## **Journal of Oncology Translational Research**



## Local and systemic inflammatory markers as prognostic and predictive markers in locally advanced triple negative breast cancer

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## Abstract

Introduction: Local inflammatory markers have been defined as prognostic and predictive markers in triple negative markers as proved by many studies. The prognostic and predictive value of systemic inflammatory markers such as neutrophil lymphocyte ratio (NLR) and lymphocyte monocyte ratio (LMR) remain to be elucidated.

Aim of study: To evaluate pathological complete response (PCR) to neoadjuvant chemotherapy in locally advanced cancer breast in relation to tumor infiltrating lymphocytes(TILs), neutrophil lymphocyte ratio and lymphocyte monocyte ratio as well as overall survival and disease free survival. Patients and methods: In Tanta university Hospital, oncology department form January 2012 to December 2013, 67 patients with locally advanced TNBC stage IIB, IIIB 0r IIIC using TNM 8th edition. All patients received neoadjuvant chemotherapy in the form of dose dense AC followed by paclitaxel (adriamycin and cyclophosphamide 60 mgm/ m2 and 600 mgm/m2 respectively the cycle is repeated every 2 weeks for 4 cycles followed by paclitaxel 175mgm/m2 every 2 weeks for 4 cycles). All cycles with G-CSF support. Pretreatment TILs, NLR and LMR were evaluated with PCR and as prognostic factor of survival. Results: Low NLR has been detected in 74.6% of cases and has been associated with high TILs and this was statistically significant (p value=0.03). High LMR was observed in 80.6% of cases and correlated significantly with TILs (p value=0.003). Pathological CR was found to be associated with high TILs, low NLR and high LMR. In our study we evaluated the pre neoadjuvant systemic and local inflammatory markers as prognostic marker we found that in multivariate analysis, the lymphocyte monocyte ratio maintained their statistical significance with overall survival. While tumor infiltrating lymphocyte maintained their statistical significance as prognostic factors with overall survival and disease free survival. Conclusion: Systemic inflammatory markers can be used as marker of pathological complete response in locally advanced triple negative breast6 cancer with neoadjuvant chemothe.

## **Biography**

Lamiss Mohamed Abd Elaziz working as a lecturer of Radiation Oncology and Nuclear Medicine Department in Tanta University. He has got the following. Qualifications: 1- M.B.B.ch. November 1997 with Very good and Honor degree, 2- Master of Radiation Oncology and Nuclear Medicine April 2004, 3- Doctorate Degree in Radiation Oncology and Nuclear Medicine, M.D during April 2010. Lamiss Mohamed abd El-aziz has taken the following positions: 1. House Officer Tanta University Hospital Tanta from 1/3/1998 from 29/3/1999, 2. Physician in the Ministry ofd Health (el-ghabia province) Tanta, Egypt from 1/3/1999 till 10/7/1999, 3. Resident in Clinical oncology Department, Tanta University Hospital, Egypt from 11/7/1999 to 10/7/2002, 4. Demonstrator of Radiation Oncology and Nuclear Medicine department, from 20/10/2002, 5. Assistant Lecturer of Radiation Oncology and Nuclear Medicine department from 10/7/2004, 6. Lecturer of Radiation Oncology and Nuclear Medicine department from 30/6/2010 and till the present.



19th Global Summit on Breast Cancer October 30, 2020

Citation: Lamiss Mohamed Sad, Local and systemic inflammatory markers as prognostic and predictive markers in locally advanced triple negative breast cancer, Breast Cancer Meet 2020, 19th Global Summit on breast Cancer, October 30, 2020, Page No-02