Radiotherapy during lumpectomy for breast cancer is better for patients #RCT

- As effective as whole breast radiotherapy for breast cancer control
- Substantially fewer deaths from cardiovascular causes and other cancers
- Non-breast cancer mortality reduced from 9.9% to 5.4% at 12 years
- Surgery & radiotherapy completed at the same time
- Less pain
- Less travel
- Less time off work or play
- Access to breast conservation
- Improved cosmetic outcome
- Fewer complications
- Lower toxicity
- Lower cost

The TARGIT-A international randomised controlled trial

2298 breast cancer patients due to have a lumpectomy
2298 patients from 32 centres, 10 countries
The first patient randomised – 24 Mar 2000
Data lock for long-term outcomes – 3 Jul 2019
95% patients had at least 5-year follow up AND 90% patients had either 10-year follow up or had been seen within previous year

Local control
No difference
HR 1.13 (0.91 to 1.41) p=0.28

Breast preservation
No difference
HR 0.96 (0.78 to 1.19) p=0.74

Breast cancer deaths
No difference
HR 1.12 (0.78 to 1.60) p=0.54

Fewer Non-breast cancer deaths

TARGIT-IORT better
HR 0.59 (0.40 to 0.86) p=0.005

Improved overall survival if Grade 1 or Grade 2, n=1797

Overall mortality reduction
15.1% 10.7%
HR 0.72 (0.53 – 0.98) p=0.0361

Mortality unchanged even if grade 3, n=443

Excellent prognosis even after LR

Long term hazard if local recurrence after EBRT
HR 0.38 (0.17-0.88) p=0.0091

More info
https://targit.org.uk

Any questions?
Scan to contact us

conference.ncri.org.uk

New clinical & biological insights at long-term follow up of the TARGIT-A randomised trial of risk-adapted single dose targeted intraoperative radiotherapy during lumpectomy (TARGIT-IORT) for breast cancer