	9 (22.0%)	
	Disagree	33 (89.2%)	29 (70.7%)	
How important were discussions with other MDs? <i>*1 did not answer from no-surgery group</i>	Extremely Important	28 (75.7%)	20 (48.8%)	0.103
	Important	4 (10.8%)	7 (17.1%)	
	Not Important	0	2 (4.9%)	
	Did Not Use	5 (13.5%)	11 (26.8%)	
	Did Not Answer	0	0	
How important were discussions with friends or family?	Extremely Important	15 (40.5%)	15 (36.6%)	0.795
	Important	15 (40.5%)	14 (34.1%)	
	Not Important	3 (8.1%)	5 (12.2%)	
	Did Not Use	4 (10.8%)	7 (17.1%)	
How important was written information I received from my MD? <i>*1 did not answer from no-surgery group</i>	Extremely Important	9 (24.3%)	12 (29.3%)	0.308
	Important	13 (35.1%)	7 (17.1%)	
	Not Important	3 (8.1%)	6 (14.6%)	
	Did Not Use	11 (29.7%)	15 (36.6%)	
	Did Not Answer	0	0	
How important was information I found searching the web? <i>*2 did not answer from no-surgery group</i>	Extremely Important	5 (13.5%)	1 (2.4%)	0.158
	Important	16 (43.2%)	12 (29.3%)	
	Not Important	7 (18.9%)	10 (24.4%)	
	Did Not Use	9 (24.3%)	16 (39%)	
How important were other sources of information? <i>*9 did not answer from surgery group *3 did not answer from no-surgery group</i>	Extremely Important	8 (21.6%)	5 (12.2%)	0.285
	Important	4 (10.8%)	3 (7.3%)	
	Not Important	2 (5.4%)	4 (9.8%)	
	Did Not Use	14 (37.8%)	26 (63.4%)	
	Did Not Answer	0	0	

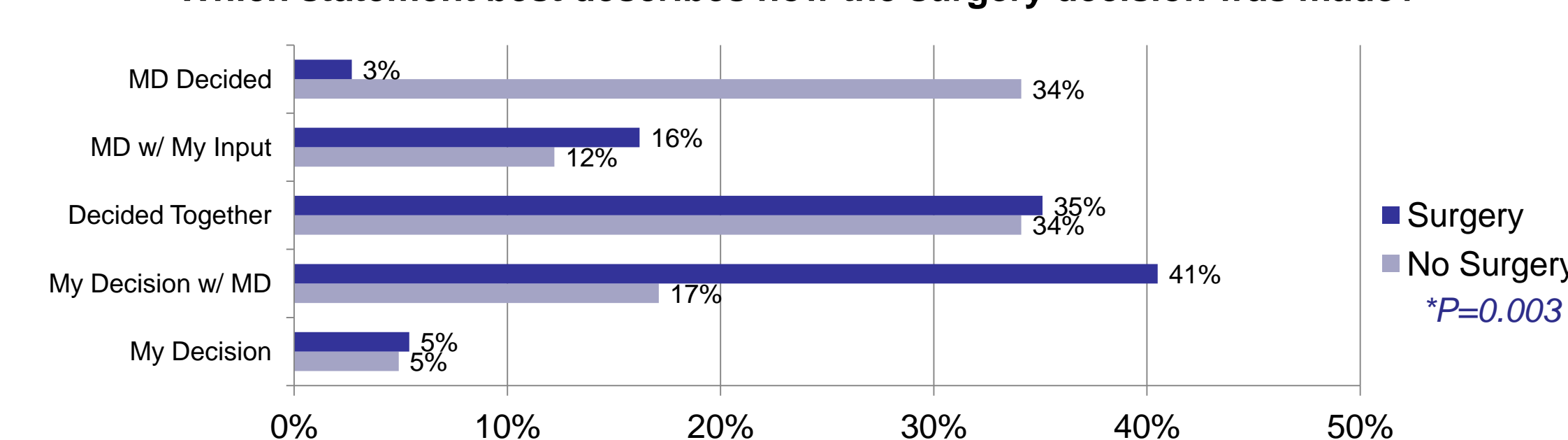
I would have liked more information about my treatment options.



