

Lo studio SOFT

commento alla metodologia

Valter Torri Istituto 'IRCCS-Mario Negri', Milano

Analisi critica

- Peculiarità e rilevanza del quesito
 - popolazione / interventi / outcomes
- Validità
 - disegno / conduzione / analisi
- Risultati
 - presentazione / interpretazione

Implicazioni

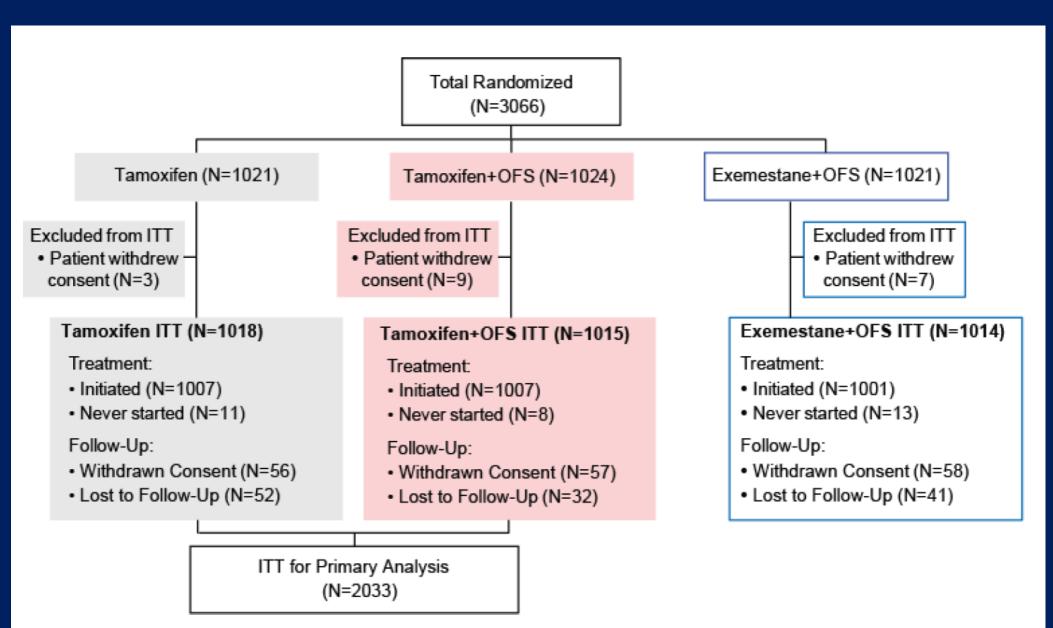
Peculiarità del quesito

- Terapia adiuvante:
 - Trattamento di pazienti apparente libere da malattia per ridurre il rischio di recidive
- Peculiarità:
 - si applica a molte pazienti,
 ma poche ne trarranno beneficio
- Ricadute:
 - Disegno (protocol changes)
 sample size (≈1000 pts/arm)
 durata (≈12 yrs)
 - valutazione benefico:rischio

Validità

- Disegno
 - Pragmatico, di strategia
 - "all inclusive": minime restrizioni
 - different option for ovarian ablation/suppression allowed
- Criticità
 - Case-mix differente rispetto all'atteso:
 pazienti più anziane e a minor rischio
 - → Riduzione della potenza statistica
 - →Cambio del quesito
 - Esclusione del confronto col braccio con AI exemestane da analisi primaria

