

70-gene signature not cost-effective in breast cancer

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For patients with node-negative breast cancer, the 70-gene signature is unlikely to be cost-effective for guiding adjuvant chemotherapy decision making, according to a study published online Oct. 6 in the *Journal of Clinical Oncology*.

(HealthDay)—For patients with node-negative breast cancer (NNBC), the 70-gene signature is unlikely to be cost-effective for guiding adjuvant chemotherapy decision making, according to a study published online Oct. 6 in the *Journal of Clinical Oncology*.

Julia Bonastre, Ph.D., from Gustave Roussy in Villejuif, France, and colleagues conducted an economic analysis of the [70-gene signature](#) used to guide adjuvant chemotherapy decision making in patients with NNBC. The 70-gene signature was compared with Adjuvant! Online and chemotherapy in all patients as a basis for the decision to administer adjuvant chemotherapy. Costs, life-years (LYs), and quality-adjusted life-years (QALYs) were compared over a 10-year period.

The researchers observed similar mean differences in LYs and QALYs for the three strategies. Higher cost was seen in association with the 70-gene strategy, with a mean difference of €2,037 and €657 compared with Adjuvant! Online and systematic chemotherapy, respectively. The probability of being the most cost-effective strategy was 92 percent for Adjuvant! Online, 6

percent for systematic chemotherapy, and 2 percent for the 70-gene signature, for a €50,000 per QALY willingness-to-pay threshold.

"Optimizing [adjuvant chemotherapy](#) decision making based on the 70-gene signature is unlikely to be cost-effective in patients with NNBC," the authors write.

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