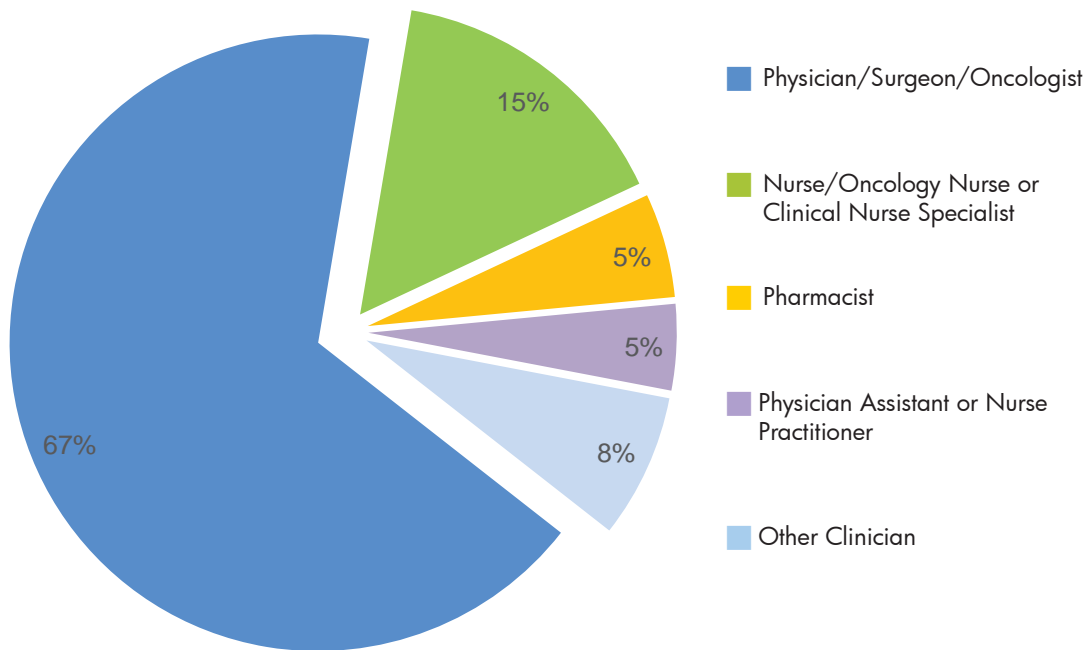


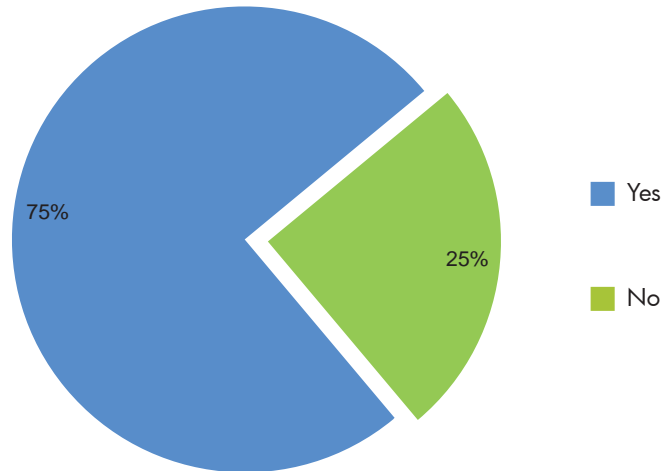
NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. This summary includes the results of the February 2012 NCCN Trends™ Survey, which focused on Breast Cancer. This survey was sent to U.S. and International users of NCCN.org.

DEMOGRAPHICS

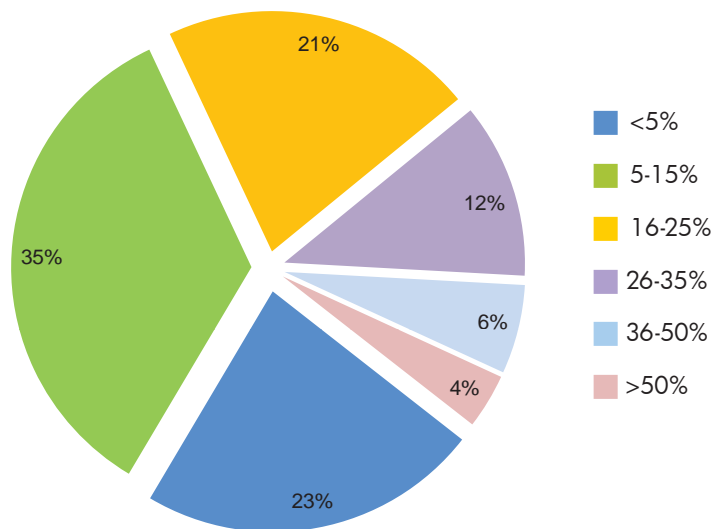
Distribution of Respondent Types (n = 1,833)



Q1. Do you treat patients with metastatic Breast Cancer? (n=2,278)



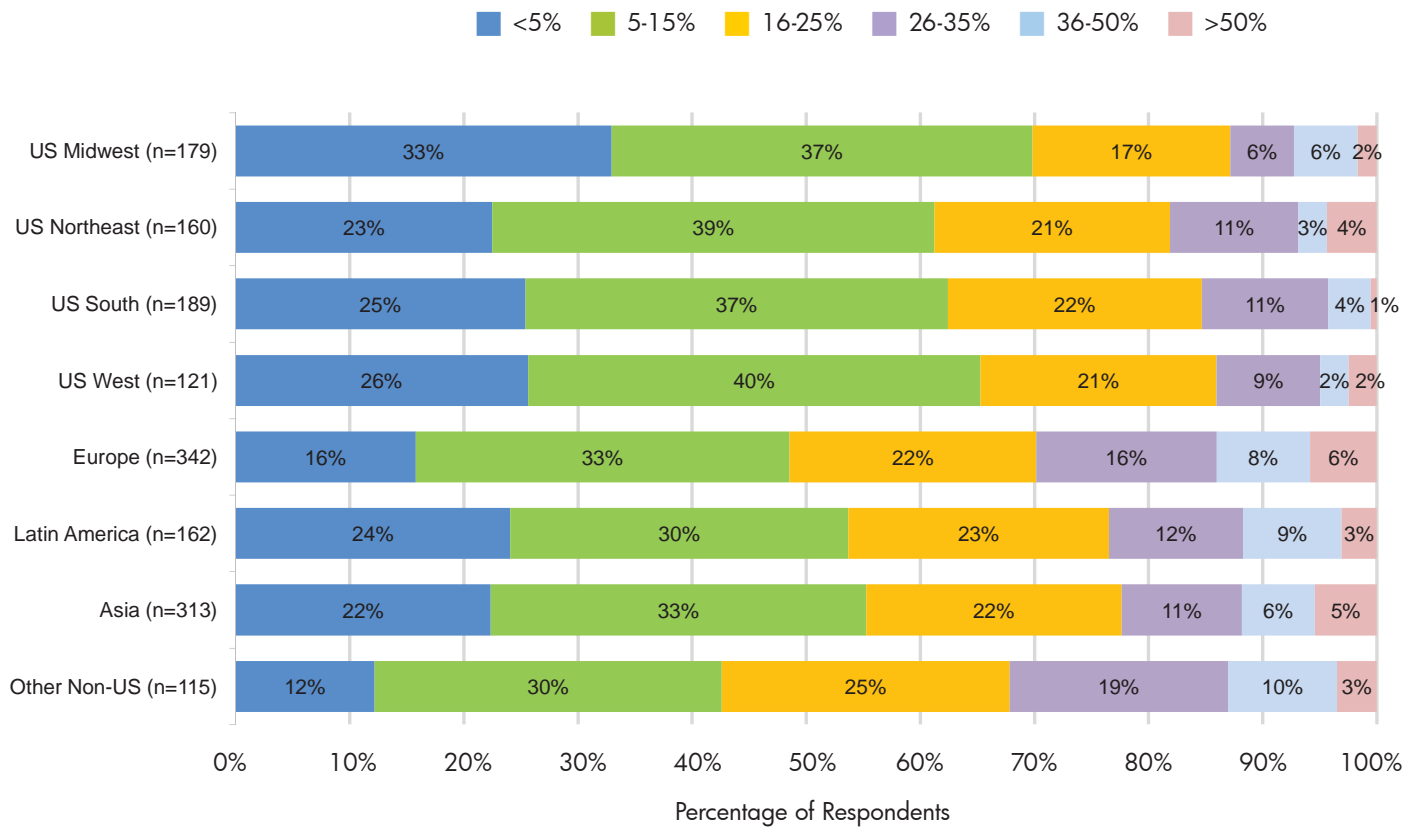
Q2. What percentage of the patients in your practice is currently being treated for metastatic Breast Cancer? (n = 1,648)†



†Note: Percentages may not total 100 because of rounding

Q2. What percentage of the patients in your practice is currently being treated for metastatic Breast Cancer?

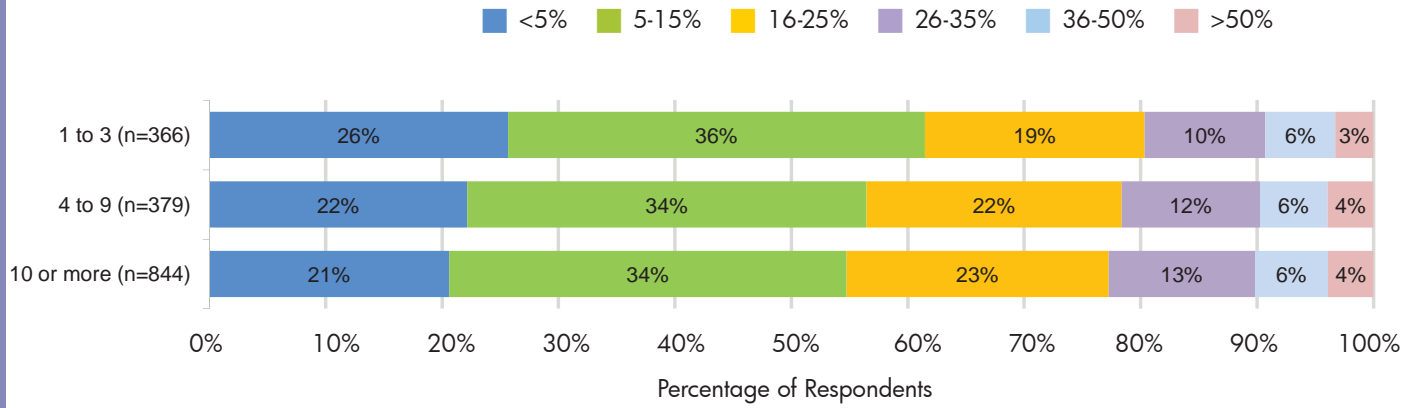
By Geography†



†Note: Percentages may not total 100 because of rounding

Q2. What percentage of the patients in your practice is currently being treated for metastatic Breast Cancer?

