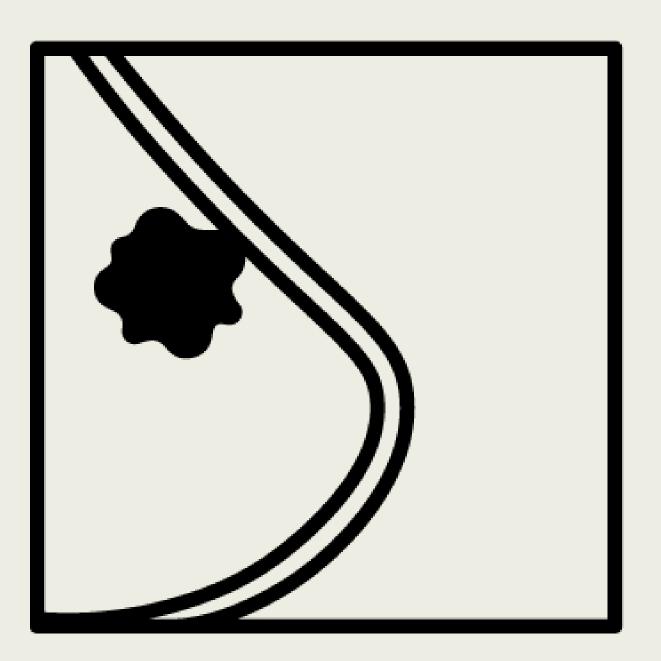
# JAMA Oncology

# RCT: Ribociclib Plus Endocrine Therapy in Hormone Receptor-Positive/ERBB2-Negative Early Breast Cancer

#### **POPULATION**

20 Males, 5081 Females

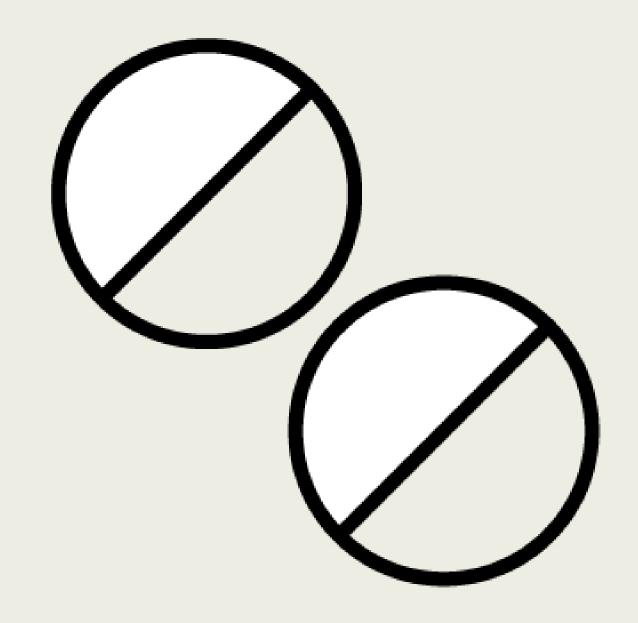


Adults with high-risk stage II or III hormone receptor-positive/*ERBB2*-negative early breast cancer

