

AB009. SOH21AS214. Invasive lobular breast cancer—patterns of metastatic disease and survival

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Background: Metastatic breast cancer is the leading cause of cancer related death among women. Invasive lobular carcinoma (ILC) is the second most common histological subtype, accounting for 10–15% of cases. ILC exhibits a distinct pattern of metastatic behaviour compared to invasive ductal carcinoma (IDC). The aim of this study was to analyse a large database of ILC cases over a 30+ year period to identify the clinical behaviour, metastatic patterns and prognosis of the disease.

Methods: All patients diagnosed with ILC in Galway Hospitals Group between 1985–2017 were included. Survival was recorded using patient records. Comparison between metastatic ILC and metastatic IDC was carried out using two comparable databases.

Results: Seven hundred and thirty-four cases of ILC between 1985–2017. Mean age of patients was 61.5 ± 12.9 years. Patients with ILC tended to have grade 2 (64.6%), node-negative (51.8%), ER and PR positive (91.5% and 77.5% respectively) and HER2 negative (93.7%) tumours. Mean overall survival (OS) was 92.6 months (SD77.7) for ILC patients. Comparing distant metastatic ILC (n=60) to distant metastatic IDC (n=70) over the same period, metastatic ILC had a greater mean time to recurrence (76 *vs.* 37 months, $P < 0.021$) and more variable sites of metastasis.

Conclusions: This study has demonstrated the typical clinical portrait of patients presenting with ILC over a 30-year period and identified the rates of metastatic disease, sites of metastasis, and the OS. It also compares the clinical course of metastatic ILC with metastatic IDC demonstrating significant differences in time to recurrence and sites of metastasis.

Keywords: Breast cancer; invasive ductal carcinoma (IDC); invasive lobular cancer; metastatic disease; survival

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Footnote

Conflicts of Interest: AL serves as an unpaid editorial board member of *Mesentery and Peritoneum*. The other authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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