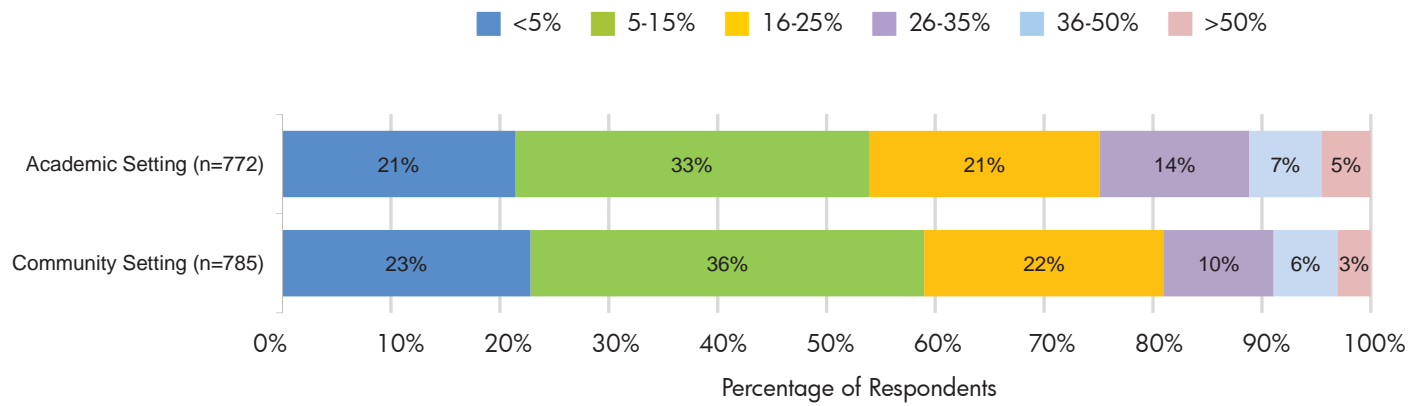
By Practice Size†



†Note: Percentages may not total 100 because of rounding

Q2. What percentage of the patients in your practice is currently being treated for metastatic Breast Cancer?

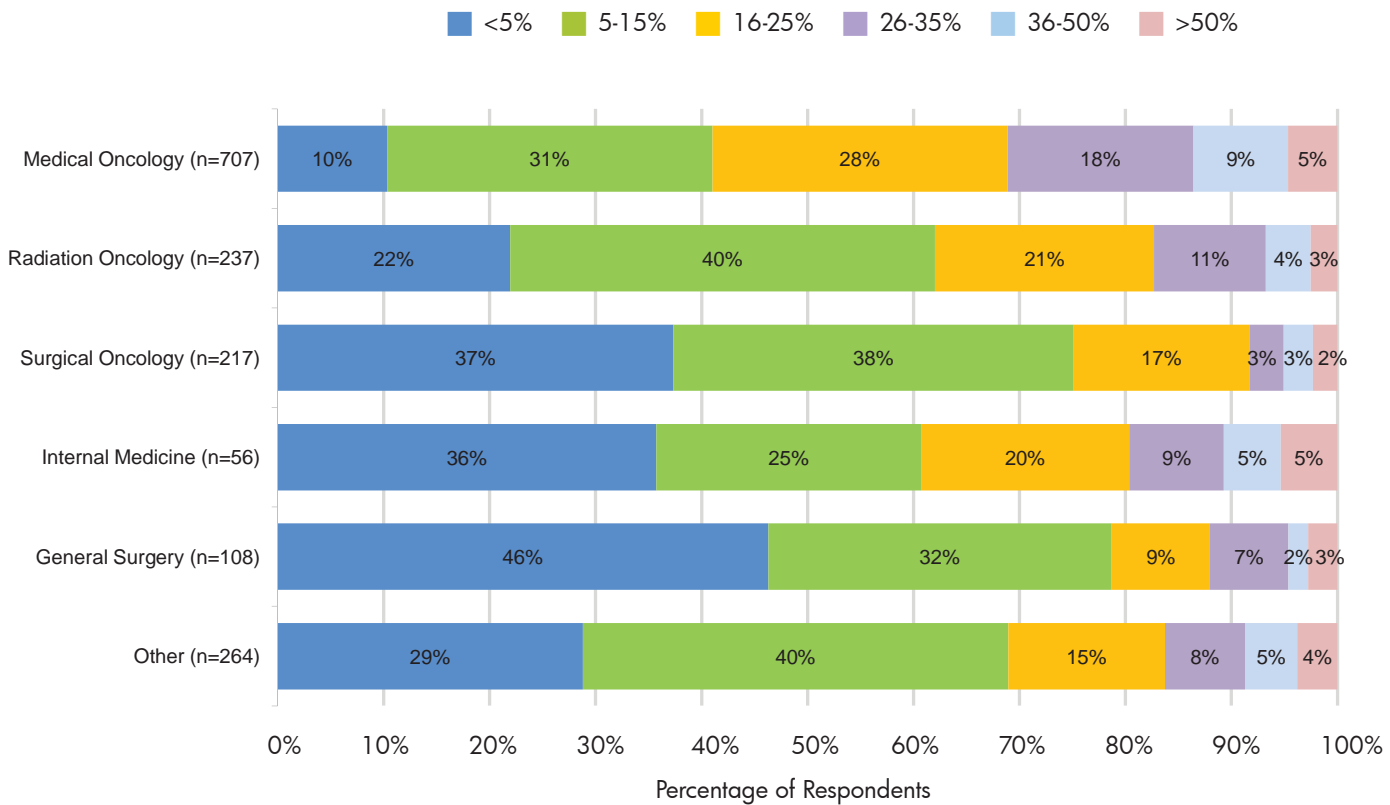
By Practice Setting†



†Note: Percentages may not total 100 because of rounding

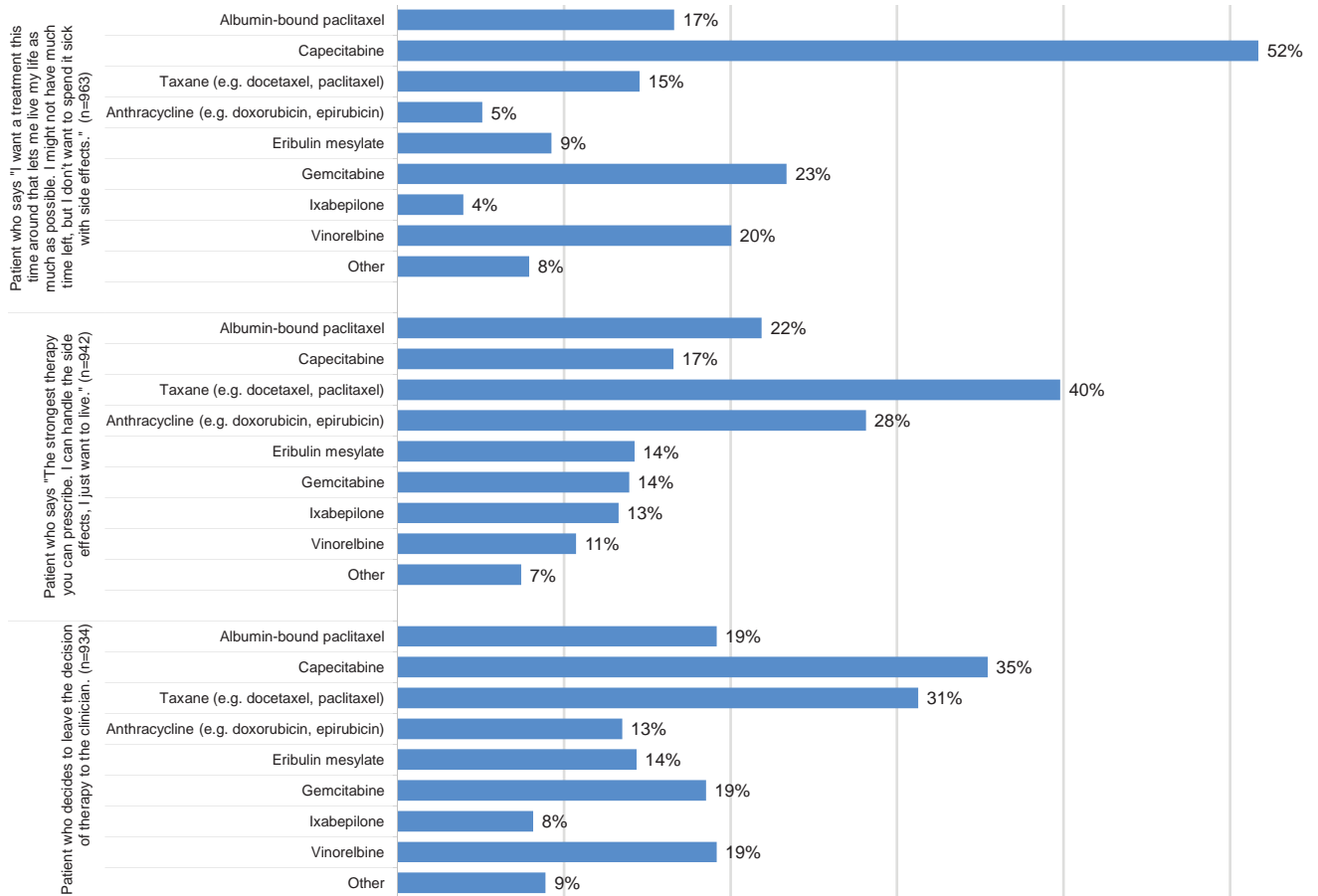
Q2. What percentage of the patients in your practice is currently being treated for metastatic Breast Cancer?

