


A Conversation Guide for Discussing Biomarker Testing in HR+/HER2- Early Breast Cancer With Your Health Care Team

Importance of biomarker testing in guiding eBC care

- Early breast cancer (eBC) is found in the breast and possibly nearby lymph nodes but has not spread to other parts of the body¹
- Testing for biomarkers helps your health care team predict how your cancer may behave and understand how likely, or unlikely, it is that a specific treatment may work for you¹⁻⁴

Biomarkers that may be evaluated in eBC^{5,6}


	Hormone receptor (HR) consisting of estrogen receptor (ER) and progesterone receptor (PR)	Human epidermal growth factor 2 receptor (HER2)	Ki-67
	Breast cancer gene 1/2 (<i>BRCA1/2</i>)	Gene expression profiling (GEP) ^a	Programmed cell-death ligand 1 (PD-L1)

- To appropriately evaluate the stage of your BC and predict how it will behave, all patients with BC should be tested for HR and HER2 biomarkers⁶
- Select patients with specific BC subtypes may be tested for certain additional biomarkers⁶
- Testing for germline *BRCA1/2* biomarker is recommended for any BC subtype^{6,7}

Biomarker tests can provide important information for patients with eBC

- GEP tests can help your care team understand^{6,a}
 - Whether your cancer is likely to return
 - Which specific systemic treatment may be right for you
- GEP tests are recommended for certain patients with HR+/HER2- eBC⁶

Commercially available GEP tests used in evaluating eBC^{6,a}

	21-gene (Oncotype DX [®])		70-gene (MammaPrint [®])	
	50-gene (Prosigna [®])	12-gene (EndoPredict [®])	Breast Cancer Index [®]	

- Your care team may also use an online risk calculator to help estimate your risk of recurrence⁸

Examples of risk calculators⁸

	iPredict [™]	RSCLin [®]
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^aPrognostic and predictive categorization is dependent on the specific GEP test.

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Biomarker testing in evaluating risk of recurrence

- If your cancer returns or spreads (becomes metastatic) after primary treatment, that is called *recurrence*^{9,10}
 - This risk is highest in the first 5 years and can persist for more than 20 years^{11,12}
- Important biomarker tests provide guidance on therapy choice by providing information on recurrence⁶

Your HR+/HER2- eBC treatment pathway

- Each patient’s cancer experience is different, and the steps taken for treating your eBC will be specific to you^{13,14,a}



Conversation checklist for talking about biomarker testing with your care team

- Questions/discussion points/tips to talk to your care team about biomarker tests and risk of recurrence

What factors are being used to select appropriate biomarker tests?	
How do GEP tests work, and how can they help us determine my risk of recurrence and guide my treatment plan?	
What is my nodal status, and how does it impact biomarker test selection, my risk of recurrence, and treatment options?	
If my cancer were to recur, what would the next steps in treatment be? How would my care plan change?	
What resources or support groups do you recommend for learning more about biomarker tests and risk of recurrence?	

Talk with your care team to learn more about biomarker testing and overall risk of BC recurrence to help create an individualized treatment plan just for you



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^aThis treatment pathway is an example of possible steps that can be used for treatment of HR+/HER2- eBC. Your health care team will help guide you in the steps that may be appropriate for you and when these will happen.

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