CONSORT flow-diagram



Effetti sulla precisione

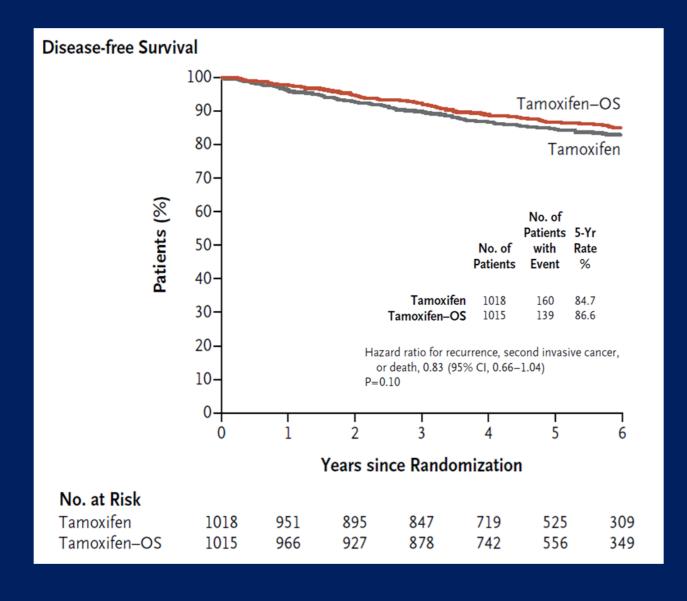
Da protocollo

"We calculated that with an estimated 186 events of disease recurrence, second invasive cancer, or death in the two treatment groups after a median follow-up of 5 years, the study would have at least 80%, 69%, and 52% power to detect reductions in risk of 33.5%, 30%, and 25%, respectively, with tamoxifen plus ovarian suppression versus tamoxifen alone, at a two-sided alpha level of 0.05"

Al momento dello studio: eventi 299

Potenza		Riduzi	Riduzioni del rischio					
prima	dopo	relative	\longrightarrow	assolute 5y	\rightarrow	NNT		
80%	93%	33.5%		5.0%		20		
69%	87%	30.0%		4.0%		25		
52%	70%	25.0%		3.5%		29		

