

CASE #2

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DISCLOSURES

- No relevant disclosures to report
- I3 Health and FLASCO have mitigated all relevant financial relationships

HISTORY OF PRESENT ILLNESS

- 64 YO F with no significant past medical history had MMG and US breast revealed hypoechoic mass, measures 18 x 12 x 9 mm in the right breast.
- Biopsy revealed - poorly differentiated carcinoma, ER + (100%), PR- (0%, no staining), HER-2/neu; Equivocal (2+); ISH - (HER-2/CEP 17 ratio of 1.40), Ki-67: 75%.
- MRI Breast- Extensive mass measuring up to 6 cm with suspected LNs. PET CT – Negative.
- Right mastectomy and right axillary node dissection - Invasive ductal carcinoma, Nottingham histologic grade 3, measuring 2.4 cm. Two separate foci of DCIS, high nuclear grade, solid, micropapillary and papillary patterns seen measuring 2 cm and 1.4 cm. LVI +, 10/26 lymph nodes positive.

TREATMENT HISTORY

- In summary, **64 YO F with diagnosis of right breast IDC ER+ PR- HER2- s/p mastectomy on 11/28/22 (pT2pN3aM0), anatomic and prognostic stage IIIC.**
- Adjuvant completed ddAC x 4 cycles (10% dose reduction due to mucositis, fevers) f/b weekly Taxol x 12
- Completed adjuvant XRT and started on anastrozole
- Before starting adjuvant Abemaciclib she got a negative signetera test

FINAL RESULTS SUMMARY

Signatera Positive



Date: 03/05/2025

MTM/mL: 1.82

Mean tumor molecules per mL is calculated based on the mean of ctDNA molecules detected per mL of the patient's plasma. See Limitations section below.

Historical Results



Date	Reported MTM/mL
Mar 05, 2025	1.82
Feb 05, 2025	0.94
Dec 24, 2024	6.22
Nov 06, 2024	3.91
Aug 26, 2024	1.17
Jul 18, 2024	0.78
Jun 05, 2024	0.00
Apr 23, 2024	0.00
Mar 20, 2024	0.00
Sep 20, 2023	0.00

TREATMENT HISTORY

- Signatera started to uptrend but no discernable site of metastatic disease until 6 months later
- Bone scan eventually showed osteoblastic and liver mets
- Liver biopsy showed ER 95%, PR 0% and HER2+ not amplified on DISH
- Guardant 360 - no actionable mutations

QUESTIONS?

- How would you navigate in this situation, with uptrending Signatera in the adjuvant setting but no evidence of metastatic disease yet?
- What therapy, if any would you recommend to control/eliminate any measurable disease as evidenced through ctDNA?

CURRENT THERAPY AND NEXT STEPS?

- Started on Ribociclib and Fulvestrant, requiring dose reduction due to neutropenia.
- Signetera going up again, so discussing change of therapy.
- **What would be your choice of therapy in this situation with no targetable mutations in HR+ HER2 low mBC in second line setting?**

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- THANK YOU!