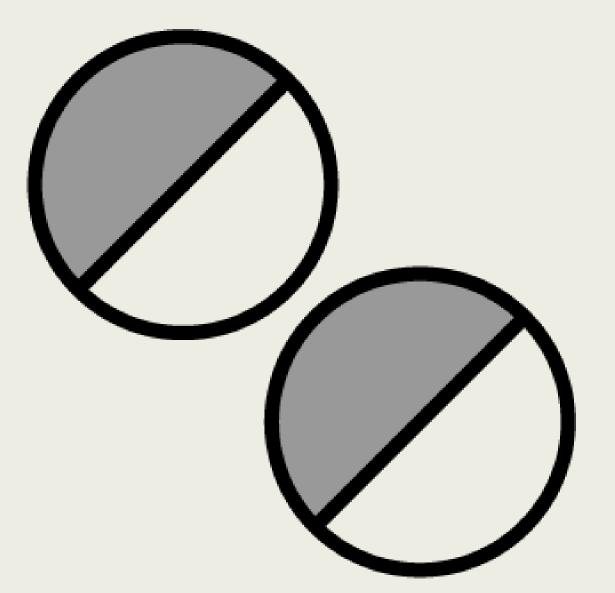
Median age: 52 (range, 24-90) y

### INTERVENTION

**5101** Patients randomized



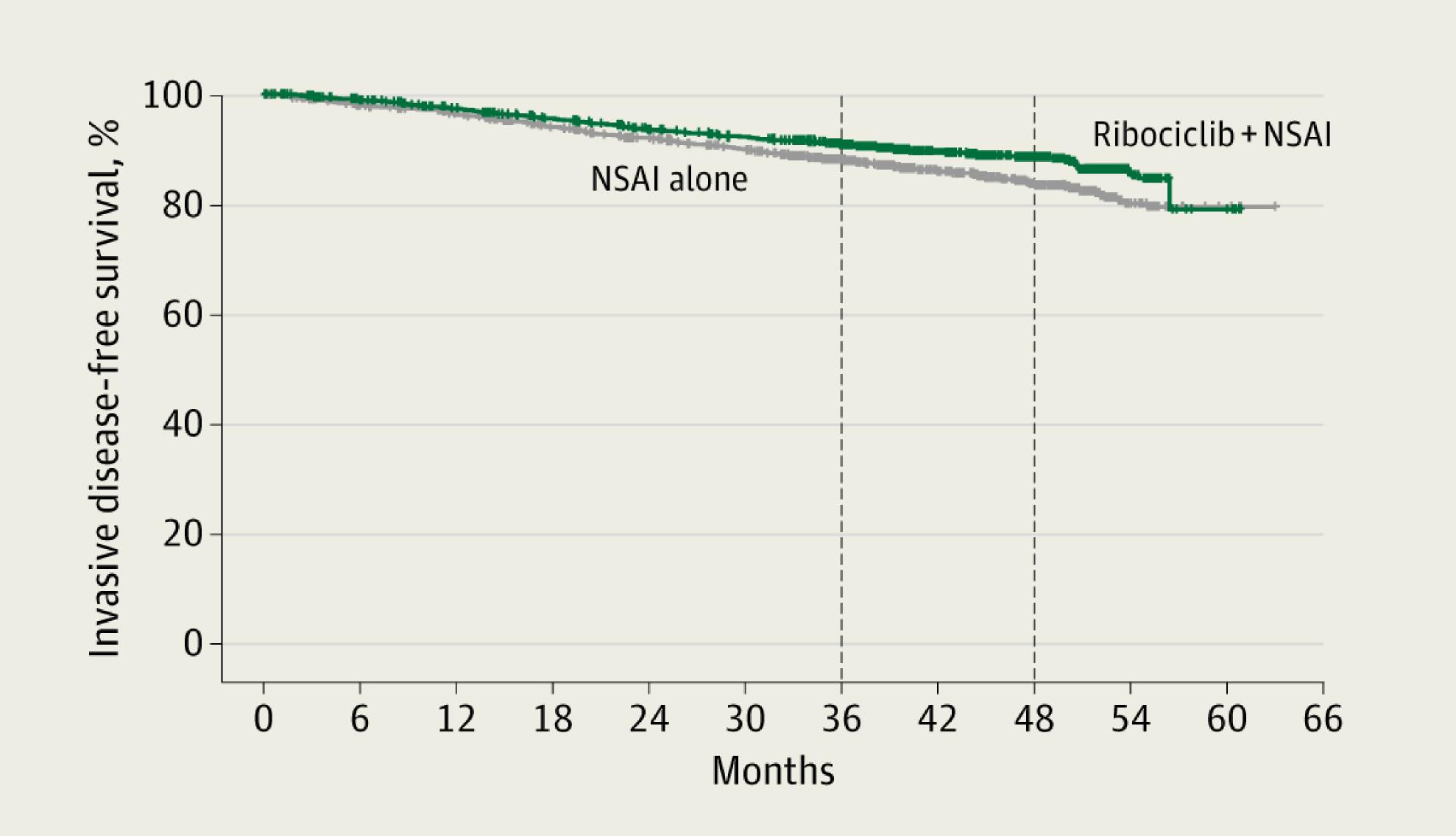
2549 Ribociclib plus nonsteroidal aromatase inhibitor (NSAI) Experimental arm



**2552 NSAI alone**Control arm

#### **FINDINGS**

With a median follow-up beyond the 3-y treatment duration and all patients completing or discontinuing ribociclib, there was consistent iDFS benefit with ribociclib plus NSAI vs NSAI alone



## SETTINGS / LOCATIONS



384 Sites in 20 countries

# PRIMARY OUTCOME

The primary end point was invasive disease-free survival (iDFS), which was defined according to Standardized Definitions for Efficacy Endpoints criteria, version 1.0, as assessed by the investigator

#### **iDFS**

Ribociclib + NSAI: 263 events (10.3%)

**NSAI alone:** 340 events (13.3%)

Hazard ratio: 0.72; 95% CI, 0.61-0.84