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Meeting Abstract

**Darbepoetin alfa as
primary prophylaxis of
anaemia in breast cancer
patients treated
preoperatively with
Docetaxel, Doxorubicin,
Cyclophosphamide**

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Gliederung

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Docetaxel, Adriamycin, Cyclophosphamide (TAC) is considered today as one treatment option for patients with node-positive primary breast cancer. However, treatment is associated with anaemia grade 1-4 (2-4) in up to 95% (36%) of patients. We prospectively investigated the use of a primary prophylaxis with Darbepoetin alfa once every 3 weeks in 35 patients receiving six to eight cycles of TAC as neoadjuvant treatment for breast cancer. Darbepoetin treatment started on day 1 of a TAC cycle if haemoglobin (Hb) was ≤ 14.0 g/dl. Dosage was adapted to $9 \mu\text{g}/\text{kg}$ if Hb was ≤ 13.0 g/dl on day 21 of the previous cycle, to $4.5 \mu\text{g}/\text{kg}$ if Hb was between 13.0 and 14.0 g/dl and was discontinued if Hb increased to ≥ 14 g/dl. The primary aim was to prevent Hb levels ≤ 12 g/dl before surgery. During 112 (50.2%) and 93 (41.7%) of 223 cycles, $4.5 \mu\text{g}/\text{kg}$ and $9 \mu\text{g}/\text{kg}$ Darbepoetin were given, respectively. Dosage was decreased from 9 to $4.5 \mu\text{g}/\text{kg}$ in 21 (60%) patients and 28 (12.4%) cycles. Treatment was discontinued due to Hb > 14.0 g/dl in 12 (34.3%) patients and 13

(5.4%) cycles. Hb level on day 21 of the last cycle was ≤ 12.0 g/dl in 4 (11.4%) patients. Eighteen (51.4%) patients during 36 (16.1%) cycles showed Hb levels ≤ 12 g/dl throughout treatment. No NCI-CTC grade 2 to 4 anaemia was observed. Symptoms of fatigue (FACT-AN) decreased slightly throughout treatment. Anaemia during TAC chemotherapy can be avoided by a single injection of Darbepoetin alfa every 3 weeks.