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Hormone-immunotherapy in endocrine-dependent metastatic breast cancer and serum biomarkers

Hormone therapy is currently advised for ER+ metastatic breast cancer patients; however in most of them the arising of resistance is a not yet well understood hurdle to overcome. We hypothesized that in these patients during clinical benefit from antiestrogen therapy the addition of cycles of sequential immunotherapy could prolong the benefit and delay the occurrence of acquired hormone resistance. In order to validate this hypothesis, in 1992 we started an open, prospective exploratory clinical trial. Here we summarize and update the clinical data and focus on the main serum biomarkers that proved helpful to monitor the efficacy of hormone immune therapy.

Biography

\$QGUHD 1LFROLQL PDLQO\ GHYRWHG KLV UHVHDFK RYHU WKH SDVW \HDUV WR WKH ¿HOG RI EUHDV\ HDUO\ GHWHFWLRQ DQG WUHDWPHQW RI PHWDVWDWLF GLVHDVH DQG WKH IXQFWLRQ RI FHO O PHGLDW JHQ WKHUDS\ WR RYHURPH WKH DULVLQJ RI UHVLVWDQFH LQ HQGRFULQH GHSHQGHW PHWDVWDWLF DERXW RULJLQDO SSSHUV UHYLHZ DUWLFOHV LQFOXGLQJ ERRN FKDSWHUV PRVW RI WKHP LQ SHHU UDQN VFLHQWL¿F MRXUQDOV DQG UHJXODUO\ VHUYHV DV UHYLHZHU IRU WKHP DQG PDQ\ RWKHUV

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