Dear Colleagues,

**Prognostic and Predictive factors influencing breast cancer:** It is now well established that women with early stage disease may have micro metastases, thus putting them at risk of developing overt metastases. This has been the main justification for using adjuvant systemic therapy in early stage breast cancer patients. However, many patients receive this therapy with little benefit and substantial toxicity, while others who do not receive adjuvant therapy still do well and show no evidence of recurrence or metastases. This highlights the need to optimize the use of adjuvant therapy based on individual prognostic and predictive factors. Prognostic factors provide information on clinical outcome at the time of diagnosis, independent of any therapy.

New efforts are being made in the area of breast cancer prognosis and detection. Broadening this effort to predict the likelihood of tumor spread to a specific location may improve our current approach to the treatment or surveillance of metastasis/recurrence and to its early detection.

The scope of this issue is to cover recent perspectives on breast cancer prognosis and the predictive factors involved, with an emphasis on finding robust and contemporary prognostic models for overall survival in early stage and metastatic breast cancer patients.

**Treatment strategies for early and advanced stages of breast cancer:** Improved screening techniques have led to increased diagnosis of early stage breast cancers, including stages I-III. Patients with early stage breast cancer generally have a good prognosis, but there is still a risk of disease recurrence and breast cancer-related death.

The scope of this issue includes the evaluation of treatment patterns and outcomes in patients with hormone receptor positive, HER2 negative, triple negative biomarkers in early stage breast cancer, locally advanced breast cancer, and metastatic breast cancer. This issue will also describe current treatment patterns and their effectiveness, unusual responders to treatment, and the evaluation of genomic alterations and their correlation with patient outcomes. We aim to assess different neoadjuvant and metastatic chemotherapy regimens and their effectiveness in terms of impact on overall or progression-free survival.

Dr. Akshara Singareeka Raghavendra

*Guest Editor*

**Guest Editor(s):**

Akshara Singareeka Raghavendra, MD
asraghavendra@mdanderson.org
Department of Breast Medical Oncology, Division of Cancer Medicine, The University of Texas MD Anderson Cancer Center, Houston, TX, USA