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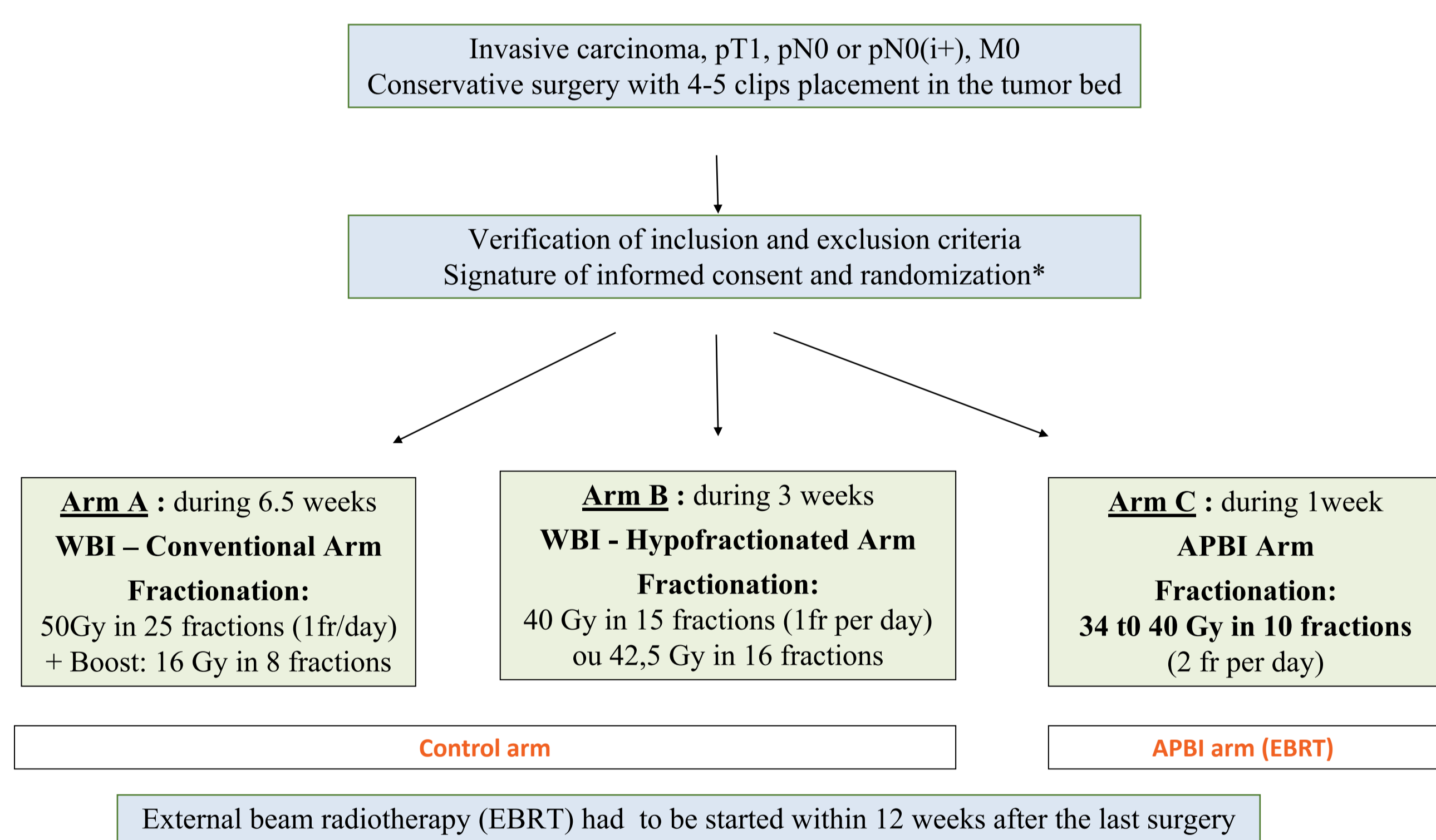
Purpose

The aim is to report toxicity and cosmetic outcomes at 3 and up to 9 years of follow-up of post-menopausal patients randomized to receive either standard whole breast irradiation (WBI), including hypofractionated options, versus accelerated partial breast irradiation (APBI).