I risultati ottenuti: EP primario DFS



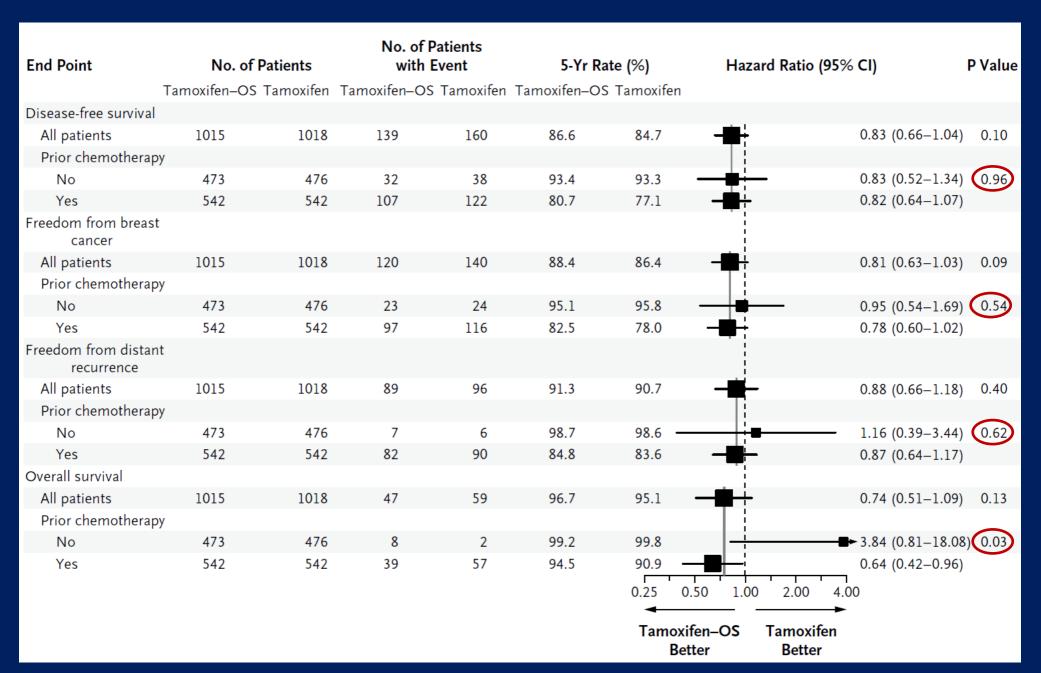
Riduzione

- relativa: 17%
- assoluta 5y: 2%
- NNT: 50

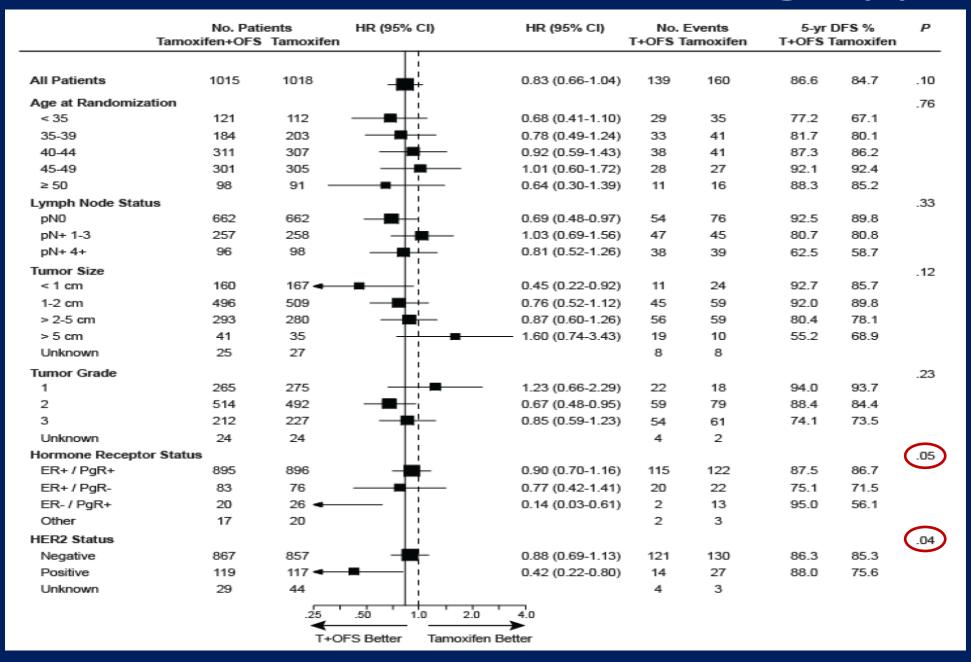
Analisi aggiustata: DFS

		Hazard		P-Value
Parameter		Ratio	95% CI	(df) ¹
Treatment assignment	T+OFS vs. T	0.78	(0.62, 0.98)	0.03
Age at randomization	<35	-	-	< 0.01
	35-39	0.71	(0.50, 1.00)	
	40-44	0.60	(0.42, 0.85)	
	45-49	0.58	(0.39, 0.87)	
	50+	0.98	(0.60, 1.61)	
Hormone receptor status	ER+ / PgR+	-	-	0.10
	ER+ / PgR-	1.35	(0.96, 1.90)	
	ER-/PgR+	1.72	(1.00, 2.94)	
	Other	0.95	(0.39, 2.33)	
No. nodes positive ²	N 0	-	-	< 0.01
	N+ 1-3	-	-	
	N+ 4+	1.65	(1.19, 2.30)	
Tumor size	<1cm	-	-	< 0.01
	1-2cm	0.73	(0.49, 1.08)	
	>2-5cm	0.93	(0.61, 1.42)	
	>5cm	1.42	(0.83, 2.45)	
	Unknown	1.64	(0.87, 3.10)	
Tumor grade	1	-	-	< 0.001
	2	1.47	(1.02, 2.11)	
	3	2.06	(1.39, 3.06)	
	Unknown	0.82	(0.33, 2.00)	
Local-regional therapy	Mastectomy, no RT	-	-	0.35
	Mastectomy + RT	1.08	(0.74, 1.57)	
	BCS + RT	0.85	(0.62, 1.17)	
	Other	0.43	(0.06, 3.15)	
HER2-targeted therapy	Not HER2+	-	-	0.07
	HER2+, no therapy	1.14	(0.71, 1.83)	
	HER2-targeted therapy	0.61	(0.39, 0.95)	

