

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/project-oncology/the-promise-reality-of-oligometastatic-ablation-updates-in-breast-cancer-from-sabcs-2021/12978/>

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The Promise & Reality of Oligometastatic Ablation: Updates in Breast Cancer from SABCS 2021

Announcer:

You're listening to *Project Oncology* on ReachMD. On this episode, sponsored by Lilly, we're going to hear from Dr. Steven J. Chmura, who's the Director of Clinical and Translational Research for Radiation Oncology at the University of Chicago. Dr. Chmura will be sharing insights from the session he moderated at the 2021 San Antonio Breast Cancer Symposium titled, "The Promise and Reality of Oligometastatic Ablation for Breast Cancer." Here's Dr. Chmura now.

Dr. Chmura:

This year that we have a really exciting session, focusing on oligometastatic disease, and trying to actually, talk about what we currently know about it, about the clinical presentations, about how best to classify this idea of limited spread. And then to really delve into what we know about interventions, to actually ask the question 'now do our interventions help?' Does operating on these areas help? Does doing high doses of radiation help?

The two talks are going to really focus on this. The first one is going to focus on actually defining the oligo or metastatic state, really like discussing the ongoing trials. In the second talk, we are going to focus more specifically on the gaps in the evidence as to what we do you know, especially about intervention, and what we don't know and what we hope to know over the next few years.

Over the past 25 years, we have really been talking about oligo metastases and this concept that some patients could be helped or then even cured. And again, this has been 25 years. And we now have the science to understand there is a biologic basis for presenting with sort of a spectrum of spread of disease. We have interventions, which are safe and can actually ablate tumors if they are like resected through minimally invasive means, or doing high doses of radiation.

And finally, the trials are ongoing. So, we actually have Phase 3 trials that are disease specific, which are really focusing on the question everybody wants to know, even if the presentation of oligo metastases exists, and patients do well, do our interventions actually help? And we are at the point, and quite soon are going to have some of those answers.

I hope my colleagues can recognize after this session that oligo and metastasis is simply a spectrum of disease, and that it seems to be in sort of one corner and that we should probably not think of metastases as being a binary event, either it happens or it does not. And we more than likely need to really customize our treatments to the patient and the specific presentation.

I think the second point is that, while there is a biologic basis to this sort of limited spread of disease, and that patients do appear to actually do quite well, we haven't answered the fundamental question, if our interventions of local treatments actually improve outcomes or whether they simply add to toxicity.

So, I hope after this session people are even more encouraged and excited to enroll to the Phase 3 trials.

Announcer:

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