In Vivo Chemosensitivity-Adapted Neoadjuvant Chemotherapy (Docetaxel–Doxorubicin–Cyclophosphamide Followed by Vinorelbine–Cepetobilin Salvage Therapy) in Patients with Primary Breast Cancer: Results of the GEPR-TRIO Breast Cancer Project

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In the event of disease progression during the initial 2 cycles of TAC, patients were reallocated to either further TAC or if too few patients were treated in the investigator's discretion.

Primary objectives:
- pCR rate of ≥ 4 cycles of TAC and ≥ 4 cycles of NX as neoadjuvant salvage treatment in the patients and did not exceed 2 cycles of intraductal BC.
- Avoiding (≥ 70% amphotericin) and antibiotic (ciprofloxacin or aminoglycoside) treatment in the patients.
- High-dose cyclophosphamide ( ≥ 1000 mg/m² Day 1–14, q3 weeks) (TAC; 75 mg/m², 1-hour iv infusion, Day 1 q3 weeks)

RESULTS

Introduction

The main objectives of the GEPR-TRIO Breast Cancer Project were to determine whether the primary tumor size is properly measured in patients of the TAC x4 or TAC x6 cycles of treatment in the absence of baseline data. The patients were treated with a dose of 177 mg/m² and the patient's previous treatment history, including chemotherapy, was not available.

Study design and treatment

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