

FAST FACTS

NRG-BR007: A PHASE III CLINICAL TRIAL EVALUATING DE-ESCALATION OF BREAST RADIATION FOR CONSERVATIVE TREATMENT OF STAGE I, HORMONE SENSITIVE, HER2-NEGATIVE, ONCOTYPE RECURRENCE SCORE ≤ 18 BREAST CANCER

Patient Pre-Entry and Randomization

For the NRG-BR007 study, patients with a **T1a tumor** (≤0.5 cm in size) who do <u>not</u> have anOncotype DX Recurrence Score must have a tissue sample sent to Genomic Health for a Recurrence Score to determine eligibility. For these patients, Genomic Health will cover thecost of the test.

Eligibility Criteria

- 1. The patient must be \geq 50 years and < 70 years of age.
- 2. The trial is open to female and male patients.
- 3. The patient must have an ECOG performance status of 0 or 1.
- 4. The patient must have undergone a lumpectomy and the margins of the resected specimen or re- excision must be histologically free of invasive tumor and DCIS with no ink on tumor as determined by the local pathologist. If pathologic examination demonstrates tumor at the line of resection, additional excisions may be performed to obtain clear margins. (Patients with marginspositive for LCIS are eligible without additional resection.)
- 5. The tumor must be unilateral invasive adenocarcinoma of the breast on histologic examination.
- 6. Patient must have undergone axillary staging (sentinel node biopsy and/or axillary nodedissection).
- 7. The following staging criteria must be met postoperatively according to AJCC 8th edition criteria:
 - a. By pathologic evaluation, primary tumor must be pT1 (2 cm).
 - b. By pathologic evaluation, ipsilateral nodes must be pN0. (Patients with pathologic staging ofpN0(i+) or pN0(mol+) are <u>NOT</u> eligible.)
- 8. Oncotype DX Recurrence Score of ≤ 18 on diagnostic core biopsy or resected specimen.**, ***

** For patients with a **T1a tumor** (≤ 0.5 cm in size), or patients at Canadian provinces or approved international sites where Oncotype DX Recurrence Score testing would not be covered, who do not already have an Oncotype DX Recurrence Score at pre-entry/Step 1, a specimen (unstained blocks or slides) must be sent to the Genomic Health centralized laboratory. Tumor size sample must be ≥ 0.2 cm for analysis.

*** The Oncotype RS can be run on the biopsy core or surgical specimen. The patient cannot have initiated endocrine therapy prior to tissue collection.

• An Oncotype RS is required for eligibility, however, for a patient whose tumor has already had a MammaPrint test completed as part of usual care when being considered for enrollment and is in the binary "Low" category will meet this eligibility criteria and an Oncotype RS does not need to be performed.

9. The tumor must have been determined to be ER and/or PgR positive assessed by current ASCO/CAP Guideline Recommendations for hormone receptor testing.

Patients with 2 1% ERor PgR staining by IHC are considered positive.

- 10. The tumor must have been determined to be HER2-negative by current ASCO/CAP guidelines.
- 11. Patients may be premenopausal or postmenopausal at the time of pre
 - entry/Step 1. For studypurposes, postmenopausal is defined as:
 - a. Age 56 or older with no spontaneous menses for at least 12 months prior to pre-entry/Step 1.; or adocumented hysterectomy; or
 - b. Age 55 or younger with no spontaneous menses for at least 12 months prior to pre-entry/Step 1 (e.g., spontaneous or secondary to hysterectomy) and with a documented estradiol level in thepostmenopausal range according to local institutional/laboratory standard; or
 - c. Documented bilateral oophorectomy.
- 12. The interval between the last surgery for breast cancer (including re-excision of margins) and pre-entry/Step 1 must be no more than 70 days.
- 13. The patient must have recovered from surgery with the incision completely healed and no signs of infection.
- 14. Bilateral mammogram or MRI within 6 months prior to pre-entry/Step 1.
- 15. HIV-infected patients on effective anti-retroviral therapy with undetectable viral load within6 months are eligible for this trial.
- 16. Patients must be intending to take endocrine therapy for a minimum 5 years duration (tamoxifenor aromatase inhibitor). The specific regimen of endocrine therapy is at the treating physician's discretion.