I risultati ottenuti: EP secondari



I risultati ottenuti: DFS sottogruppi



I risultati ottenuti: I sede relapse

	Chemotherapy Stratum													
Sites of First Failure	No Chemotherapy			Prior Chemotherapy				Treatment Assignment						
			Tamoxifen			Tamoxifen				Tamo	Tamoxifen			
(DFS event)	Tamoxifen		+OFS		Tamoxifen		+OFS		Tamoxifen		+OFS		Overall	
	N	%	N	%	N	%	N	%	N	% 0	N	%	N	%
N Patients	476	100	473	100	542	100	542	100	1018	100	1015	100	2033	100
N (%) DFS events	38	8.0	32	6.8	122	22.5	107	19.7	160	15.7	139	13.7	299	14.7
Site of First Failure														
Local	6	1.3	3	0.6	15	2.8	9	1.7	21	2.1	12	1.2	33	1.6
Contralat. breast ±above	8	1.7	9	1.9	8	1.5	3	0.6	16	1.6	12	1.2	28	1.4
Regional ±above	4	0.8	5	1.1	10	1.8	5	0.9	14	1.4	10	1.0	24	1.2
Soft tissue / distant														
lymph nodes ±above	-	-	-	-	3	0.6	3	0.6	3	0.3	3	0.3	6	0.3
Distant bone ±above	4	0.8	2	0.4	27	5.0	35	6.5	31	3.0	37	3.6	68	3.3
Distant viscera ±above	2	0.4	4	0.8	52	9.6	42	7.7	54	5.3	46	4.5	100	4.9
Second (non-breast)														
invasive cancer*	12	2.5	9	1.9	5	0.9	10	1.8	17	1.7	19	1.9	36	1.8
Death without prior														
cancer event	2	0.4	-	-	2	0.4	-	-	4	0.4	-	-	4	0.2

Adverse Events

Adverse Event		Tamoxifen	(N=1006)		Tamoxifen plus Ovarian Suppression (N=1005)					
	Any Event		Grade	3 or 4 Event	Ar	ny Event	Grade 3 or 4 Event			
	no. of patients with event	% (95% CI)	no. of patients with event	% (95% CI)	no. of patients with event	% (95% CI)	no. of patients with event	% (95% CI)		
Hot flushes	803	79.8 (77.2–82.3)	76	7.6 (6.0–9.4)	939	93.4 (91.7–94.9)	133	13.2 (11.2–15.5)		
Depression	469	46.6 (43.5–49.8)	38	3.8 (2.7-5.1)	522	51.9 (48.8-55.1)	44	4.4 (3.2–5.8)		
Sweating	486	48.3 (45.2–51.4)	_	_	621	61.8 (58.7-64.8)	_	_		
Insomnia	466	46.3 (43.2–49.5)	29	2.9 (1.9-4.1)	575	57.2 (54.1–60.3)	46	4.6 (3.4-6.1)		
Hypertension	173	17.2 (14.9–19.7)	54	5.4 (4.1-6.9)	233	23.2 (20.6–25.9)	75	7.5 (5.9–9.3)		
Musculoskeletal symptoms	694	69.0 (66.0–71.8)	63	6.3 (4.8–7.9)	755	75.1 (72.3–77.8)	55	5.5 (4.1–7.1)		
Osteoporosis	124	12.3 (10.4–14.5)	1	0.1 (0.0-0.6)	201	20.0 (17.6–22.6)	3	0.3 (0.1-0.9)		
Vaginal dryness	421	41.8 (38.8-45.0)	_	_	500	49.8 (46.6–52.9)	_	_		
Decreased libido	427	42.4 (39.4–45.6)	_	_	477	47.5 (44.3–50.6)	_	_		
Glucose intolerance†	18	1.8 (1.1-2.8)	3	0.3 (0.1-0.9)	35	3.5 (2.4–4.8)	14	1.4 (0.8–2.3)		
Any targeted adverse event‡	959	95.3 (93.8–96.5)	238	23.7 21.1–26.4)	989	98.4 (97.4–99.1)	315	31.3 (28.5–34.3)		

Incremento relativo del rischio: 32% Incremento assoluto del rischio: 7.6% NNH: 13

Rapporto R/B

→ 4 AE Gr 3-4 in più per 1 relapse evitato

Conclusioni

 This trial did not support routine use of ovarian suppression in premenopausal breast cancer.

 Nevertheless, there may be some benefit from ovarian suppression in the subgroup of younger patients whose menses return after adjuvant chemotherapy, but also more symptoms.