Preface XVIII

From the patient's perspective, a diagnosis of metastatic breast cancer can be both traumatic and life-altering. Many will turn to their clinical team, searching for treatment options to change the trajectory of their disease. For many years, the mainstay of treatments for patients with metastatic breast cancer has been sequential chemotherapy or endocrine therapy, typically until the cancer acquires resistance. The emergence of HER2-targeted therapies have drastically improved the outcomes for patients with HER2-positive disease, however still only a minority of patients remain alive and disease-free in the long term. Disease heterogeneity (both inter-patient and intra-patient) remains a major challenge to our current approach to metastatic breast cancer, acting as a potential reservoir for resistance. One of the most commonly observed principles of the treatment of metastatic breast cancer is the law of diminishing returns, whereby increasing lines of therapy tend to have lower chances of benefit with advancing disease. Unfortunately, for the vast majority of patients, the emergence of treatment resistance is inevitable. Breast cancer is the leading cause of cancer deaths in women. This is almost entirely due to metastatic disease.

Modern medicine and novel research approaches are on the cusp of shifting these historical paradigms. From a biological perspective, this will include the incorporation of clinically relevant prognostic molecular biomarkers, dissecting biological and clinical heterogeneity, identifying new drug targets, and understanding the metastatic niche and patterns of metastatic spread. From a clinical perspective, this will include the incorporation of multidisciplinary expert management, delivery of precision medicine approaches for both targeted therapies and immunotherapies, and providing the best model of supportive care.

This book is a comprehensive collection of editorials, original research, and expert opinion in the field of metastatic breast cancer. It encompasses a wide range of topics that will be of substantial interest to anyone involved in the field. The outstanding text within, not only characterises the current modern approaches to treatment of metastatic breast cancer, but also sets out a vision for the future management of metastatic breast cancer. To achieve this, we must seek to unravel the complexities of metastatic breast cancer, and be bold enough to address the critical research questions. Whether you are a student, researcher, clinician, or surgeon, there is much to be gained from this reference text. Although the diagnosis of metastatic breast cancer remains a devastating one, there is more reason than ever to be optimistic for the future as we gradually shift towards new frontiers in metastatic breast cancer.



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