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Determination of adverse factors of forecast of breast cancer of the first stage

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Worldwide, breast cancer is in the first place in the structure of the incidence of female cancer and ranks second in mortality. In 2013, the death rate from breast cancer was 17% of all women's oncological diseases. Over the past 10 years, the proportion of patients with this pathology, identified in the early stages, has increased. The five-year survival rate for the first stage of breast cancer reaches 95%. In recent years, progress has been made in the treatment of stage 2 diseases, but in the first stage of breast cancer, survival is stable. The further possibility of reducing this indicator has not been studied. In this connection, it is necessary to determine the factor of influence on the index of locator relapse, distant metastasis and mortality in cases of small tumor size (up to 2 cm). Also, attention should be paid to the possibility of predicting long-term results of treatment of breast cancer. The search for factors capable of predicting long-term results led to the creation of a classification of breast cancer based on the definition of immuno-histochemical markers. At present, the urgent task is to study the molecular genetic features of tumors and to identify new genetic factors predicting the course of the oncological process. In countries that address this problem, many studies are under way to identify genetic markers for distant metastases. These studies were marked by the creation of prognostic genetic signatures, many of which are used in clinical practice. In connection with the lack of the possibility of using gene signatures in our country in clinical practice, it is necessary to formulate tactics for predicting the course of patients in the nodal form of breast cancer of the first stage on the basis of the volume and nature of treatment, to determine the correlation of progression factors from the tumor histological subtype, relapse and outcome of treatment of breast cancer of different localization. The objective was forecasting course in patients with nodular breast cancer of the first stage. Tasks: (1) Evaluate the long-term results of treatment of breast cancer pT1N0M0, (2) To reveal the interrelation of the progression factors with the volume and nature of the treatment, the histotype and the phenotype of the tumor, (3) Identify a period of high risk of disease progression and (4) To make the algorithm of diagnosis and treatment of breast cancer at the first stage. Patients who underwent surgical treatment between 1998 and 2017 with a diagnosis of breast cancer; Nodular form of breast cancer; Tumor size by histological examination up to 2 cm (T1); 2a clinical group and Primary operating Sa were taken as research materials.

Biography

Diana Khyzina is currently working in Tatarstan Regional Clinical Cancer Center, Russian Federation an her research interest is Breast cancer.

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Notes:

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