By Specialty†



†Note: Percentages may not total 100 because of rounding

Q3. What 3rd line cytotoxic chemotherapy agent would you choose to give a patient with non-HER2 positive, metastatic Breast Cancer in the following scenarios: (Select all that apply)



Results: February 2012
BREAST CANCER

Q3. What 3rd line cytotoxic chemotherapy agent would you choose to give a patient with non-HER2 positive, metastatic Breast Cancer in the following scenarios: (Select all that apply)

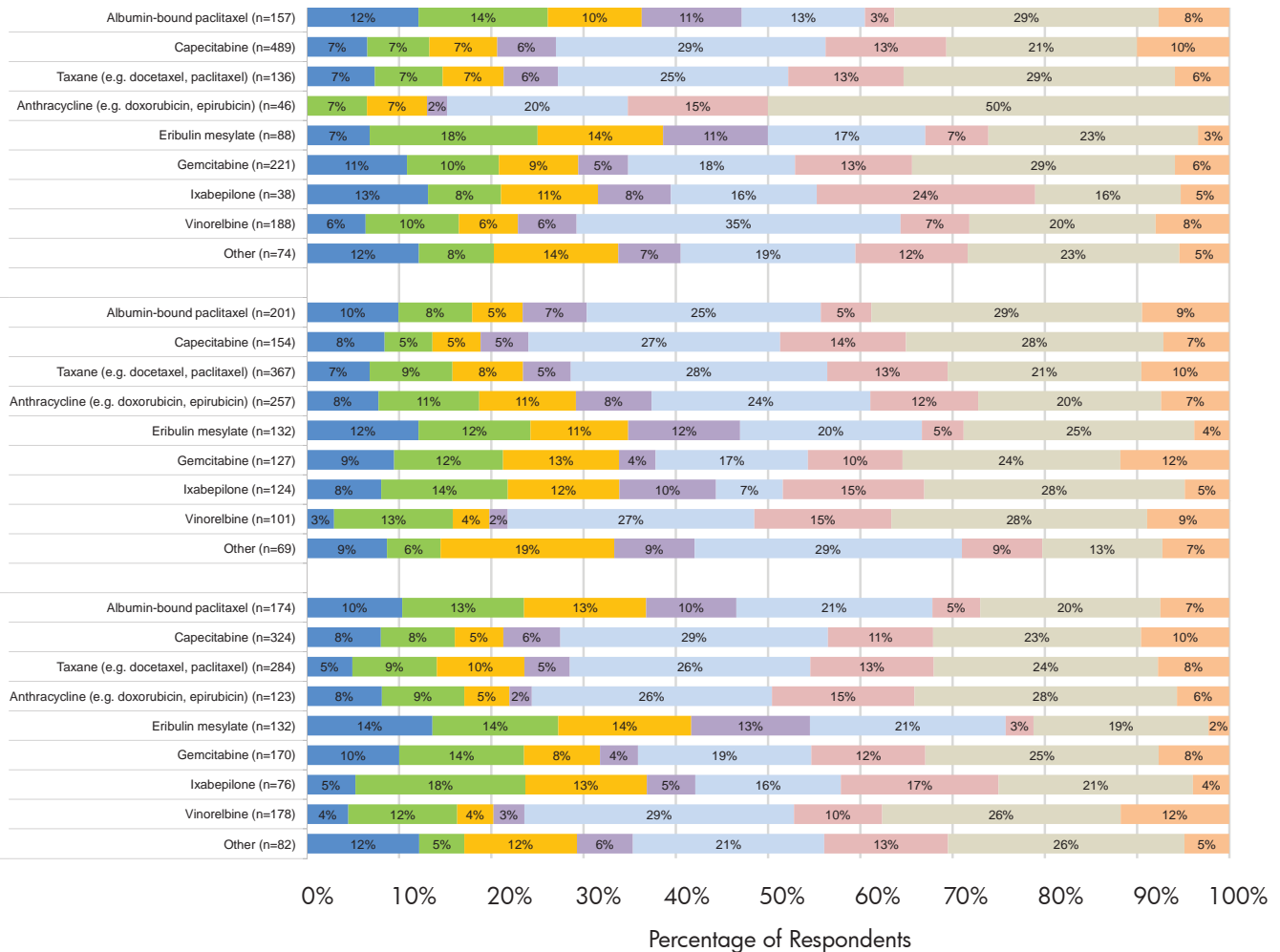
By Geography†

- US Midwest
- US Northeast
- US South
- US West
- Europe
- Latin America
- Asia
- Other Non-US

Vertical text: Patient who says "I want a treatment this time around that lets me live my life as much as possible. I might not have much time left, but I don't want to spend it sick with side effects."

Vertical text: Patient who says "The strongest therapy you can prescribe. I can handle the side effects. I just want to live."

Vertical text: Patient who decides to leave the decision of therapy to the clinician.



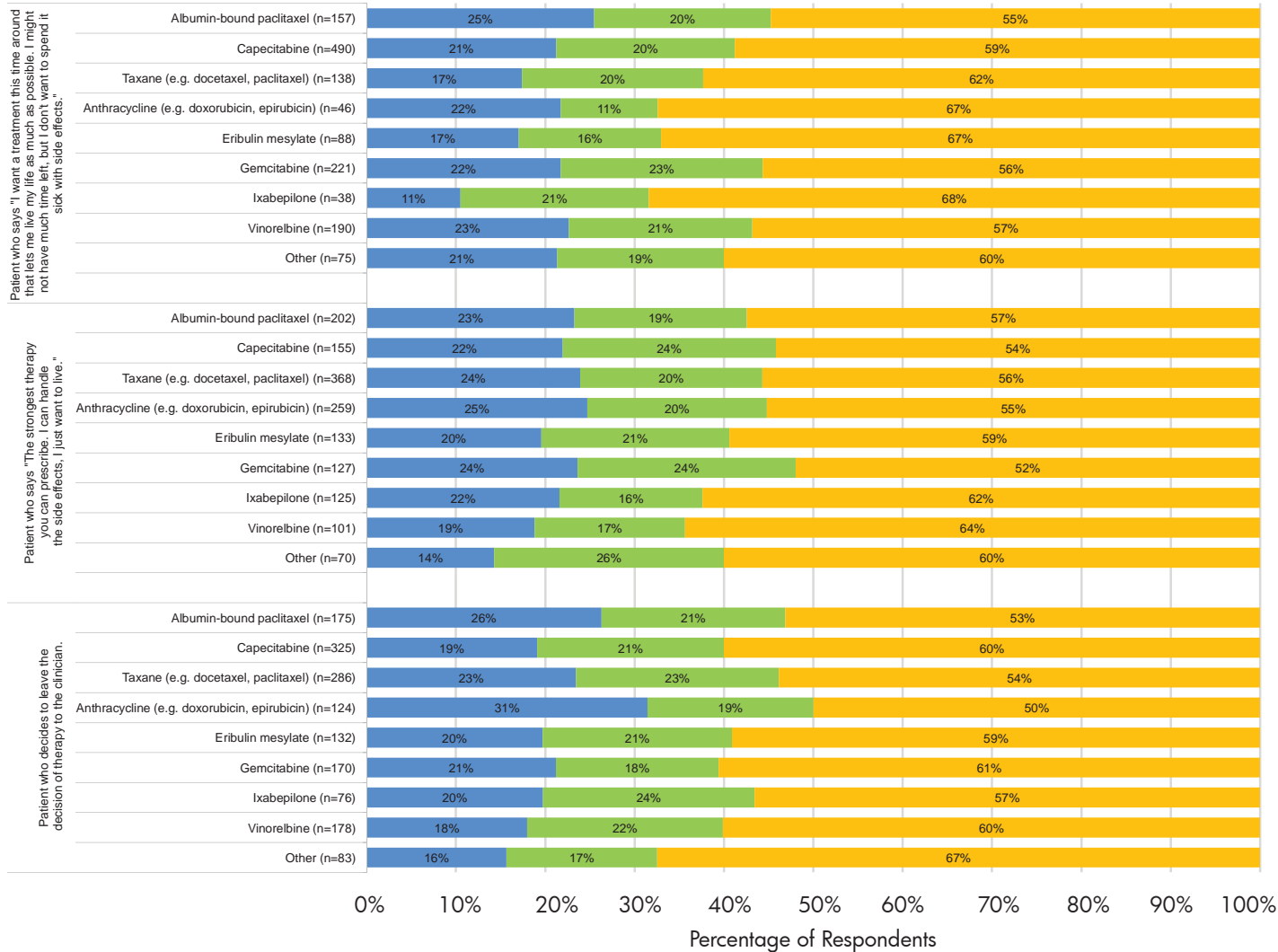
†Note: Percentages may not total 100 because of rounding

Results: February 2012
BREAST CANCER

Q3. What 3rd line cytotoxic chemotherapy agent would you choose to give a patient with non-HER2 positive, metastatic Breast Cancer in the following scenarios: (Select all that apply)