Methods

SHARE (NCT01247233): national, non-inferiority, randomized, open-labeled, Phase III trial, sponsored by Unicancer, comparing APBI versus WBI in terms of local control as primary objective.

Trial overview



Statistical considerations

Secondary endpoints were severe toxicity (NCI-CTCAE v4 grade ≥ 2), and cosmetic results. For both outcomes, we estimated the cumulative incidences (CI) using Kalbfleish and Prentice method, considering disease relapse, secondary cancer or death as competing events. Treatment effect (APBI vs WBI) was estimated by cause-specific Hazard Ratios (cs-HR) from Cox models.

Results

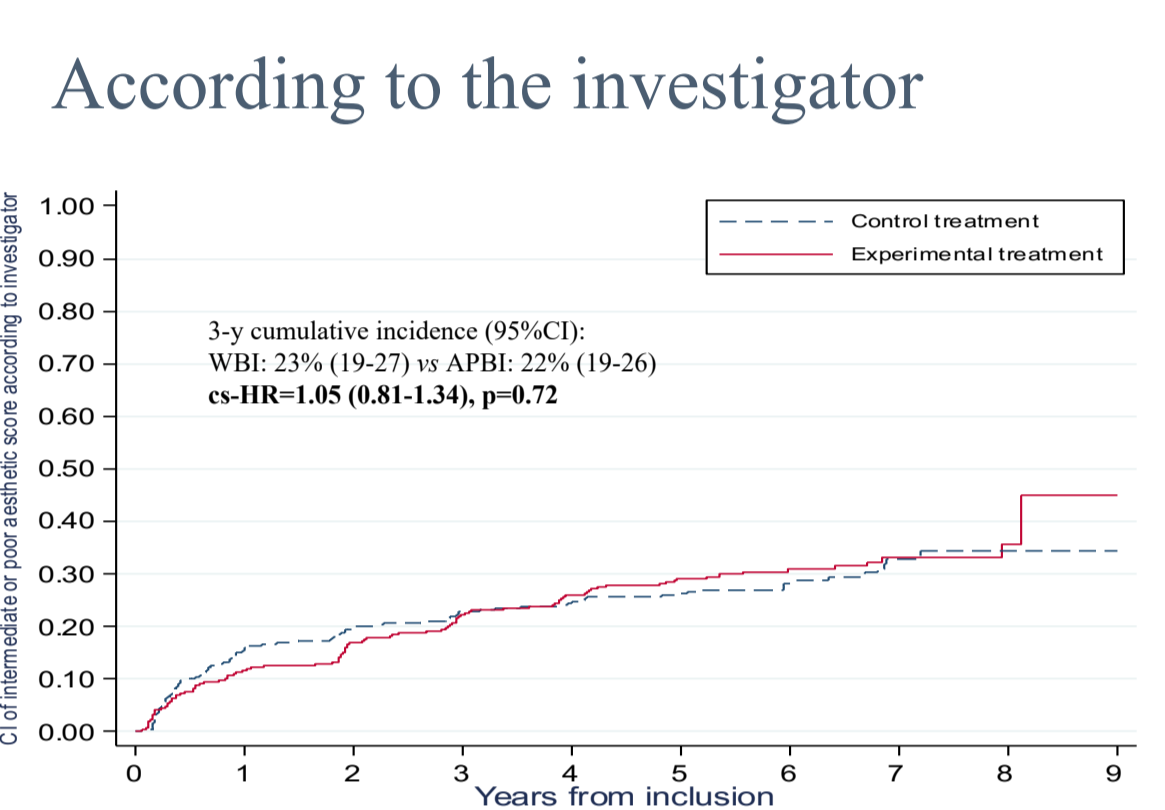
Median follow-up was 5.8y (range, 0.13-9.5). The number of deaths was 27, and the number of local relapses was 11. Among the 978 patients, 582 and 396 had finally WBI and APBI, respectively. Analyses in modified-ITT concerned 488 and 490 patients in the WBI and APBI arms, respectively.

