Certain breast CA patients benefit from adjuvant capecitabine

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(HealthDay)—Capecitabine (Xeloda) can extend the lives of patients with human epidermal growth factor receptor 2 (HER2)-negative breast cancer who have residual invasive disease after receipt of neoadjuvant chemotherapy, according to a study published in the June 1 issue of the *New England Journal of Medicine*.

The new trial focused on 910 women with HER2-negative residual invasive breast cancer after neoadjuvant chemotherapy. Participants received standard post-surgical treatment either with capecitabine or without (the control group).

The researchers found that capecitabine was associated with a reduced risk of relapse or death (30 percent over five years). At that point, 74.1 percent were still alive and recurrence-free, versus 67.6 percent of women in the control group. Five years later, 89.2 percent of capecitabine patients were still alive, compared with 83.6 percent of control patients. Among women with triple-negative breast cancer, 78.8 percent of capecitabine patients were alive after five years, compared with 70.3 percent of control patients.

"After standard neoadjuvant chemotherapy containing anthracycline, taxane, or both, the addition of adjuvant capecitabine therapy was safe and effective in prolonging disease-free survival and overall survival among patients with HER2-negative breast cancer who had residual invasive disease on pathological testing," the authors conclude.

More information: Abstract/Full Text (subscription or payment may be required)