By Practice Size†

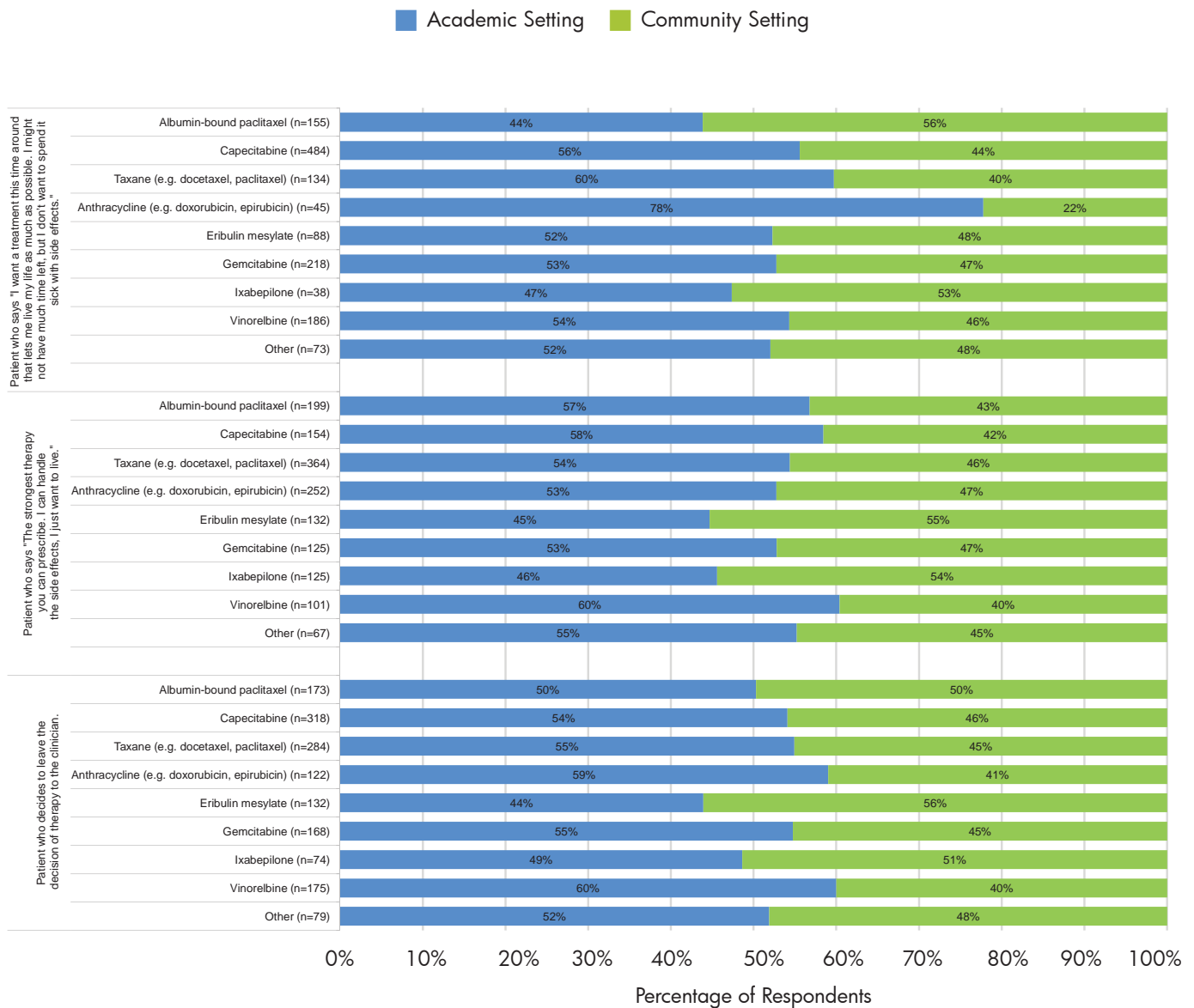
■ 1 to 3 ■ 4 to 9 ■ 10 or more



†Note: Percentages may not total 100 because of rounding

Q3. What 3rd line cytotoxic chemotherapy agent would you choose to give a patient with non-HER2 positive, metastatic Breast Cancer in the following scenarios: (Select all that apply)

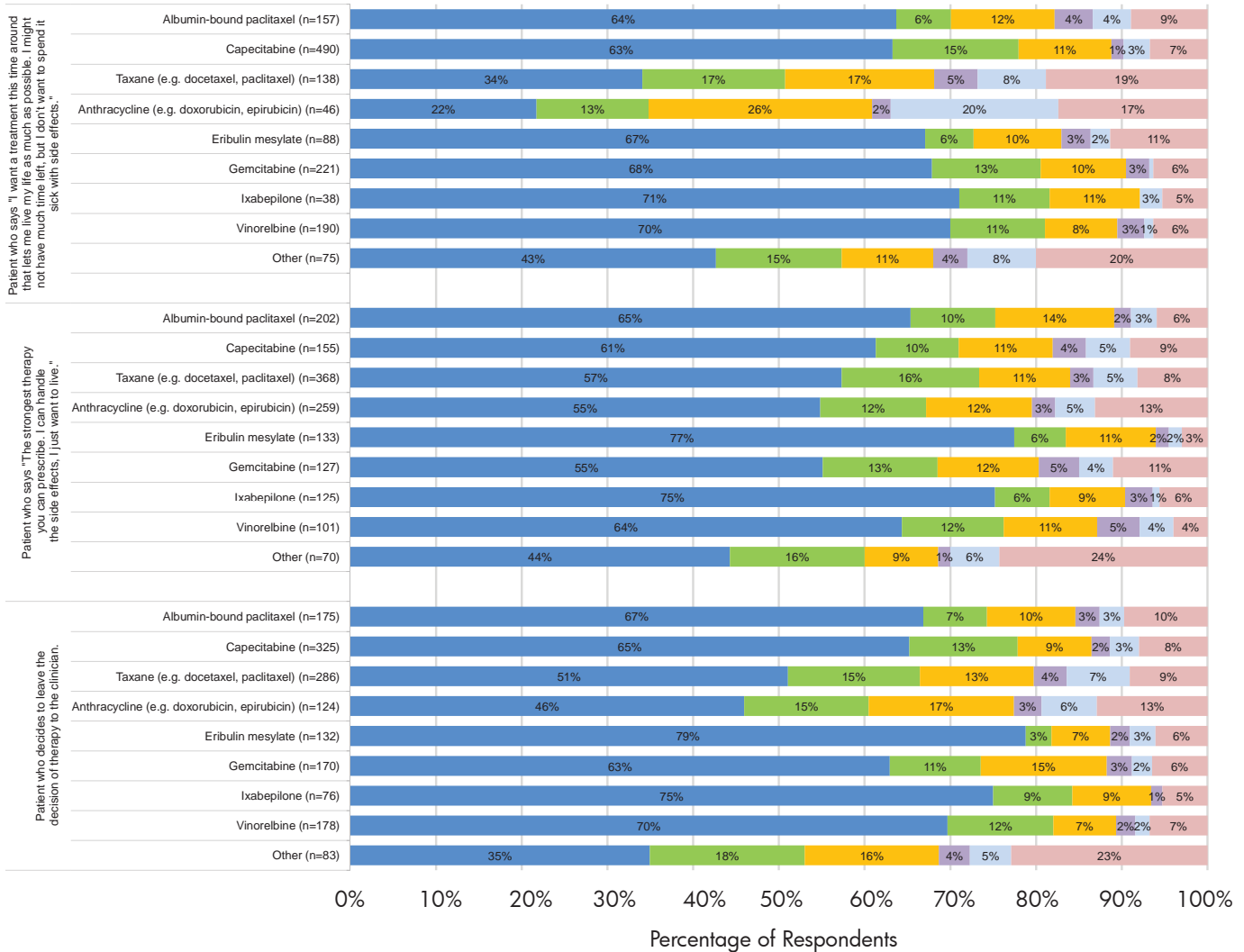
By Practice Setting



Q3. What 3rd line cytotoxic chemotherapy agent would you choose to give a patient with non-HER2 positive, metastatic Breast Cancer in the following scenarios: (Select all that apply)

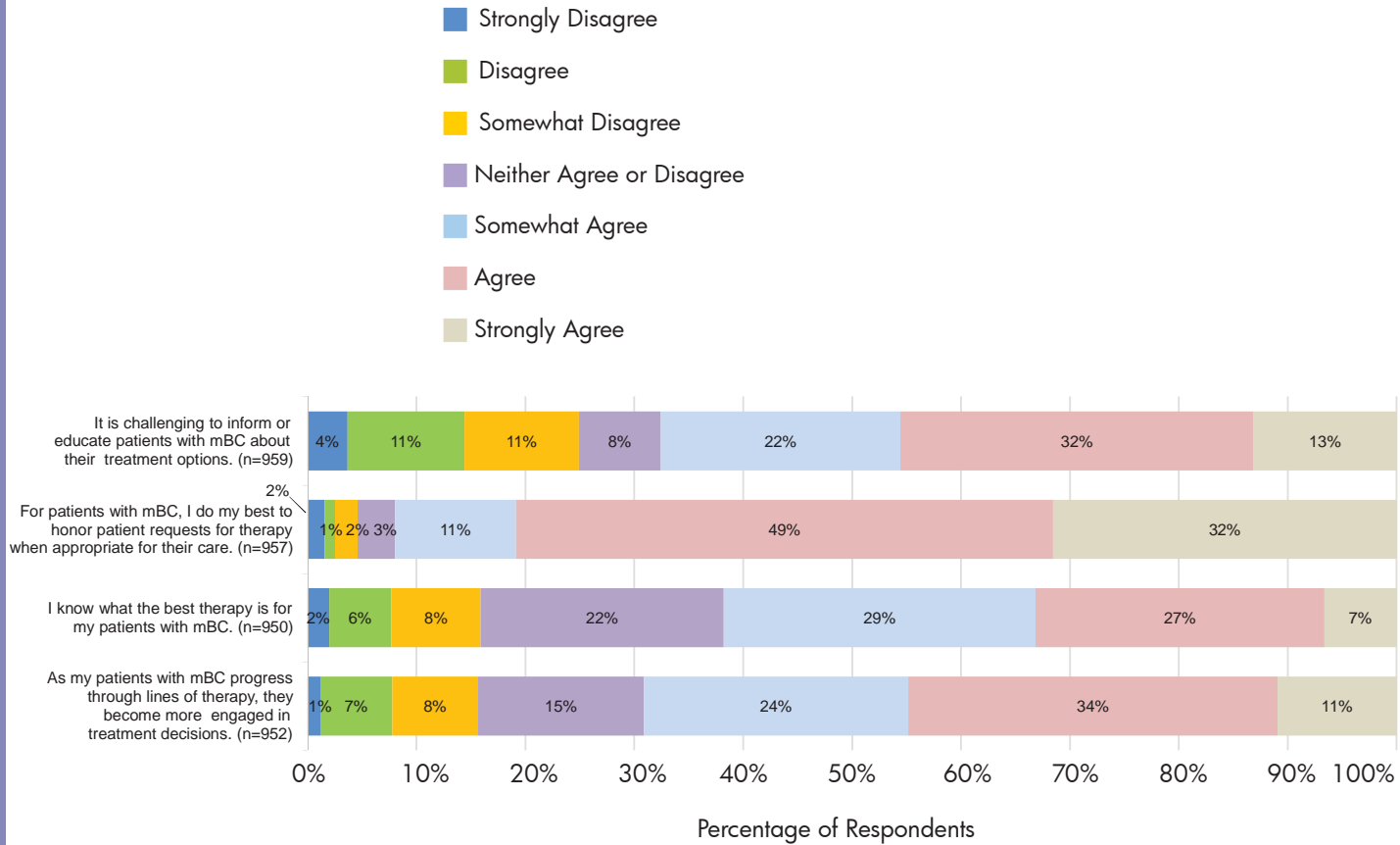
By Specialty†

- Medical Oncology
- Radiation Oncology
- Surgical Oncology
- Internal Medicine
- General Surgery
- Other



†Note: Percentages may not total 100 because of rounding

Q4. Please think about your patients with metastatic Breast Cancer (mBC) and indicate to what degree you agree with each of the statements below.†

