

NCI 2007 PRE-OP THERAPY IN BREAST CANCER
1 INTRO 1 - WINER, GRALOW

DR. JO ANNE ZUJEWSKI: Good morning. We're officially going to get started. This is the "Preoperative Therapy in Invasive Breast Cancer". I'm Jo Anne Zujewski, and I wanted to introduce the co-chairs of the conference, Dr. Eric Winer, a medical oncologist at Dana-Farber in Boston, and Julie Gralow, a medical oncologist at the University of Washington in Seattle. They're going to have a few opening remarks.

DR. ERIC WINER: Good morning -- it looks a little thin out there; but what we're told is that people will be arriving over the course of the next half-hour or so, that between security and everything else, that it just takes some time; but, we figured we'd better get started.

The idea for this conference actually initially came from Jo Anne, and the idea was, in fact, to have a conference that focused on the state of the science. And those conferences are usually 50 people or so sitting around a big round table. And, in conversation, Julie and Jo Anne and I thought that it would be better to open this up to a broader group, which is exactly what we did. And we started the planning for this well over a year ago, which has involved only a couple of in-face meetings, but I would estimate somewhere in the range of 50 teleconferences and about five hundred thousand emails.

And there has been a significant amount of work that has gone into this. And I very much hope that you all get something out of it and that it turns out to be worthwhile.

What we've all seen is that over the past years there has been more and more preoperative therapy given in clinical practice, more in some places than in others. And as my colleague Jay Harris often says, that the rules by which we take care of patients when we use preoperative therapy are far less well worked out than in the setting of the standard approach.

So much of what we're trying to do today is to come to some agreement about what we know and what we don't know, and then, perhaps most importantly, what we need to

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know and how we're going to use the setting of preoperative therapy to answer important clinical and biologic questions about breast cancer in the years ahead. And I think I've basically paraphrased the purpose of the conference. And with that, let me turn it over to Julie, who will go over a few more details.

DR. JULIE GRALOW: Thanks, Eric, and good morning, everyone. I have the honor of going over the meeting logistics. Written conflict-of-interest disclosures for all of the speakers and moderators are inside your meeting folders.

There will be a question-and-answer session at the end of each session. There will not be individual question-and-answers after each talk. So, write down your questions. These will be predominantly oral question-and-answer sessions -- about six of them. Then, at the end of the day on Tuesday, we will have a panel discussion. You can look in your agenda and see who will be on that panel.

We would request that, throughout the day today and tomorrow morning, that, if questions come up for the panel in general that you would like a broad discussion of, then please submit your questions, in writing, for the panel discussion, throughout the meeting. That will predominantly be written questions to present to the panelists.

Coffee, tea, and water, as you've probably already seen, are located outside the conference room, in the back. Lunch is on your own -- the cafeteria is located upstairs; allow time to stand in line -- we've warned them that you will all be here. Restrooms are around the corner, out this way. Please turn your cell phones and beepers to silent mode.

Here's the meeting agenda -- we have seven sessions. The last is the panel discussion that I've already mentioned. We'll start this morning with an overview of preoperative therapy in breast cancer, and issues prior to preoperative therapy. Session 2 will include systemic preoperative therapy, so giving the therapy. And Session 3 will include

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evaluating response to breast cancer preoperative therapy. Session 4 will end the day today, and it will focus on locally advanced and inflammatory breast cancer.

Tomorrow morning, we'll talk about local-regional therapy after breast cancer preoperative therapy, and then spend a good amount of time talking on research issues -- how we can use preoperative therapy to help answer some biologic questions related to breast cancer; and then we'll conclude with the panel discussion.

So, with that, I'd like to introduce Dr. James Doroshow from the National Cancer Institute. And he's the director of the [Division of] Cancer Treatment and Diagnosis at the NCI, and he's going to welcome you and explain the conference overview.