A Positive Conversion in HER2 Status Might Affect Survival after Liver Resection for Breast Cancer Metastases

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To the Editor,

I wish to congratulate Ercolani et al. [1] for their article in which they reviewed their experience with liver resection for metastases from breast cancer in 51 patients. They concluded that liver resection is a safe and effective treatment for metastases from breast cancer, and encouraging long-term survival can be obtained with acceptable risk in selected patients. However, the authors did not provide detailed infor-

mation about the relation of immunohistochemical receptor status between primary and metastatic tumors (only seven patients' data were available). A change of estrogen receptor, progesterone receptor, and HER2 status in distant metastases has frequently been reported. The actual incidence of this phenomenon has been debated. Recent meta-analysis including 39 studies assessing receptor conversion from primary

breast tumors to paired distant breast cancer metastases showed that negative to positive conversion percentages were 21.5, 15.9, and 9.5% for estrogen receptor, progesterone receptor, and HER2 [2]. The positive conversion in HER2 status literally changes the treatment challenges in these patients favoring the use of adjuvant anti-HER2 targeted armamentarium, which in turn might affect the survival.

References

- 1 Ercolani G, Zanello M, Serenari M, et al: Ten-year survival after liver resection for breast metastases: a single-center experience. *Dig Surg* 2018, DOI: 10.1159/000486523.
- 2 Schrijver WAME, Suijkerbuijk KPM, van Gils CH, et al: Receptor conversion in distant breast cancer metastases: a systematic review and meta-analysis. *J Natl Cancer Inst* 2018, Epub ahead of print.