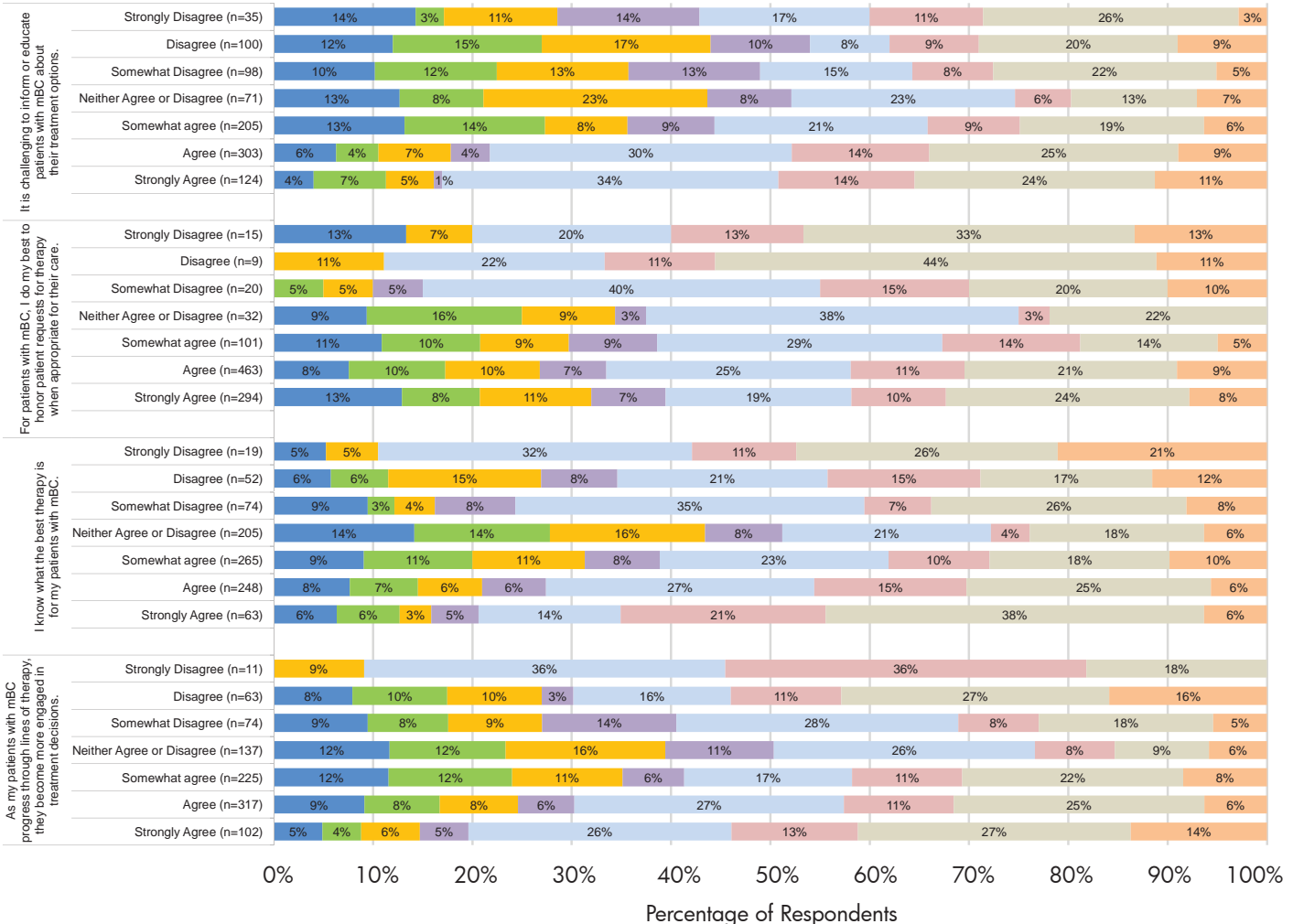


†Note: Percentages may not total 100 because of rounding

Results: February 2012
BREAST CANCER

Q4. Please think about your patients with metastatic Breast Cancer (mBC) and indicate to what degree you agree with each of the statements below.

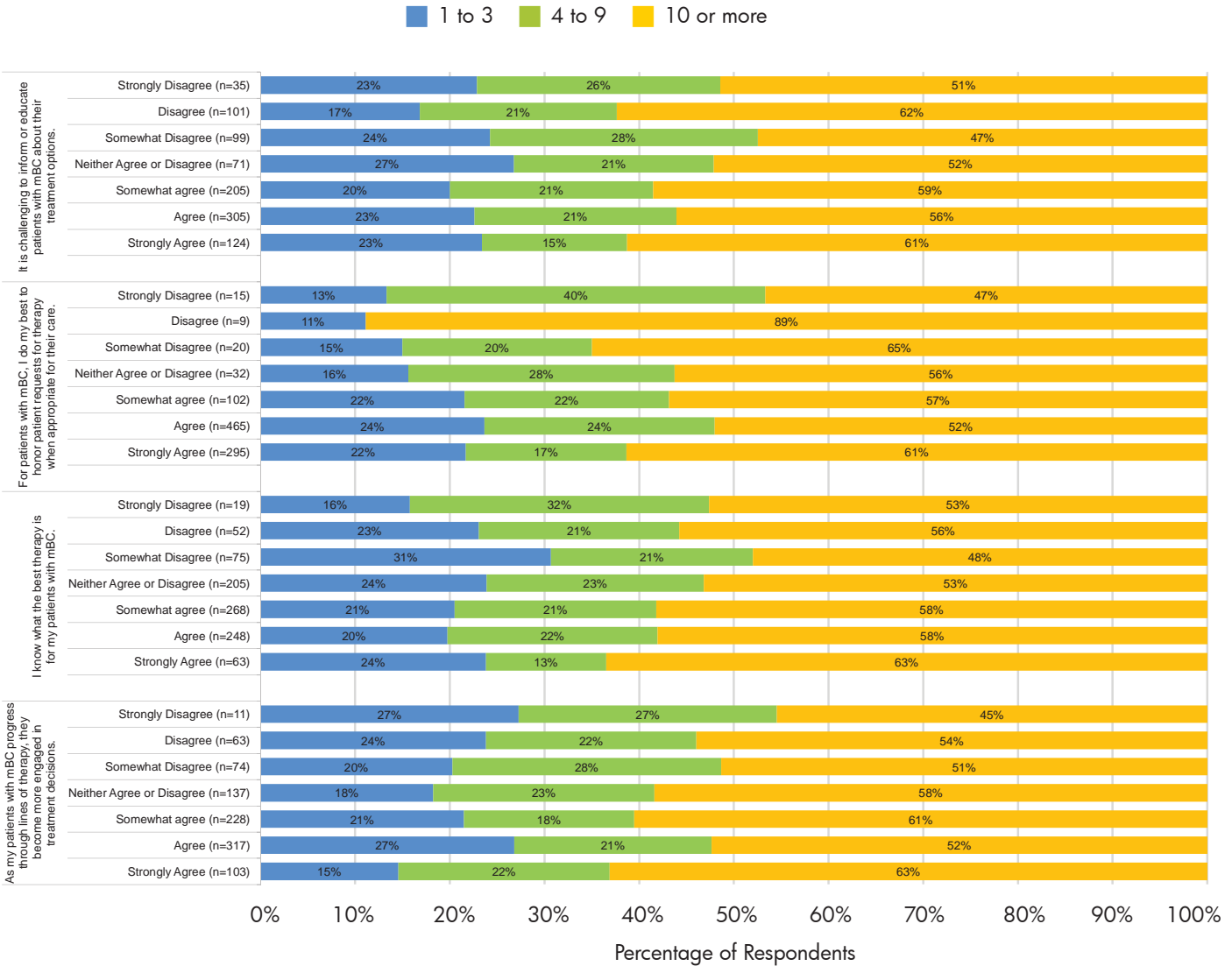
By Geography†



†Note: Percentages may not total 100 because of rounding

Q4. Please think about your patients with metastatic Breast Cancer (mBC) and indicate to what degree you agree with each of the statements below.