Patients characteristics

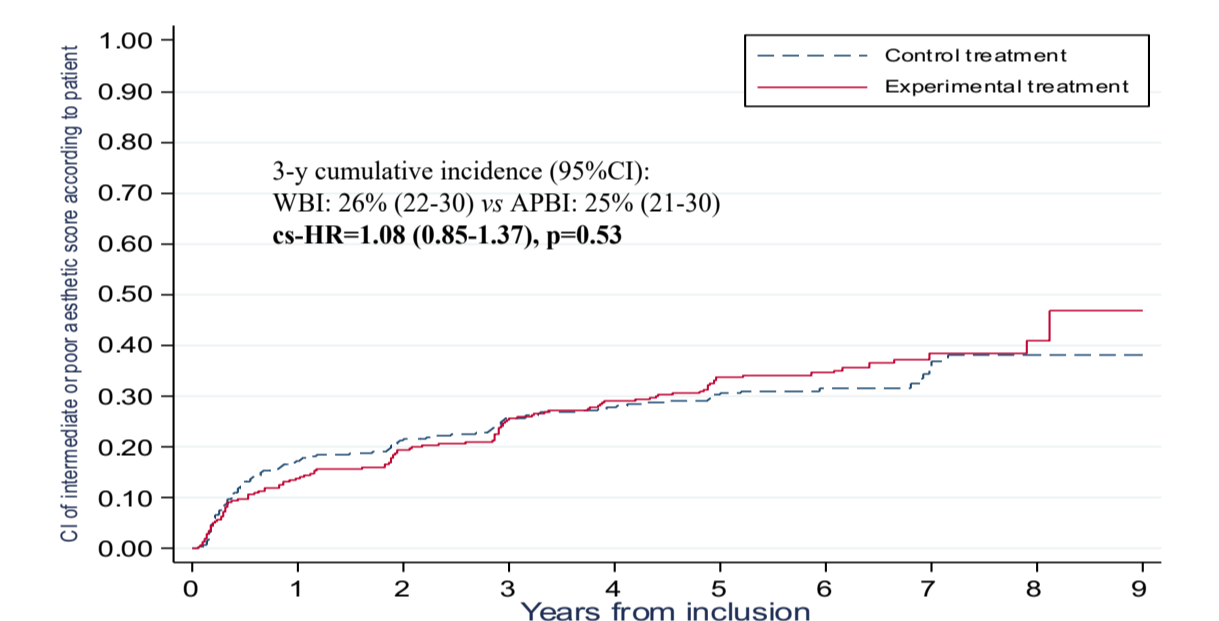
Characteristics	WBI N = 488	APBI N = 490	Total N = 978
Age (y) median (Range)	65 (49-86)	65 (50-89)	65 (49-89)
Classification pT (MD=1)			
pT1	483 (99%)	480 (98%)	963 (99%)
pT2	2 (<1%)	8 (2%)	10 (1%)
pT3	0 (0%)	1 (<1%)	1 (<1%)
Micro-invasive + in Situ	2 (<1%)	1 (<1%)	3 (<1%)
Classification pN			
pN0	479 (98%)	485 (99%)	964 (99%)
pN0(i+)/ pN1	9 (2%)	5 (1%)	14 (1%)
SBR Grade (MD=3)			
G1	230 (47%)	215 (44%)	445 (46%)
G2	241 (50%)	260 (53%)	501 (51%)
G3	12 (2%)	11 (2%)	23 (2%)
Type of surgery (MD=1)			
Lumpectomy	420 (86%)	417 (85%)	837 (86%)
Quadrantectomy	68 (14%)	72 (15%)	140 (14%)
Clip placement (MD=6)			
< 3	9 (2%)	12 (3%)	21 (2%)
4	282 (58%)	247 (50%)	529 (54%)
≥ 5	193 (40%)	229 (47%)	422 (44%)
Surgical margins			
Clear margins (≥ 2 mm)	485 (99%)	485 (99%)	970 (99%)
Close or positive margins	3 (1%)	5 (1%)	8 (1%)

