

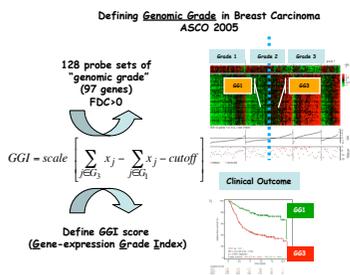
Background

Several microarray studies have shown that breast tumours can be grouped in at least 4 to 5 individual subtypes namely basal-like, *erbB2*-like and luminal-like A, B, C or 1, 2, 3.

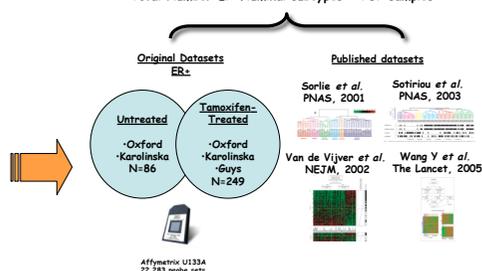
However, although the basal and the *erbB2* subtypes are repeatedly recognized as distinct entities, the definition of luminal subtypes has been far from consistent between published series.

Refinement of their molecular definition is therefore needed.

Material and Methods



Total Number ER+/luminal subtypes = 787 samples



Systemically Untreated N = 417

	Univariate Analysis		Multivariate Analysis	
	Hazard ratio (95%CI)	p [†]	Hazard ratio (95%CI)	p [†]
Age (years) <50 vs ≥50	1.055 (0.550-2.044)	0.869	0.936 (0.416-1.975)	0.8540
Size >20mm vs ≤20mm	2.604 (1.618-4.485)	0.0001	2.153 (1.220-3.755)	0.0068
Histological grade 1 vs 2 vs 3	2.102 (1.461-3.024)	0.0006	1.446 (0.963-2.171)	0.0754
Estrogen Receptor Rich vs Poor	0.937 (0.671-1.307)	0.697	1.212 (0.867-2.202)	0.5275
Progesterone Receptor Rich vs Poor	0.536 (0.381-0.754)	0.00034	0.755 (0.430-1.328)	0.3300
Genomic Grade High vs Low	2.610 (1.633-3.717)	0.000001	2.302 (1.241-4.271)	0.0081

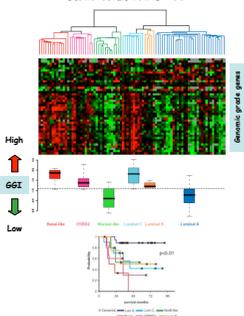
[†] Only patients with complete information on all variables were included in the multivariate analysis (N=336)
[‡] Based on Cox regression, stratified according to the datasets

TAMOXIFEN-TREATED N = 249

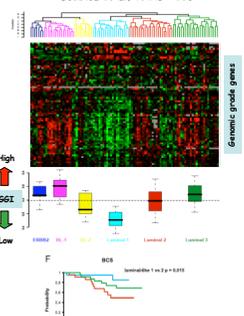
	Univariate Analysis		Multivariate Analysis	
	Hazard ratio (95%CI)	p [†]	Hazard ratio (95%CI)	p [†]
Age (years) <50 vs ≥50	0.928 (0.328-2.612)	0.8640	0.807 (0.223-2.916)	0.7440
Size >20mm vs ≤20mm	2.002 (1.157-3.463)	0.0130	1.712 (0.897-3.268)	0.1000
Histological grade 1 vs 2 vs 3	1.728 (1.128-2.647)	0.0120	1.071 (0.624-1.839)	0.8040
Nodal status Positive vs Negative	1.444 (0.836-2.493)	0.1670	1.053 (0.554-2.001)	0.8760
Estrogen Receptor Rich vs Poor	0.830 (0.512-1.370)	0.4680	0.982 (0.547-1.764)	0.9530
Progesterone Receptor Rich vs Poor	0.485 (0.291-0.806)	0.0050	0.751 (0.405-1.381)	0.3570
Genomic Grade High vs Low	3.119 (1.861-5.228)	<0.000001	2.147 (1.042-4.422)	0.0380

[†] Only patients with complete information on all variables were included in the multivariate analysis
[‡] Based on Cox regression, stratified according to the datasets

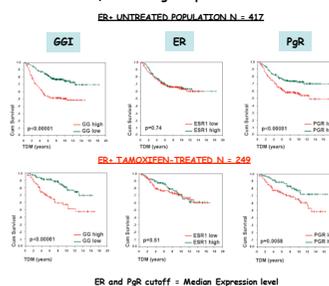
Applying **Genomic Grade** to Molecular Subtypes Sorlie *et al.* PNAS 2001



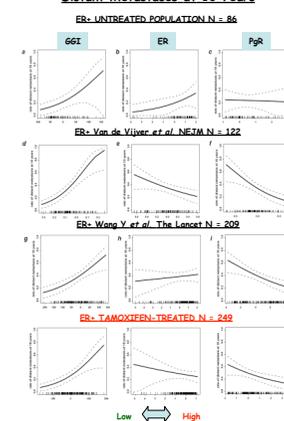
Applying **Genomic Grade** to Molecular Subtypes Sotiriou *et al.* PNAS 2003



Time to Distant Metastases GG, ER and PgR expression levels



Expected rate of Developing Distant Metastases at 10 Years



Conclusions

The use of **Genomic Grade** can distinguish two luminal subtypes in a highly reproducible manner across multiple datasets and microarray platforms.

Genomic Grade-defined subtypes show statistically distinct clinical outcome in both **untreated** and **tamoxifen-treated** populations.

These subtypes may provide important **stratification** for future breast cancer trials investigating the effect of treatment on ER+ breast cancers and hence potential to improve breast cancer management.

Further **biological investigations** into these phenotypes may result in identifying important therapeutic targets.