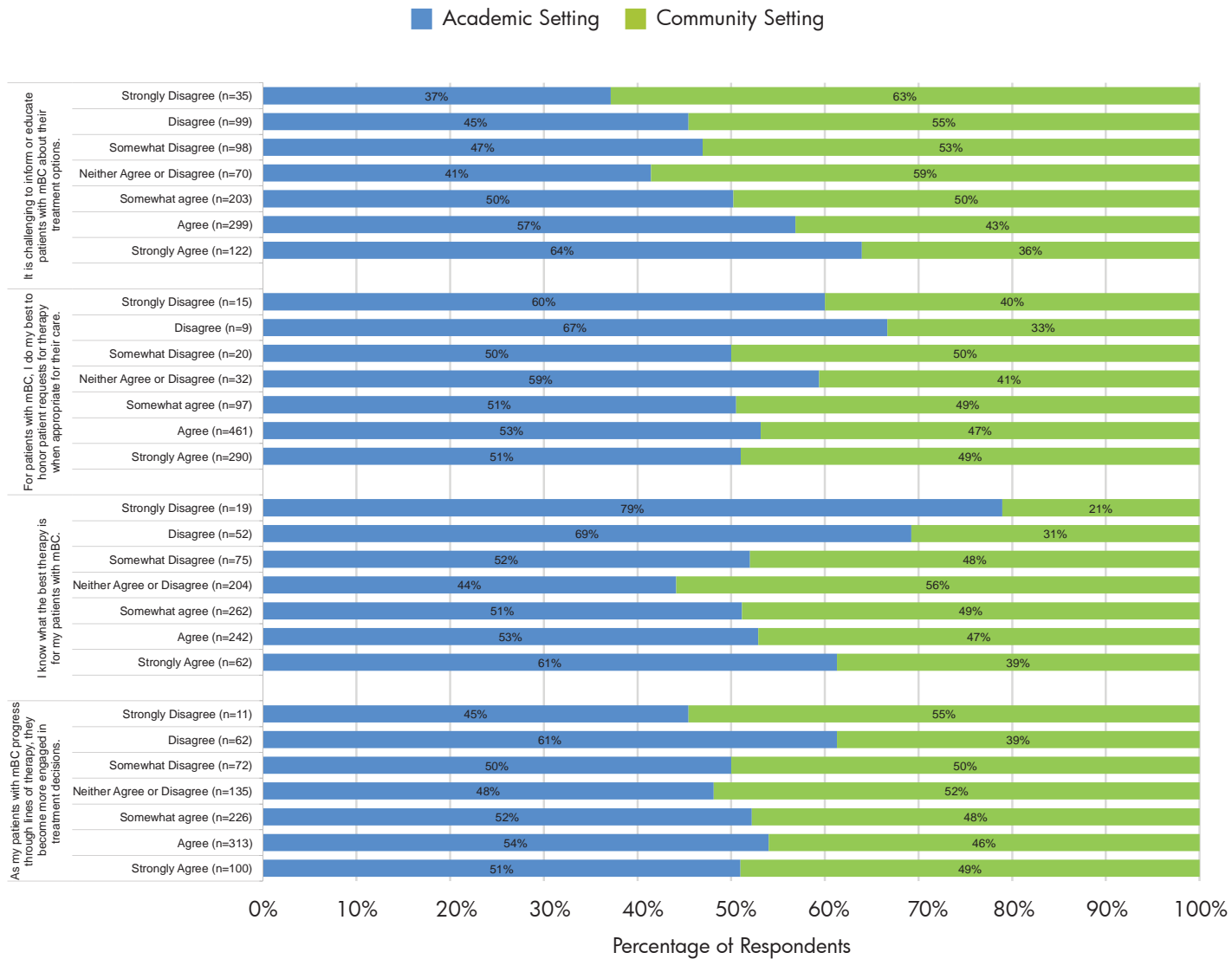
By Practice Size†



†Note: Percentages may not total 100 because of rounding

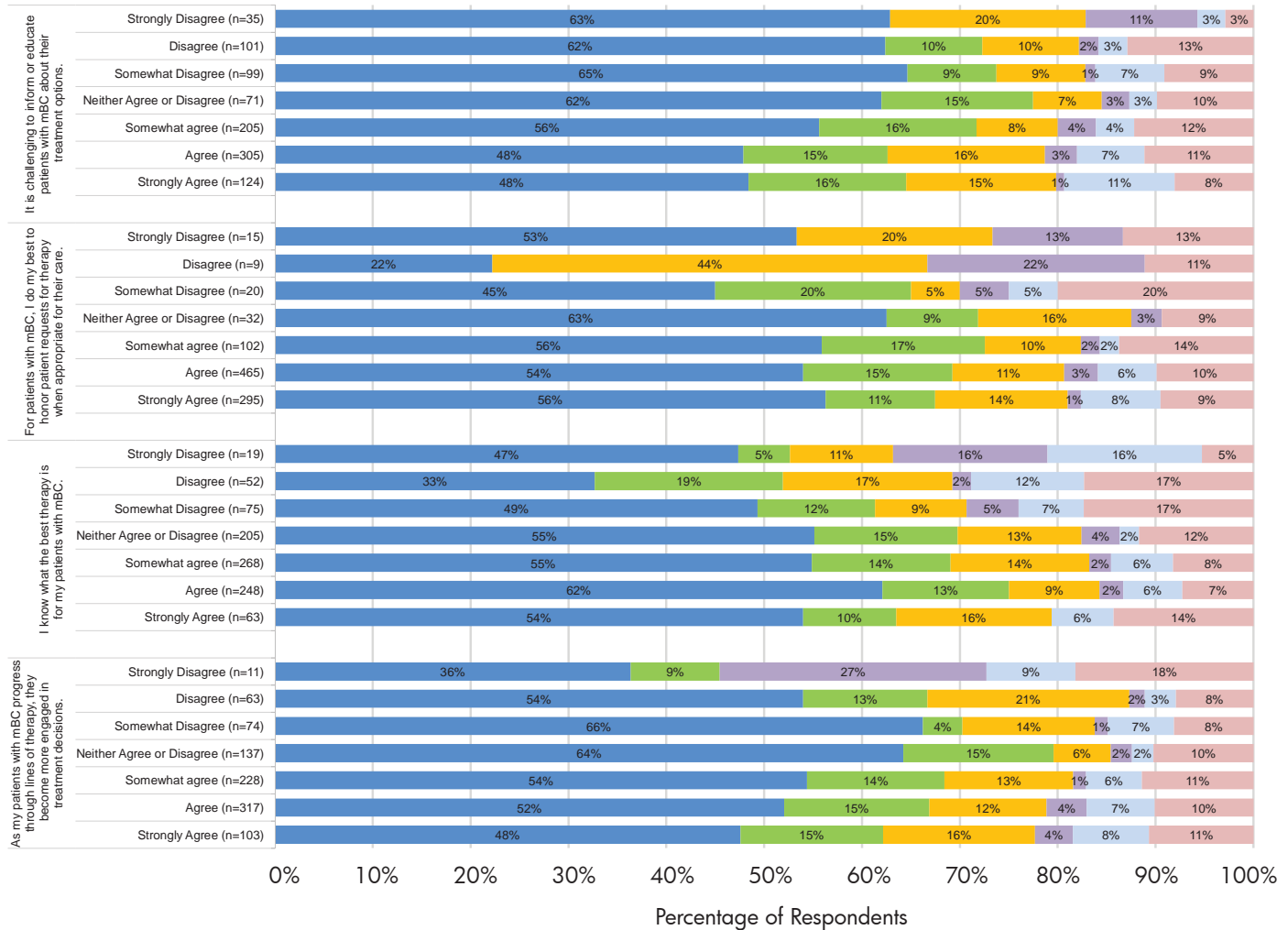
Q4. Please think about your patients with metastatic Breast Cancer (mBC) and indicate to what degree you agree with each of the statements below.

By Practice Setting



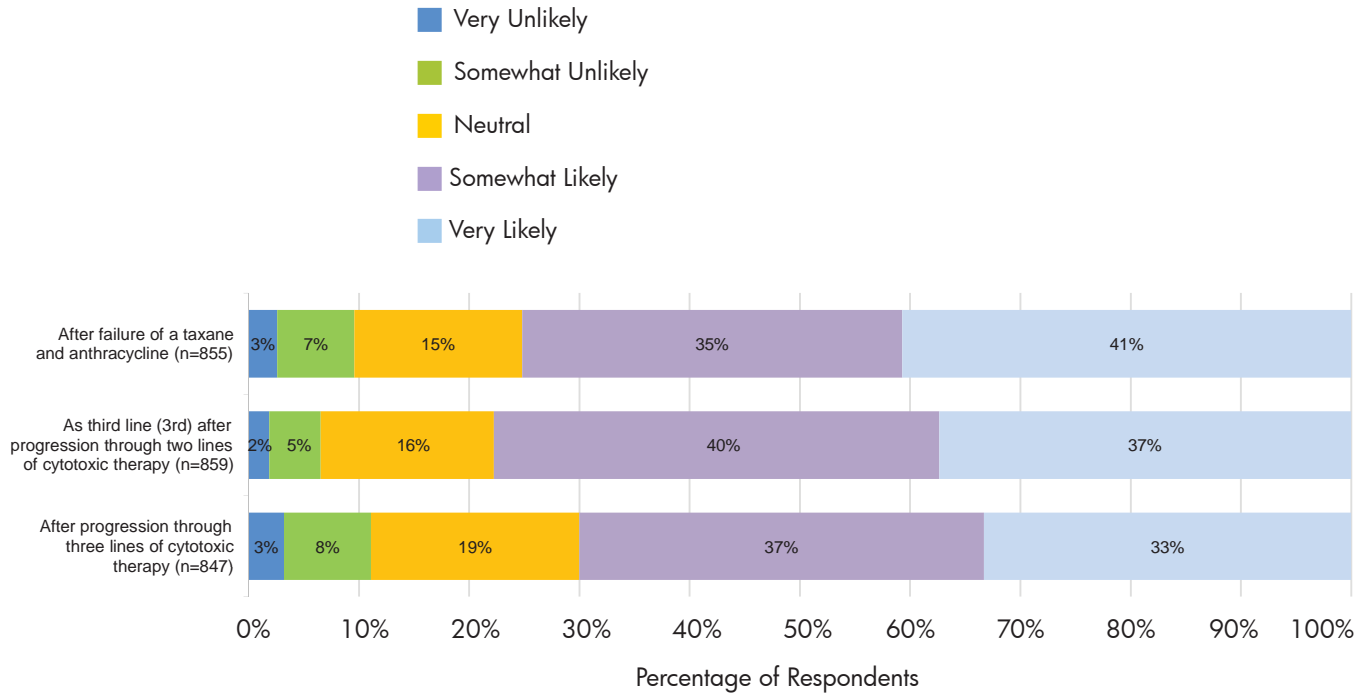
Q4. Please think about your patients with metastatic Breast Cancer (mBC) and indicate to what degree you agree with each of the statements below.

By Specialty†



†Note: Percentages may not total 100 because of rounding

Q5. If a capecitabine naïve patient with metastatic Breast Cancer requests capecitabine therapy, how likely are you to administer capecitabine therapy in each of the following clinical scenarios? Please use the following scale.†

