RECENTLY ACTIVATED: EAZ171 – PROSPECTIVE VALIDATION TRIAL OF TAXANE THERAPY (DOCETAXEL OR WEEKLY PACLITAXEL) AND RISK OF CHEMOTHERAPY-INDUCED PERIPHERAL NEUROPATHY IN AFRICAN AMERICAN WOMEN

The American Society of Clinical Oncology considers neuropathy caused by chemotherapy to be one of the three most important survivorship issues impacting cancer patients. Symptoms of neuropathy most often appear in the hands and feet and include numbness, tingling, pain, muscle weakness, and sensitivity to temperature. This discomfort can be so great that doctors lower or even stop chemotherapy doses in their patients. When this happens, cancer is more likely to come back (recur).

Recent research shows patients of African ancestry have a much higher risk of experiencing side effects from chemotherapy, especially neuropathy, and thus have a higher risk of discontinuing treatment. This results in increased recurrence and worse survival rates in Black patients compared with White patients. EAZ171, led by Bryan P. Schneider, MD of Indiana University School of Medicine, aims to improve outcomes for Black women with breast cancer by:

1) Determining which women are most at-risk for neuropathy based on their DNA, and
2) Determining which regularly prescribed chemotherapy treatment, docetaxel or paclitaxel, will result in less neuropathy

Through this work, researchers hope to definitively conclude which treatment is better, and less likely to cause neuropathy, for women of African ancestry. They also hope to learn more about why Black women, specifically, are more susceptible to neuropathy.

Learn more about EAZ171 on the ECOG-ACRIN website.