UNDERSTANDING DIFFERENT BREAST CANCER TYPES

One of the ways breast cancers are classified is by proteins, called receptors. There are thousands of different types of receptors on cells in the body. Some receptors are found on the cancer cell surface. Knowing which receptors are present helps your doctor choose a treatment that your type of cancer is most likely to respond.

HR+ breast cancer

Cancers are called hormone receptor-positive (HR+) if they have estrogen or progesterone receptors. When the estrogen or progesterone attach to these receptors, they fuel the cancer growth. Breast cancers that have estrogen receptors are called estrogen receptor-positive (ER+). Breast cancers that have progesterone receptors are called progesterone receptor-positive (PR+).

Treatment for HR+ breast cancers may include medicines that block the effect of estrogen or progesterone.

HER2+ breast cancer

Some breast cancers are fueled by a different receptor called HER2. Both normal cells and cancer cells have HER2 receptors. In HER2+ breast cancer, cancer cells have more HER2 receptors than normal cells.

Treatments for HER2+ breast cancer target and block the HER2 receptor.

Triple-negative breast cancer

Some breast cancers do not have estrogen or progesterone receptors (ER- or PR-). They also do not have too much HER2 (HER2-). This is called **triple-negative breast cancer (TNBC).**

Hormone therapy is typically not helpful in TNBC because the cancer cells do not have hormone receptors. Drugs that target HER2 are not helpful because the cancer cells have an insufficient number of HER2 receptors.

More about TNBC

- When comparing age groups, the majority of TNBC cases are diagnosed in women 51-60 years old
- However, when women under 40 are diagnosed with breast cancer, it is more likely to be TNBC than if they are diagnosed over 40
- TNBC more commonly affects African American and Hispanic women
- In addition, breast cancers associated with a BRCA mutation (either BRCA-1 or BRCA-2) are often, but not always, triple negative

BRCA=BReast CAncer susceptibility gene;HER2=human epithelial growth factor receptor 2.

Next: How It Works

WHAT IS TRODELVY?

TRODELVY™ (sacituzumab govitecan-hziy) is a prescription medicine used to treat adults with a certain type of breast cancer known as triple-negative (HR and HER2 negative) that has spread to other parts of the body (metastatic) and who received at least two therapies for metastatic disease.

TRODELVY is approved based on medical studies that measured how many patients responded and how long they responded. Continued approval may depend on benefit demonstrated in additional medical studies.

It is not known if TRODELVY is safe and effective in people with moderate or severe liver problems or in children.

IMPORTANT SAFETY INFORMATION

TRODELVY can cause serious side effects, including:

- **Low white blood cell count (neutropenia).** Low white blood cell counts are common with TRODELVY and can sometimes be severe and lead to infections that can be life-threatening. Your healthcare provider should check your blood cell counts during treatment with TRODELVY. If your white blood cell count is too low, your healthcare provider may need to lower your dose of TRODELVY, give you a medicine to help prevent low blood cell count with future doses of TRODELVY, or in some cases may stop TRODELVY. Your healthcare provider may need to give you antibiotic medicines if you develop fever while your white blood cell count is low. **Call your healthcare provider right away if you develop any of the following signs of infection during treatment with TRODELVY:** fever, chills, cough, shortness of breath, or burning or pain when you urinate.
- **Severe diarrhea.** Diarrhea is common with TRODELVY and can also be severe. Your healthcare provider should monitor you for diarrhea and give you medicine as needed to help control your diarrhea. If you lose too much body fluids (dehydration), your healthcare provider may need to give you fluids and electrolytes to replace body salts. If diarrhea happens later in your treatment, your healthcare provider may check you to see if the diarrhea may be caused by an infection. Your healthcare provider may decrease your dose or stop TRODELVY if your diarrhea is severe and cannot be controlled with anti-diarrheal medicines.
  - **Call your healthcare provider right away** the first time that you get diarrhea during treatment with TRODELVY; if you have black or bloody stools; if you have symptoms of losing too much body fluid (dehydration) and body salts, such as lightheadedness, dizziness, or faintness; if you are unable to take fluids by mouth due to nausea or vomiting; or if you are not able to get your diarrhea under control within 24 hours.

Do not receive TRODELVY if you have had a severe allergic reaction to TRODELVY. Ask your healthcare provider if you are not sure. TRODELVY can cause severe and life-threatening allergic reactions during infusion (infusion-related reactions). Tell your healthcare provider or nurse right away if you get any of the following symptoms of an allergic reaction during an infusion of TRODELVY or within 24 hours after you receive a dose of TRODELVY: swelling of your face, lips, tongue, or throat; hives; skin rash or flushing of your skin; difficulty breathing or wheezing; lightheadedness, dizziness, feeling faint, or pass out; chills or shaking chills (rigors); or fever.

Nausea and vomiting. Nausea and vomiting are common with TRODELVY and can sometimes be severe. Before each dose of TRODELVY, you will receive medicines to help prevent nausea and vomiting. You should be given medicines to take home with you, along with instructions about how to take them to help prevent and treat any nausea and vomiting after you receive TRODELVY. Call your healthcare provider right away if you have nausea or vomiting that is not controlled with the medicines prescribed for you. Your healthcare provider may decide to decrease your dose or stop TRODELVY if your nausea and vomiting is severe and cannot be controlled with anti-nausea medicines.

Before receiving TRODELVY, tell your healthcare provider about all of your medical conditions, including if you:

- have been told that you carry a gene for uridine diphosphate-glucuronosyl transferase A1 (UGT1A1)*28. People who carry this gene have an increased risk of getting side effects with TRODELVY, especially low white blood cell counts.
- have liver problems.
- are pregnant or plan to become pregnant. TRODELVY can harm your unborn baby. Your healthcare provider should check to see if you are pregnant before you start receiving TRODELVY. TRODELVY may cause fertility problems in females, which could affect your ability to have a baby. Talk to your healthcare provider if fertility is a concern for you.
  - Females who can become pregnant should use effective birth control during treatment and for 6 months after your last dose of TRODELVY. Talk to your healthcare provider about birth control choices that may be right for you during this time.
  - Males with a female partner who can become pregnant should use effective birth control during treatment and for 3 months after your last dose of TRODELVY.
  - Tell your healthcare provider right away if you or your partner become pregnant during treatment with TRODELVY.
- are breastfeeding or plan to breastfeed. It is not known if TRODELVY passes into your breastmilk and can harm your baby. Do not breastfeed during treatment and for 1 month after your last dose of TRODELVY.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Certain medicines may affect the way TRODELVY works.

The most common side effects of TRODELVY include nausea, low white blood cells (neutropenia), diarrhea, tiredness, decreased red blood cell count, vomiting, hair loss, constipation, rash, decreased appetite, stomach-area (abdomen) pain and respiratory infections.

These are not all of the possible side effects of TRODELVY. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Please see full Prescribing Information and Patient Information, including boxed Warning.