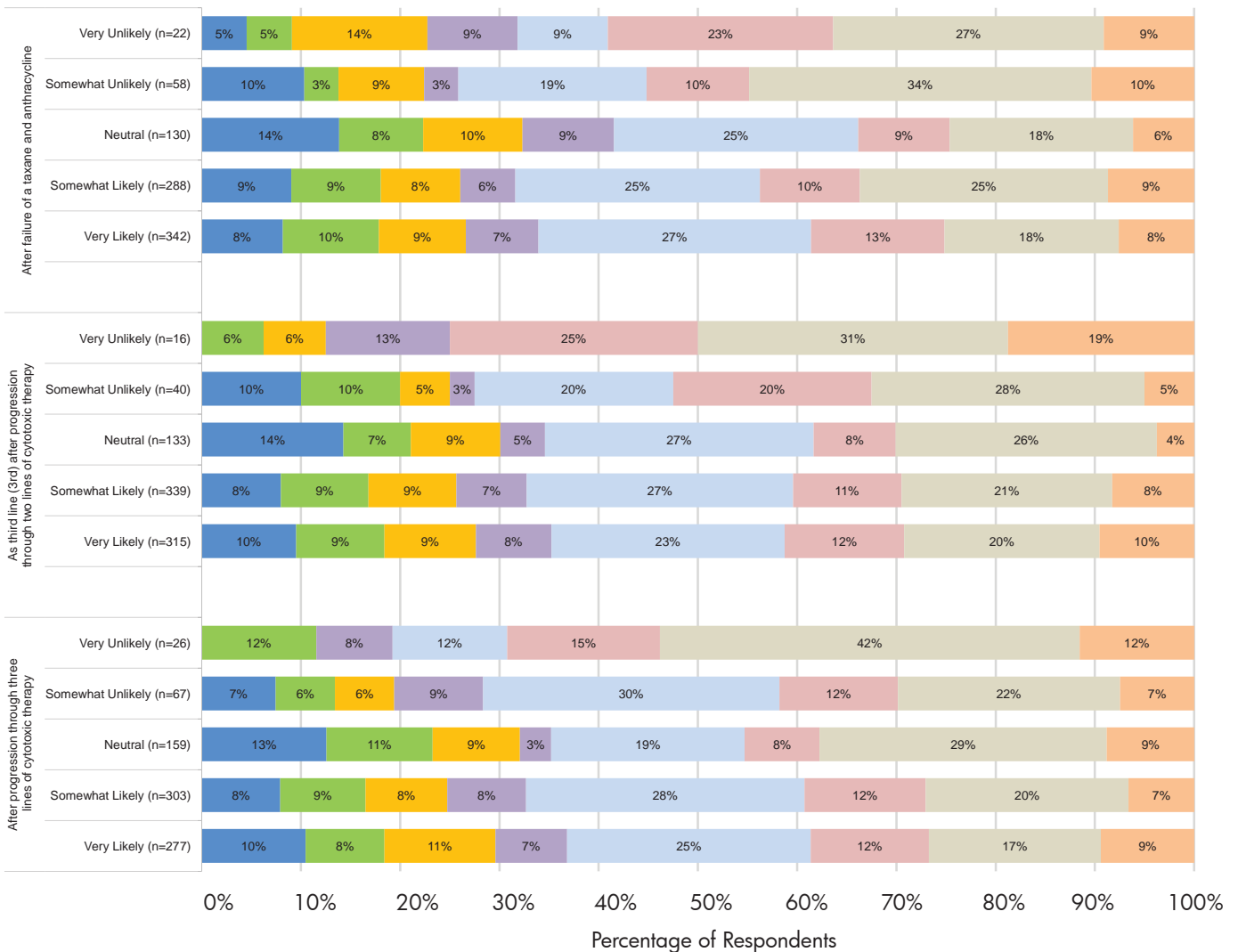


†Note: Percentages may not total 100 because of rounding

Q5. If a capecitabine naïve patient with metastatic Breast Cancer requests capecitabine therapy, how likely are you to administer capecitabine therapy in each of the following clinical scenarios? Please use the following scale.

By Geography†

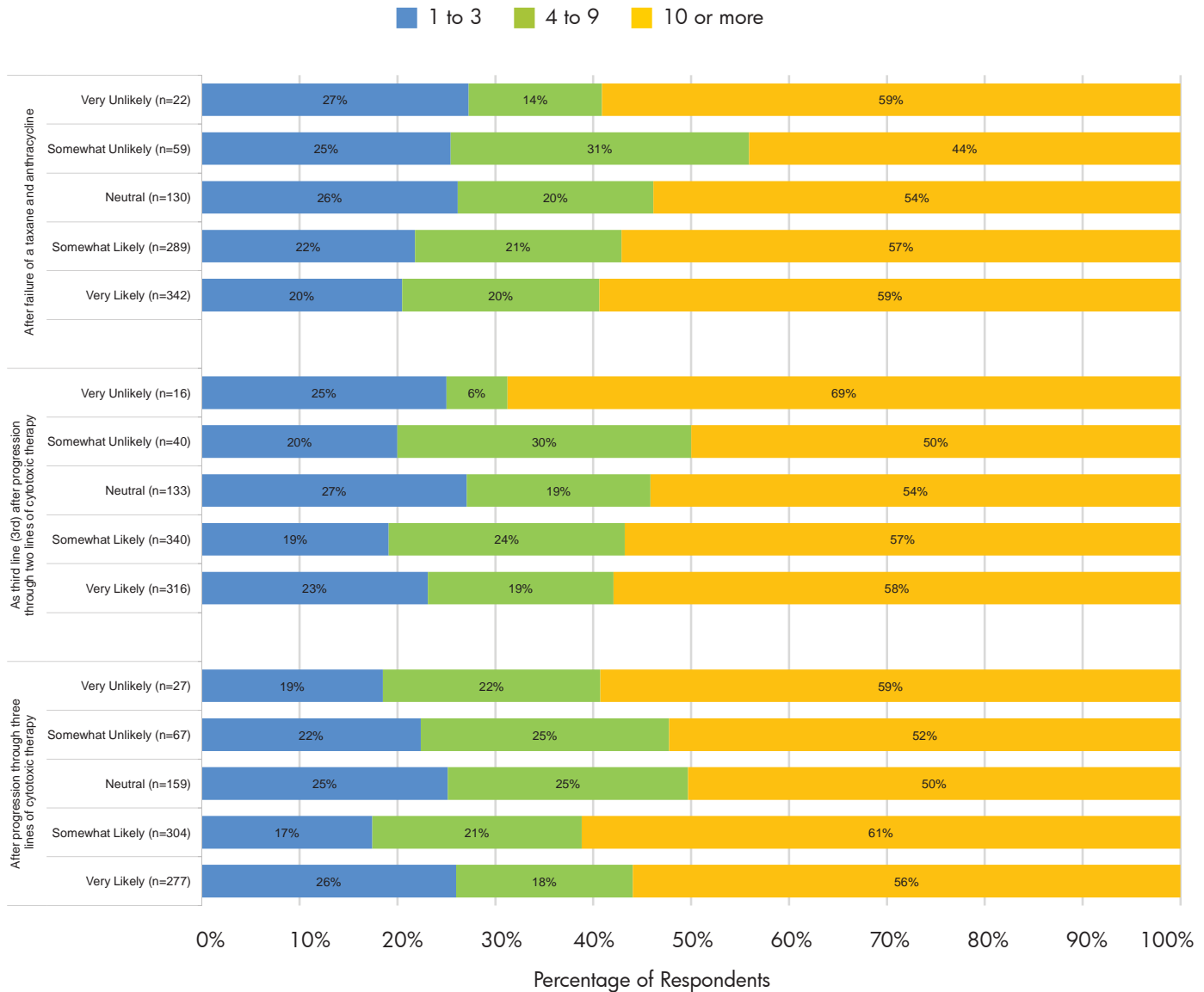
- US Midwest
- US Northeast
- US South
- US West
- Europe
- Latin America
- Asia
- Other Non-US



†Note: Percentages may not total 100 because of rounding

Q5. If a capecitabine naïve patient with metastatic Breast Cancer requests capecitabine therapy, how likely are you to administer capecitabine therapy in each of the following clinical scenarios? Please use the following scale.

