

EA1131 Clinical Trial Results Summary

Testing Platinum-based Chemotherapy after Surgery in Triple-negative Breast Cancers

What did this trial involve and who was it for?

This trial was for patients with triple-negative breast cancer (TNBC). TNBC is a type of breast cancer that does not have estrogen, progesterone, or HER2 receptors. Treatment options are limited, as drugs that target those tumor characteristics will not be effective.

The usual chemotherapy for patients with TNBC who are at higher risk of their cancer coming back is a drug called capecitabine (Xeloda®). Chemotherapy drugs work in different ways to stop the growth of tumor cells, and EA1131 sought to find out if another type of chemotherapy drug, known as platinum-based chemotherapy, might be more effective than capecitabine. In this study, the platinum-based drugs were carboplatin or cisplatin.

What are the results?

Between 2015 and 2021, 410 study participants were randomly assigned by a computer to receive either platinum-based chemotherapy or capecitabine. The study was stopped early, after a planned review showed that treatment with platinum-based chemotherapy was not significantly more effective than capecitabine.

- Long-term outcomes were worse than expected for both groups of patients. Based on data from other studies, EA1131 estimated that 67% of patients receiving capecitabine would remain cancer-free at 4 years after the end of treatment. At 3 years, 49% of patients who received capecitabine remained cancer-free.
- Similarly, 42% of patients who received platinum-based chemotherapy (carboplatin or cisplatin) remained cancer-free at 3 years after the end of treatment. Serious side effects, mainly anemia and lower white blood cell count, were more common in patients who received carboplatin or cisplatin.

What do the results mean for patients?

Treatment with platinum-based drugs (carboplatin and cisplatin) did not improve long-term outcomes for patients with TNBC. In addition, more patients who received these drugs experienced certain serious side effects compared with patients who received capecitabine. EA1131's results highlight the need to continue developing more effective treatments for triple-negative breast cancer.

For more information, go to:

- United States National Institutes of Health (NIH) Library of Medicine: https://clinicaltrials.gov/study/NCT02445391
- Journal of Clinical Oncology: https://ascopubs.org/doi/10.1200/JCO.21.00976





About ECOG-ACRIN

This trial was led by the ECOG-ACRIN Cancer Research Group (ECOG-ACRIN). ECOG-ACRIN is a membership-based scientific organization that designs and conducts cancer research involving adults who have or are at risk of developing cancer. ECOG-ACRIN is a component of the National Cancer Institute's National Clinical Trials Network. Learn more at www.ecog-acrin.org.

To all the patients that participated in this trial, thank you. Without the involvement of patients like you, this research would not have been conducted.

