New Options for Metastatic Breast Cancer

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Patients with advanced breast cancer are living longer and receiving multiple lines of chemotherapy; however, they eventually develop resistance to the agents. Two more agents have been approved for the treatment of breast cancer and will provide additional treatment options for such patients. Ixabepilone represents a new class of cytotoxic chemotherapy called the epothilones. Ixabepilone was approved for use as a single agent for the treatment of metastatic breast cancer resistant to taxanes, anthracyclines, and capecitabine, as well as in combination with capecitabine for disease refractory to taxanes and anthracyclines. Bevacizumab, a monoclonal antibody targeting vascular endothelial growth factor, was approved for first-line treatment of HER2-negative metastatic breast cancer in combination with paclitaxel. Understanding the efficacy, toxicity, and administration of the agents is crucial for oncology nurses to optimally educate and treat patients with advanced breast cancer.

Ixabepilone

Ixabepilone represents a novel class of cytotoxic chemotherapy, the epothilones. Epothilones exert their cytotoxic effect by binding to and stabilizing microtubules (Goodin, Kane, & Rubin, 2004), which are cellular components that have several functions crucial to cell division and growth. In a manner similar to taxanes, when bound to microtubules, epothilones disrupt their function (Goodin et al.). Evidence exists that epothilones have activity in taxane-resistant cancer cells (Goodin et al.). Other epothilones are in development, but ixabepilone is the first agent in the class to receive FDA approval. It is approved for use as a single agent for the treatment of MBC resistant to taxanes, anthracyclines, and capecitabine, as well as in combination with capecitabine for disease refractory to taxanes and anthracyclines.