Dear Editor

Trastuzumab (Herceptin; Genentech, South San Francisco, CA, USA) is a humanized monoclonal antibody which recognizes the extracellular domain of HER2. Trastuzumab has been shown to benefit patients with HER2-positive metastatic breast cancer, alone or in combination with chemotherapy. We now have the results of five large appropriately powered studies assessing the role of trastuzumab in addition to adjuvant chemotherapy for patients with HER2 positive tumours early breast cancer. Thus our group investigated whether the administration of trastuzumab was effective as adjuvant treatment for HER2-positive breast cancer if used after completion of the primary treatment for reduced mortality, recurrence, metastases and second tumor other than breast cancer rate. Also, the other objective the current review was to evaluate the incidence of cardiac toxicity and brain metastases to give a more balanced view of the total evidence and to increase statistical precision. Moreover, our review showed that a number of unresolved issues still remain. Should adjuvant trastuzumab and chemotherapy be administered concurrently or sequentially? What is the optimal chemotherapy regimen in this setting? In this way this is a first meta-analysis for the adjuvant trastuzumab in the early breast cancer.

We would like appreciate if you could publish this article.

Regards

Gustavo Viani