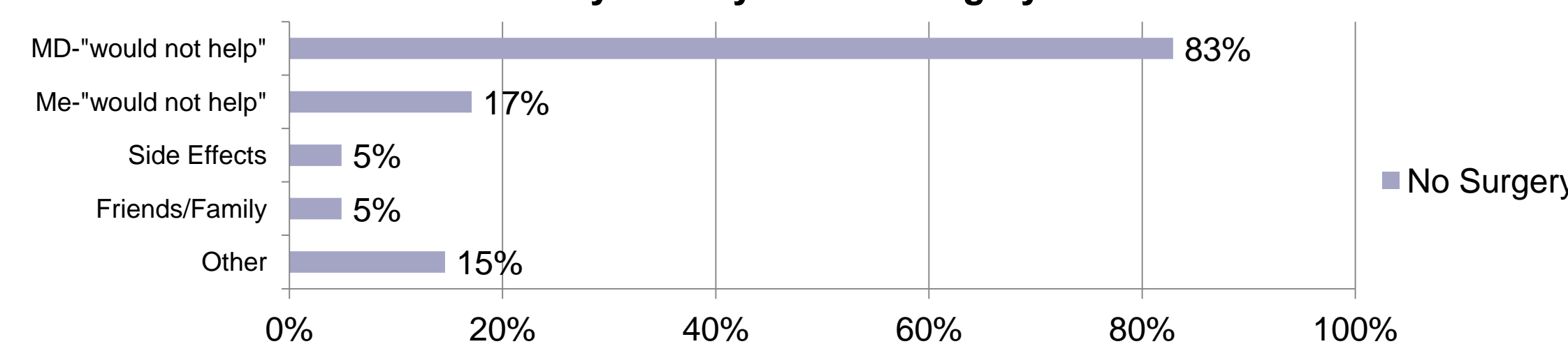
How important were discussions with my surgeon?



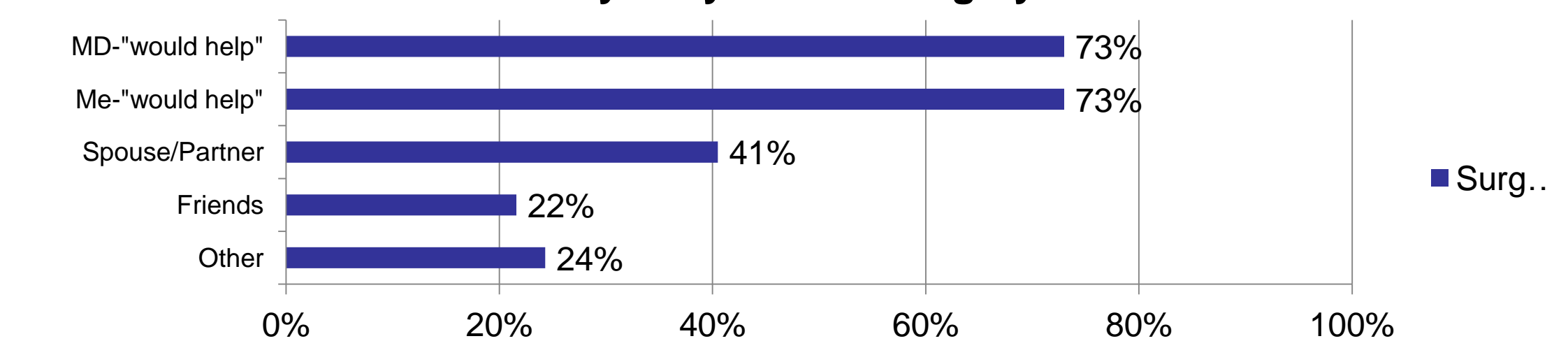
Which statement best describes how the surgery decision was made?



Why didn't you have surgery?



Why did you have surgery?



SURVEY RESULTS SUMMARY

- Among 94 who considered surgery, 78 completed the decision-making survey (Table).
- Satisfaction with info provided did not differ by surgery.
- Patients who did not have surgery were more likely to want more info about treatment options.
- All patients who had surgery felt discussions with the surgeon were important, compared to 58.6% of those not having surgery.
- For those having surgery, the surgery decision was most commonly made by the patient with MD input (40.5%) or together (35.1%); decisions among those not having surgery were also made together (34.1%), but more patients felt the decision was made by the MD (34.1% vs 2.7%, p=0.003).
- Of those not undergoing surgery, 82.9% reported that they did not have surgery because the MD did not think it would help, while only 17.1% reported they themselves did not think it would help. In contrast, those having surgery proceeded to surgery because both they and the MD thought it would help (73%).

CONCLUSIONS

- For women with *de novo stage IV breast cancer* and an intact primary tumor, communication regarding the risks and benefits associated with surgery for the primary tumor are vital to the decision making process.
- In the absence of a proven survival benefit, physicians should be aware of the importance of their input in this decision.

ACKNOWLEDGEMENTS

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