Ineligibility Criteria

- 1. Definitive clinical or radiologic evidence of metastatic disease.
- 2. pT1 mi and pT2--pT4 tumors including inflammatory breast cancer.
- 3. Pathologic staging of pN0(i+) or pN0(mol+), pN1, pN2, or pN3 disease.
- 4. Patient had a mastectomy.
- 5. Palpable or radiographically suspicious ipsilateral or contralateral axillary, supraclavicular, infraclavicular, or internal mammary nodes, unless there is histologic confirmation that thesenodes are negative for tumor.
- 6. Suspicious microcalcifications, densities, or palpable abnormalities (in the ipsilateral orcontralateral breast) unless biopsied and found to be benign.
- 7. Non-epithelial breast malignancies such as sarcoma or lymphoma.
- 8. Proven multicentric carcinoma (invasive cancer or DCIS) in more than one quadrant or separatedby 4 or more centimeters. (Patients with multifocal carcinoma are eligible.)
- 9. Paget's disease of the nipple.
- Any history, not including the index cancer, of ipsilateral invasive breast cancer or ipsilateral DCIS treated or not treated. (Patients with synchronous or previous ipsilateral LCIS are eligible.)
- 11. Synchronous or previous contralateral invasive breast cancer or DCIS. (Patients withsynchronous and/or previous contralateral LCIS are eligible.)
- 12. Surgical margins that cannot be microscopically assessed or are positive at pathologic evaluation. (If surgical margins are rendered free of disease by re-excision, the patient is eligible.)
- 13. Treatment plan that includes regional nodal irradiation.
- 14. Any treatment with radiation therapy, chemotherapy, or biotherapy administered for the currently diagnosed breast cancer prior to pre-entry/Step

1.

- 15. History of non-breast malignancies (except for in situ cancers treated only by local excision andbasal cell and squamous cell carcinomas of the skin) within 5 years prior to pre-entry/Step 1.
- 16. Current therapy with any endocrine therapy such as raloxifene (Evista[®]), tamoxifen, or other selective estrogen receptor modulators (SERMs), either for osteoporosis or breast cancer prevention. **/***

**Patients are eligible for BR007 if they receive a short course of preoperative endocrine therapy of < 6 weeks duration (prior to randomization/Step 2) for this diagnosis after the core biopsy (and can continue postoperatively) if:

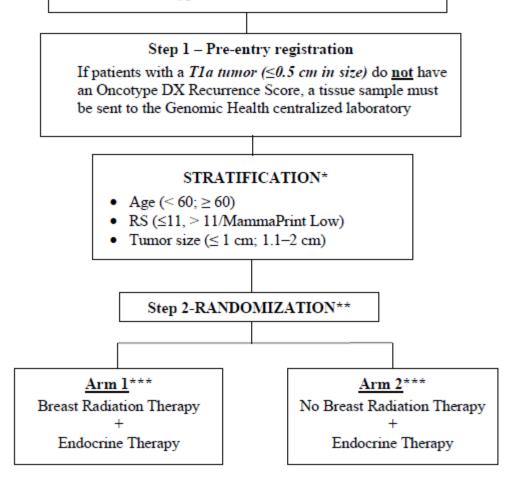
- the Oncotype DX Recurrence Score is assessed on the biopsy core and is < 18, AND
- the patient had not initiated endocrine therapy prior to core biopsy tissue collection.

***This does not apply to adjuvant endocrine therapy recommended for this diagnosis which may start any time after surgery including prior to registration (Preentry/Step 1).

- Patients intending to continue on oral, transdermal, or subdermal estrogen replacement (includingall estrogen only and estrogen-progesterone formulas) are not eligible. Patients that discontinue oral, transdermal, or subdermal estrogen replacement prior to registration are eligible.
- 18. Prior breast or thoracic RT for any condition.
- **19.** Active collagen vascular disease, specifically dermatomyositis with a CPK level above normal or with an active skin rash, systemic lupus erythematosis, or scleroderma
- 20. Pregnancy or lactation at the time of study entry or intention to become pregnant during treatment. (Note: Pregnancy testing according to institutional standards for women of childbearing potential must be performed within 2 weeks prior to study entry.)
- 21. Any other disease, metabolic dysfunction, physical examination finding, or clinical laboratory finding giving reasonable suspicion of a disease or condition that contraindicates the use of studytherapy or that may affect the interpretation of the results or render the patient at high risk from treatment complications.
- 22. Psychiatric or addictive disorders or other conditions that, in the opinion of the investigator, would preclude the patient from meeting the study requirements or interfere with interpretation of study results.
- 23. Use of any investigational product within 30 days prior to study entry.

NRG-BR007 SCHEMA

Patients with resected pT1N0M0, HER2-Negative, ER and/or PgR-Positive Breast Cancer and Oncotype-DX Recurrence Score ≤ 18



- * A patient whose tumor has already had a MammaPrint Low test result as part of usual care when being considered for enrollment will be grouped with the Oncotype RS >11 stratification group.
- ** Randomization is 1:1.
- *** See Section 5.0 for radiation therapy and endocrine therapy information.