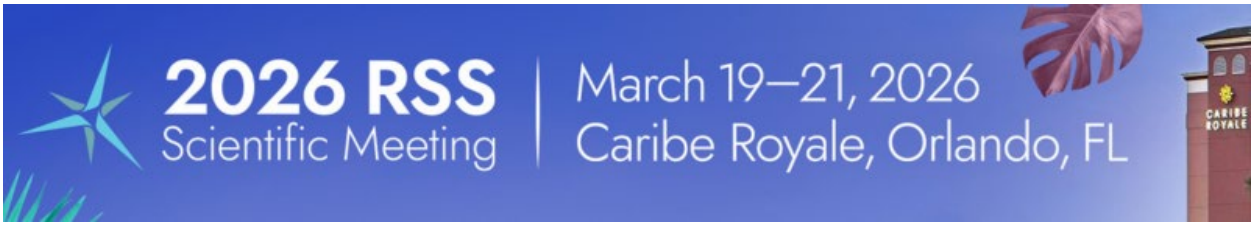

Single Institution Clinical Experience of Stereotactic Ablative Body Radiotherapy in Breast Cancer Patients

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Objectives: Assess the clinical outcomes of stereotactic ablative body radiotherapy (SABR) in breast cancer patients with oligometastasis and oligoprogression.

Methods: A retrospective review of treatment records of breast cancer patients treated for oligometastases (OM) and oligoprogression (OP) who underwent SABR between 2017 and 2024. These lesions were documented by imaging (PET-CT and/or MRI). Kaplan-Meier method was used to calculate progression-free survival (PFS), local control and and overall survival (OS).

Results: 34 lesions (28 patients) were analysed. Patients median age was 53 years (range 38-71). Locations of metastatic disease were: bone (19 lesions), liver (6 lesions), lymph node (5 lesions), lung (4 lesions). 27Gy in three fractions was most commonly prescribed, (range 27-50Gy in 3 to 8 fractions). The median follow-up was 22.5 months (range 8-78 months). The estimated local control at 1 and 2 years was 91% and 68%, respectively. The estimated median PFS was 13 months, the PFS at 1 and 2 years was 58% and 27%. The estimated OS at 1 and 2 years was 99% and 69,9%. 78% of patients were still alive at the last follow-up. Of the 71% patients who progressed, 40,7% had distant progression and 29,6% regional.

Conclusion(s): Stereotactic Ablative Body Radiotherapy (SABR) is a safe and noninvasive treatment for oligometastatic (OM) and oligoprogressive (OP) breast cancer, offers excellent local control in carefully selected patients. However, its role is still unclear, due to limited clinical data, and decisions to use it must be individualized by a multidisciplinary team.