

# 38 Year-Old with 2.2 cm, Grade 2 tumour

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Recurrence  
Score<sup>®</sup> Result



Age	<b>38</b>	PR Status (IHC)	<b>Positive</b>
Menopausal Status	<b>Pre-Menopausal</b>	HER2/NEU Status	<b>Negative</b>
Tumor Type	<b>Ductal</b>	Ki-67 Status	<b>Not Available</b>
Tumor Size (cm)	<b>2.0</b>	Histologic Grade	<b>2</b>
ER Status (IHC)	<b>Positive</b>	Lymph Node Status	<b>Negative</b>
General Health	<b>Former smoker - no meds</b>		
Treatment Given	<b>Tamoxifen</b>		

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Lymph Node Status



<p>Recurrence Score<sup>®</sup> (RS) Result</p> <hr/> <p style="text-align: center; font-size: 2em;">12</p>	<p>Distant Recurrence Risk at 9 Years</p> <hr/> <p>With AI or TAM Alone</p> <p style="text-align: center; font-size: 2em;">3%</p> <p style="text-align: center;">95% CI (3%, 4%)</p> <p>TAILORx</p>	<p>Group Average Absolute Chemotherapy (CT) Benefit*</p> <hr/> <p>RS 11-25 All Ages</p> <p style="text-align: center; font-size: 2em;">&lt;1%</p> <p style="text-align: center;">95% CI (-1%, 2%)</p> <p>TAILORx</p>
<p><small>Decision on individual treatment especially around the RS 25 cutoff may consider other clinical factors.</small></p>	<p><small>AI = Aromatase Inhibitor / TAM = Tamoxifen CI = Confidence Intervals</small></p>	<p><small>*For estimated CT benefit for individual RS results, see page 2.</small></p>

**Exploratory Subgroup Analysis** for TAILORx and NSABP B-20 indicate that Recurrence Score<sup>®</sup> and age are the strongest predictors of chemotherapy benefit<sup>1</sup>. The absolute reduction of distant recurrence from chemotherapy for patients >50 years and ≤50 years is shown here for RS groups: 11-15, 16-20, and 21-25 from TAILORx, and 0-10 and 26-100 from NSABP B-20<sup>2</sup>.

Age	RS 0-10	RS 11-15	RS 16-20	RS 21-25	RS 26-100
>50 years	No CT Benefit (<1%)				>15% CT Benefit
≤50 years	No CT Benefit (<1%)	~1.6% CT Benefit	~6.5% CT Benefit	>15% CT Benefit	

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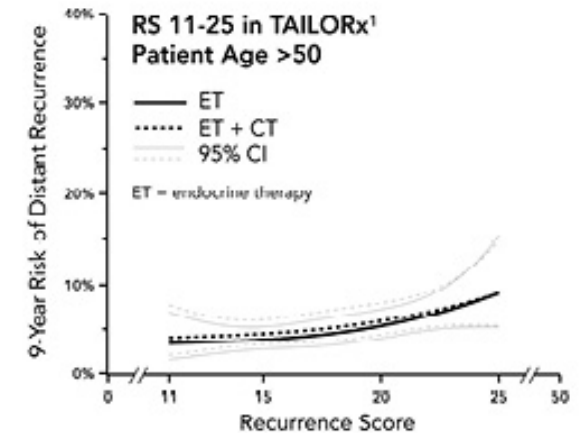
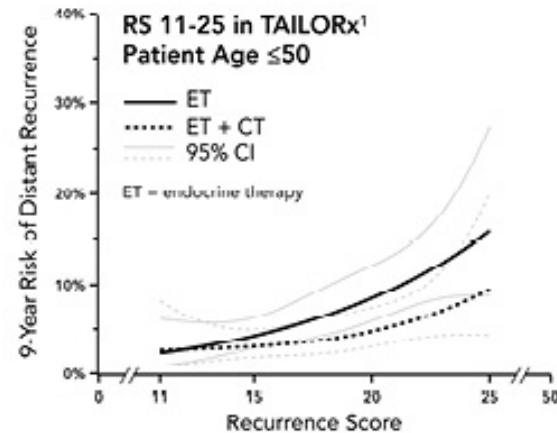
12

Lymph Node  
Status

Negative

## Estimated Chemotherapy Benefit for Individual Recurrence Score Results

Recurrence Score ranges shown reflect randomized patients in NSABP B-20 and TAILORx.



## References

1. Sparano et al. N Engl J Med. 2018.; ECOG and Genomic Health (data on file).
2. Paik et al. J Clin Oncol. 2006.; Sparano and Paik J Clin Oncol. 2008.