

Conclusion: We have used embedded tumor cells (ETC) as internal calibrators for accurate process control and normalization of the immunobead quantitative RT-PCR technique. The specificity and detection rate of tumor cells in blood and bone marrow was significantly increased by molecular analysis of a multi-marker gene panel. The newly introduced surrogate markers from the networks of apoptosis, invasion, angiogenesis and stem cell phenotype should improve early detection of metastasis, monitoring of therapy response and efficacy and selection of tailored therapy regimes.

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POSTER

Predictive role of Her-2 receptors on primary tumour in patients with liver metastases from breast cancer treated by surgery

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Introduction: Hepatic resection is a well-established therapy for patients with liver metastases (LM) from colorectal or neuroendocrine carcinoma. However, for patients with LM from breast cancer, the role of surgery in management of metastases from breast cancer is not well-defined and still controversial.

The objective of this retrospective study is to evaluate outcomes after surgical treatment of breast LM and to identify factors associated with longterm survival.

Material and Methods: Tumour characteristics, treatments, and outcomes of patients undergoing resection for hepatic metastases from breast cancer from June 1995 to Augustus 2005 were analyzed. Patient demographics, tumor characteristics, treatment, and postoperative outcome were analyzed. The start date for follow-up and survival analyses was the date of surgery for LM.

Results: After median follow-up of 25.5 months (range: 5–80) from hepatic surgery, the median cancer specific survival and median disease-free survival (DFS) was 50 months and 16.6 months respectively. There was no postoperative mortality. Univariate analysis suggests that prechemotherapeutic number of HM (single vs multiple) was associated with CSS; estrogen and progesterone receptors on primary tumour were associated with improved DFS. Furthermore, positive Herceptine receptor (HerR) on primary tumour was associated with worse CSS ($p < 0.0102$).

Conclusions: In selected patients, resection of breast LM can be done safely. HerR on primary tumour could be representing an unfavourable predictive factor for CSS.

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POSTER

Molecular predictive factors of response to taxanes and anthracyclines in breast cancer: toward a targeted perspective for cytotoxic therapy

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Background: Anthracyclines and Taxanes are among the most active drugs in the treatment of breast cancer. Acute and long-term side effects are mainly cardiotoxicity for anthracyclines and neuropathy for taxanes. The objective of the study is to identify markers of response to anthracyclines and to taxanes in the aim of tailoring a treatment plan. Topoisomerase IIa (Topolla) is the anthracyclines target and MAPtau regulates the microtubules dynamic instability, target of taxanes. Some studies have shown a positive correlation between Topolla overexpression and MAPtau underexpression and responsiveness to Anthracyclines or Taxanes.

Material and Methods: Topolla and MAPtau protein expression were evaluated by IHC using monoclonal antibodies (Ki-S1 and A0024) in 36 breast tissues from women with advanced breast cancer, treated with anthracyclines and taxanes. The protein expression was related to response, as well as to other prognostic factors such as age, hormone receptors (HRs), c-erb, p53, ki67 and bcl-2. Response was assessed using RECIST criteria.

Results: Our early data suggest that Topolla overexpression (cut-off $\geq 12\%$) and MAPtau underexpression (cut-off $< 30\%$) correlate with objective response to anthracyclines ($p = 0.004$) and to taxanes ($p = 0.007$). HRs is related to probability of response to both drugs ($p < 0.005$), even in the subgroups Topolla negative and MAPtau positive. Bcl-2 overexpression seems to be related to response in the subgroup MAPtau positive ($p = 0.006$). Other prognostic factors (age, c-erbB2, p53 and Ki67) are not related with

response either to anthracyclines and taxanes ($p > 0.01$), in particular HER-2 gene amplification did not alter neither the response to anthracyclines ($p = 0.86$) nor Topolla expression ($p = 0.4$).

Conclusion: These preliminary data suggest that Topolla overexpression and MAPtau underexpression are related to response to anthracyclines and taxanes, respectively. The presence of HRs favourably affects response to treatment with both drugs; Bcl-2 overexpression is related to response only in the subgroup MAPtau positive, while HER-2 gene amplification is not related to response to anthracyclines or to Topolla expression. These results should be considered in a larger cohort of patients, also to identify the role of other factors in the subgroup of responders which are Topolla negative and MAPtau positive and the mechanism of resistance in non-responders which are Topolla positive and MAPtau negative.

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POSTER

Beta-catenin stability, frizzled and cyclin D1 proteins expression in human breast cancer and its relation with their prognosis

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Background: Development and progression of breast cancer is associated with a number of genetic events, including changes in proto-oncogene and tumor suppressor gene expressions. Defects in components of Wnt signaling pathway including Adenomatosis Poliposis Coli (APC) tumor suppressor protein and β -catenin are known to cause colon and melanoma tumors. Beta-catenin is a central element in Wnt signaling pathway. Post-transcriptional accumulation of β -catenin in cytoplasm and subsequent translocation into the nucleus is thought to be the cause of its tumorigenic potential. Genes which have a definitive role on cell cycle control such as MYC and Cyclin D1 have important roles in development of tumors. Accordingly we have examined β -catenin stability, which is known to have the transcriptional activation affect on such genes mentioned above, in tissues from 118 primary breast cancer patients. Since there is no data on the inactivation of APC in breast cancers, we decided to focus on two other factors which could be the cause of β -catenin stability; 1) β -catenin mutations and 2) Wnt pathway.

Materials and Methods: We used immunocytochemical staining to investigate the stability and location of β -catenin, expression of FRP-1 and FRP-2 proteins as Wnt signaling inhibitors and the expression of Cyclin D1 as one of the genes controlled by β -catenin.

Results: β -catenin, Cyclin D1, FRP1 and FRP2 expression percentages were 53.5 ± 32 , 41.8 ± 33 , 25.0 ± 26.9 and 31.6 ± 28.3 respectively. When these results were correlated with factors including menopausal status, progesterone receptor positivity, Cerb2 positivity, lymph node involvement and staging no statistical significance was found. On the other hand in patients with Estrogen receptor positivity ($p = 0.0005$) and Ki67 positivity ($p = 0.037$) Cyclin D1 and in Ki67 positive patients FRP1 ($p = 0.024$) expression percentages were significantly high. β -catenin expression was increased only in p53 positive patients ($p = 0.039$). Disease free and overall survival rates were not found to be correlated with β -catenin, Cyclin D1, FRP1 ve FRP2 expression percentages. β -catenin localization and disease free and overall survival relation was also assessed 64 patients and existence of cytoplasmic localization of β -catenin was not found to affect survival rates.

Conclusion: β -catenin, Cyclin D1, FRP1 ve FRP2 expressions were not found to influence disease free and overall survivals.

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POSTER

Clinical and biological metastatic breast cancer (MBC) outcomes after discontinuation of treatment with bevacizumab plus metronomic capecitabine and cyclophosphamide: a retrospective analysis

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Background: Angiogenesis plays an important role in breast cancer development and progression. Bevacizumab is a humanized monoclonal antibody against VEGF, which showed activity in monotherapy or in combination with chemotherapy in MBC. We recently reported results of a phase II trial evaluating the association of bevacizumab plus oral metronomic capecitabine and cyclophosphamide in MBC, showing efficacy