Cosmetic results

Cumulative incidence of poor cosmetic score



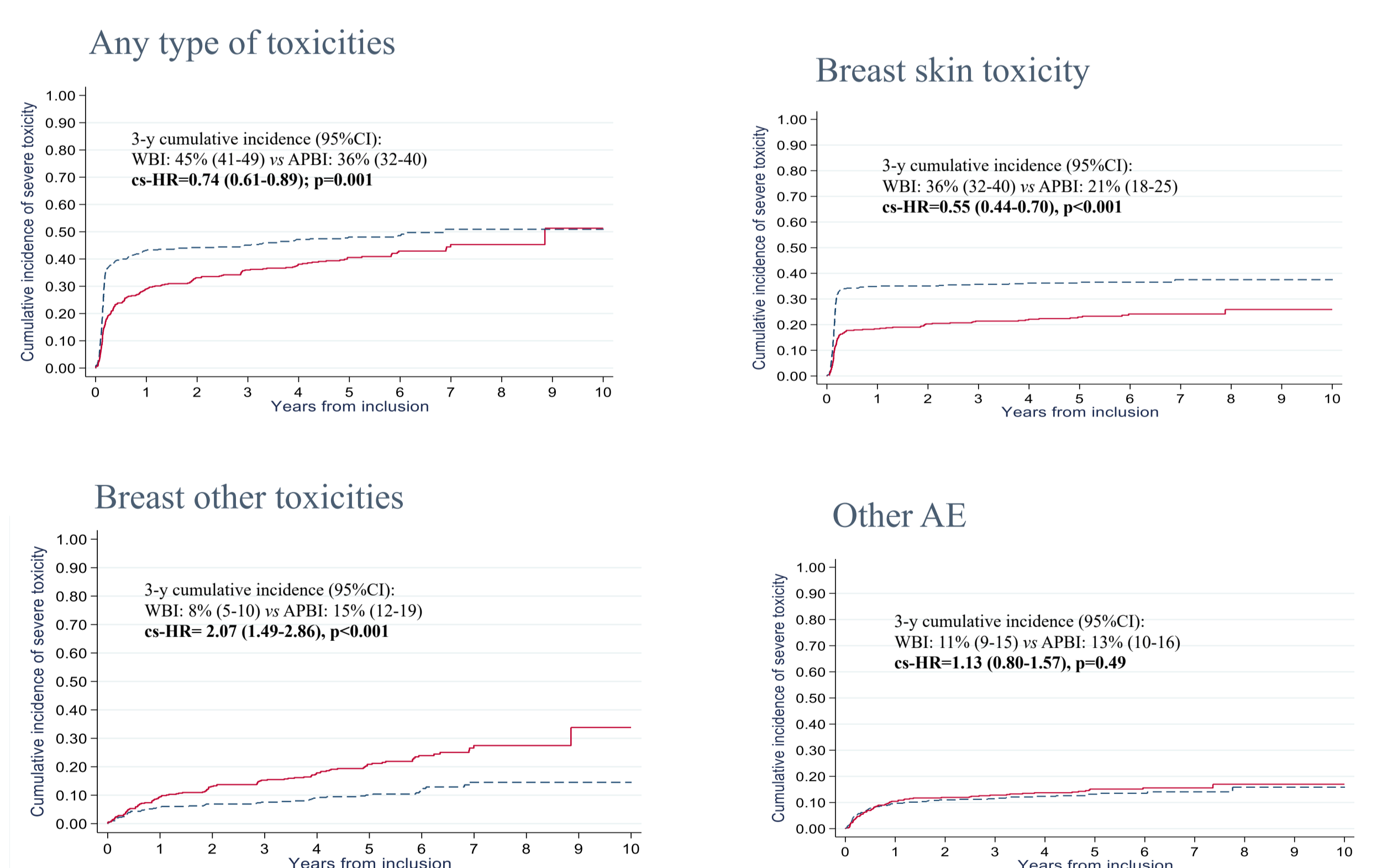
According to the patient



Toxicity results

Control: WBI (arms A+B)
Experimental: APBI (arm C)

Cumulative incidence of severe toxicity



Conclusion

Historically SHARE is the first APBI trial that included hypofractionated schedules in the standard arm. We report increased risk of severe toxicity and skin breast toxicity in standard arm as compared with APBI arm without any difference in terms of cosmetic results. Longer follow-up is needed.

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