

gBRCA testing now

In patients with recurrent breast cancer (BC) or metastatic breast cancer (mBC)

POWING NOW

Testing for germline *BRCA* (*gBRCA*) mutations at workup is recommended by NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Breast Cancer in <u>all</u> patients with recurrent BC or mBC — to help identify potential treatment options and inform treatment planning.¹

gBRCA TESTING IS RECOMMENDED IN EVERY PATIENT WITH RECURRENT BC OR mBC TO HELP INFORM TREATMENT PLANNING¹



NCCN Guidelines for Breast Cancer say¹:

All patients with recurrent BC or mBC should be assessed for gBRCA1/2 mutations to identify candidates for targeted therapy.



gBRCA testing remains low despite the NCCN Guidelines recommendation

Real-world analysis of 407 US adult patients with HER2- ABC showed gBRCA1/2 testing was performed in only^{2*}:

43% of HR+/HER2- patients

61% of TNBC patients

 Lower gBRCA testing rates were observed in patients with HR+/HER2- ABC vs advanced TNBC, patients without a family history of BRCA-related cancers, and older patients²



Learn more about NCCN Guidelines for Breast Cancer recommendations for *BRCA* testing at gBRCAtesting.com

ABC=advanced breast cancer; HER2-=human epidermal growth factor receptor 2 negative; HR+=hormone receptor-positive; TNBC=triple-negative breast cancer.

^{*}According to a real-world analysis of gBRCA1/2 testing among 407 HER2- ABC patients in the US receiving treatment between 2019 and 2020.

gBRCA MUTATIONS CAN OCCUR IN A VARIETY OF PATIENTS WITH mBC

Real-world analyses confirm gBRCA mutations occur in more patient types than you might expect

Retrospective analysis of 225 US patients with gBRCA-mutated HER2- mBC showed^{3*}:

72% had HR+/HER2-disease

39% were aged ≥55 years

were African-American or of Asian or Hispanic descent

Retrospective analysis of 177 US patients with gBRCA-mutated HER2- ABC showed^{4‡}:

28%

had no known family history of BRCA-related cancers



A variety of patients may have gBRCA mutations, so testing all patients with recurrent BC or mBC can help inform treatment planning^{1,3,4}



[†] Of the total population of 225 patients, 54 had "other/unknown" ethnicity.

[‡] According to a retrospective real-world analysis of patient demographics, clinical characteristics, and treatment patterns among 177 patients with gBRCA1/2-mutated HER2- ABC in the US initiating treatment between January 2013 and April 2018.



HELP YOUR PATIENTS MOVE FORWARD WITH gBRCA TESTING

Discuss gBRCA testing at workup to prepare patients with recurrent BC or mBC

- You have a key role in patient counseling, which can be reinforced by your treatment team⁵
 - Pre-testing: address guidelines on testing all patients and discuss who may be likely to harbor gBRCA mutations
 - Post-testing: review treatment options based on test results
- Connect your patients to **organizations** that offer access to educational resources and genetic counseling so they and their families can be prepared for any individual or family implications of results. 5 3 organizations are noted below but others are available to support your patients

In collaboration with national nonprofit organizations that can help your patients



Focused on improving the lives of individuals and families facing hereditary cancers. FORCE offers:

- Education and resources: information on genetic testing, toll-free helpline, live and on-demand webinars, peer navigators, and message boards
- Support meeting and event calendar can help patients tap into virtual support and network to get resources in their area



Focused on providing education and resources to help genetic counselors provide quality genetic services to patients and their families. Also helps connect patients to genetic counselors. NSGC offers:

- Education and resources: fact sheets, podcasts, and other information about genetic counselors and the genetic counseling process
- Find a genetic counselor helps patients and providers connect with a genetic counselor for in-person or telehealth visits



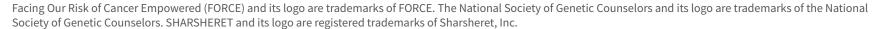
Focused on improving the lives of Jewish women and families living with or at increased risk of breast or ovarian cancer. Offers personalized support and education to all. Sharsheret also offers:

- Education and resources: conversations with a genetic counselor, education on genetic testing, mental health counseling, quality of life resources, financial subsidies, webinars, parenting resources, and caregiver resources
- **Peer Supporters** share their experiences with patients on the phone or by email



at gBRCAtesting.com







Learn more about gBRCA testing now at gBRCAtesting.com



References: 1. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Breast Cancer. V.4.2022. June 21, 2022. © National Comprehensive Cancer Network, Inc. 2022. All rights reserved. Accessed June 29, 2022. To view the most recent and complete version of the guideline, go online to NCCN.org. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way. 2. Mahtani R, Niyazov A, Lewis K, et al. Real-world study of BRCA1/2 mutation (BRCA1/2mut) testing among adult patients (pts) with HER2- advanced breast cancer (ABC) in the US. J Natl Compr Canc Netw. 2021;19(3.5). https://doi.org/10.6004/jnccn.2020.7760. Referenced with permission from the National Comprehensive Cancer Network, Inc. © National Comprehensive Cancer Network, Inc. 2021. All rights reserved. 3. Quek RGW, Mardekian J. Clinical outcomes, treatment patterns, and health resource utilization among metastatic breast cancer patients with germline BRCA1/2 mutation: a real-world retrospective study. Adv Ther. 2019;36(3):708-720. 4. Parikh RC, Niyazov A, Esterberg E, et al. Patient demographics, clinical characteristics, and treatment patterns among patients with germline breast cancer susceptibility gene 1/2 mutated HER2- advanced breast cancer: results from a US real-world study. Poster presented at: Miami Breast Cancer Conference; March 5-8, 2020; Miami, FL. Poster 46. 5. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Genetic/ Familial High-Risk Assessment: Breast, Ovarian, and Pancreatic. V.1.2023. March 9, 2022. © National Comprehensive Cancer Network, Inc. 2022. All rights reserved. Accessed March 10, 2022. To view the most recent and complete version of the guideline, go online to NCCN.org. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

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