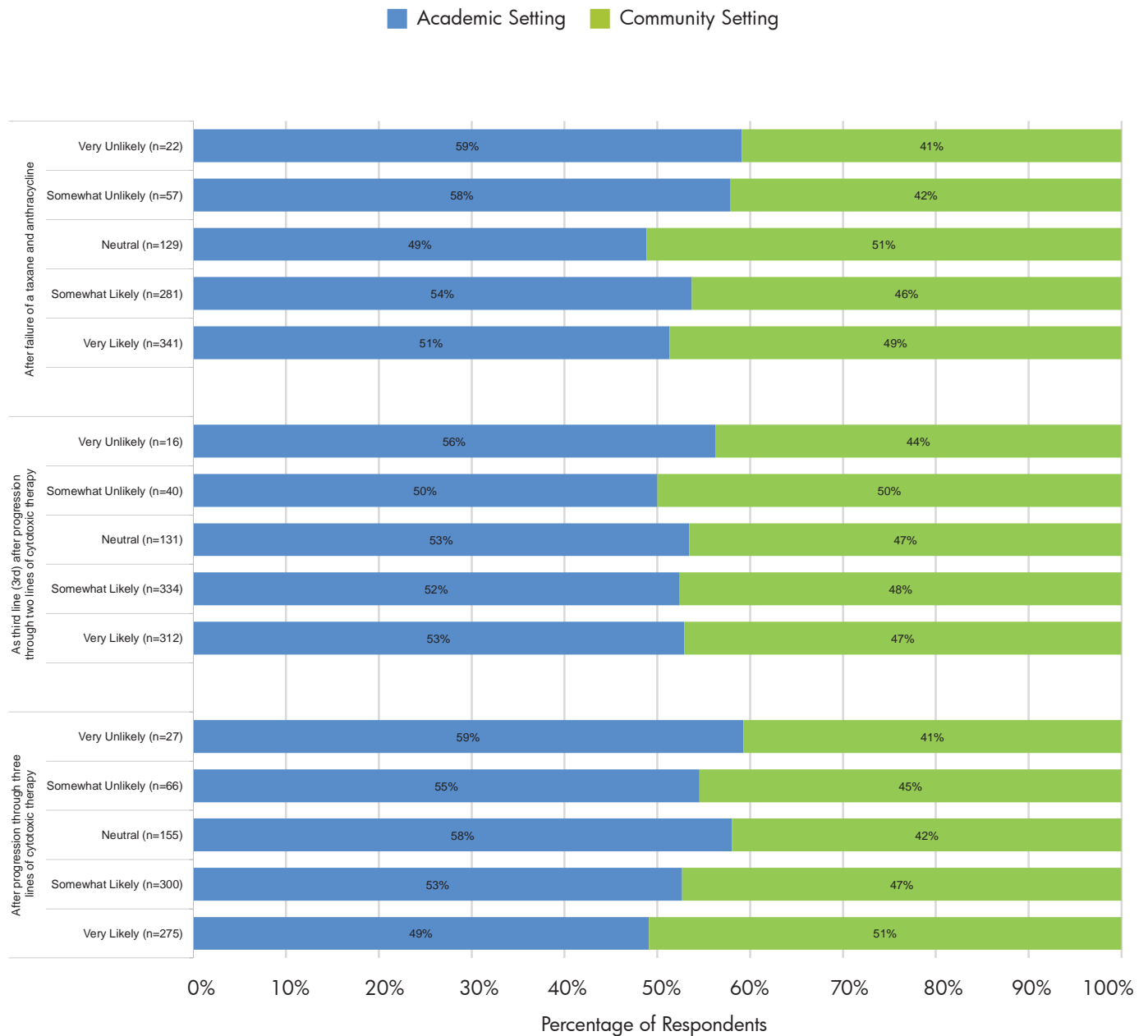
By Practice Size†



†Note: Percentages may not total 100 because of rounding

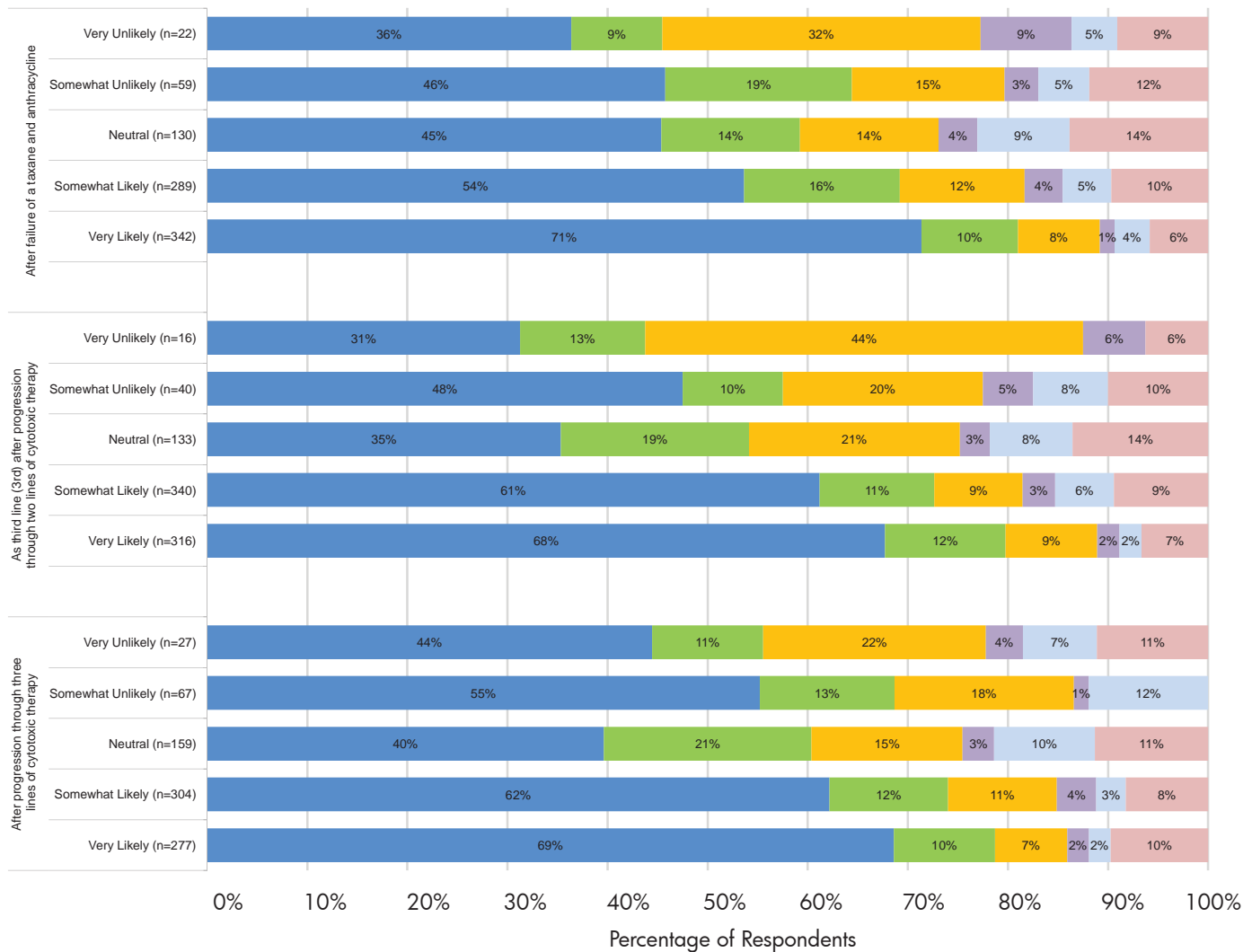
Q5. If a capecitabine naïve patient with metastatic Breast Cancer requests capecitabine therapy, how likely are you to administer capecitabine therapy in each of the following clinical scenarios? Please use the following scale.

By Practice Setting



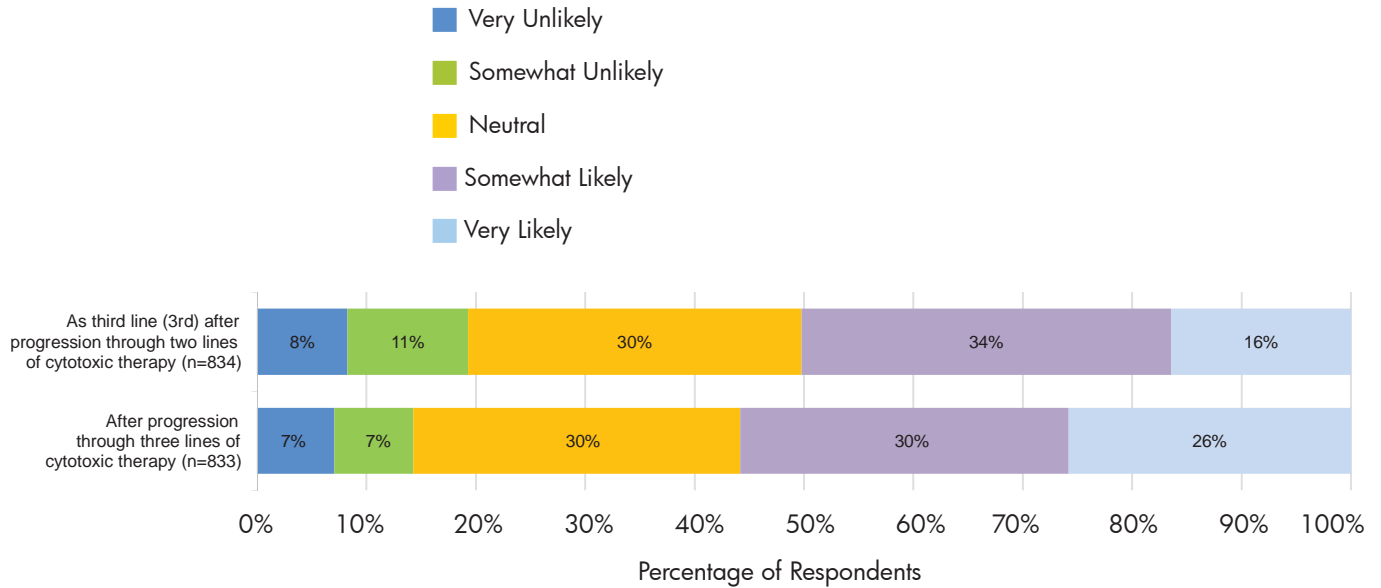
Q5. If a capecitabine naïve patient with metastatic Breast Cancer requests capecitabine therapy, how likely are you to administer capecitabine therapy in each of the following clinical scenarios? Please use the following scale.

By Specialty†



†Note: Percentages may not total 100 because of rounding

Q6. If an eribulin mesylate naïve patient with metastatic Breast Cancer requests eribulin mesylate therapy, how likely are you to administer eribulin mesylate therapy in each of the following clinical scenarios? Please use the following scale.†

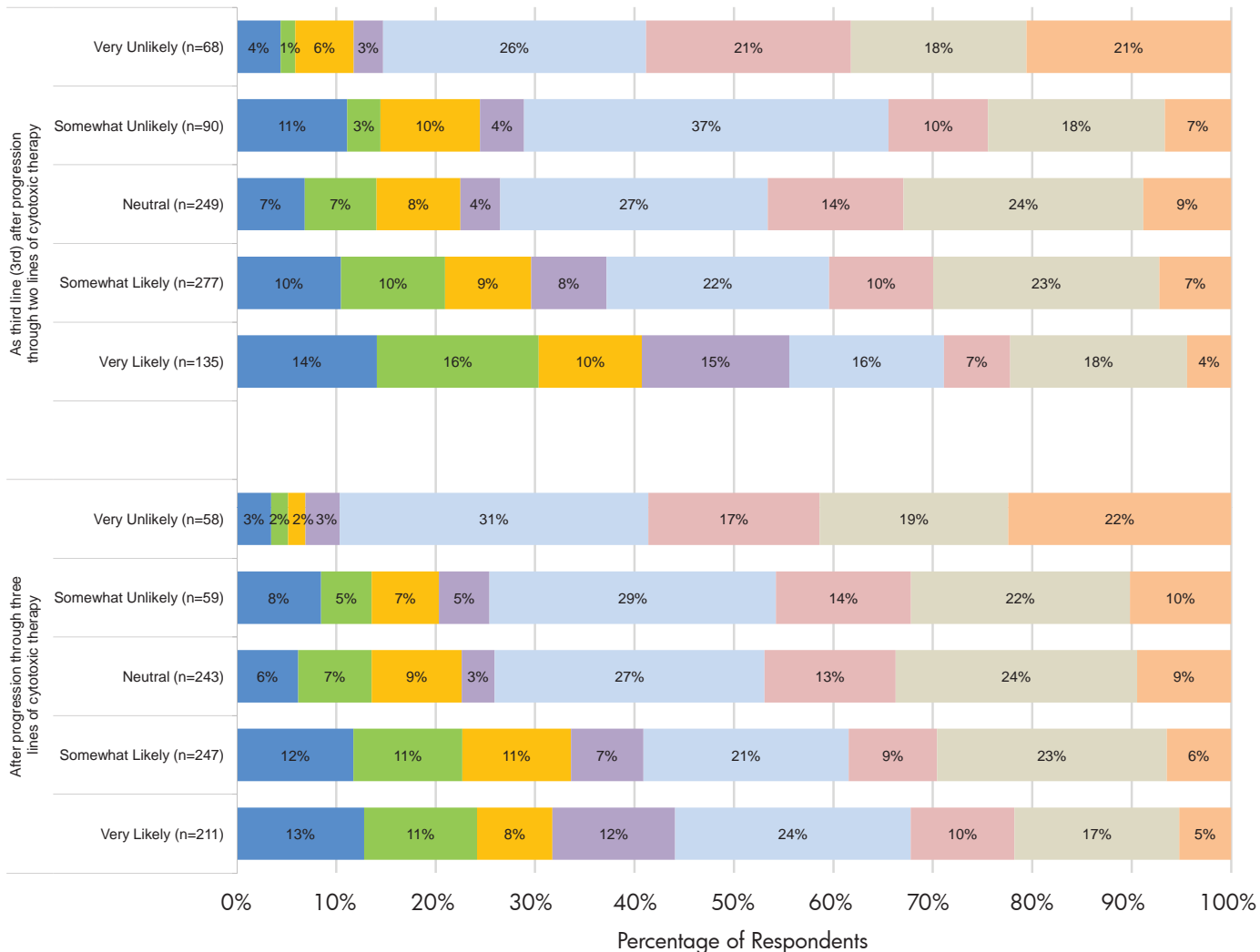


†Note: Percentages may not total 100 because of rounding

Q6. If an eribulin mesylate naïve patient with metastatic Breast Cancer requests eribulin mesylate therapy, how likely are you to administer eribulin mesylate therapy in each of the following clinical scenarios? Please use the following scale.

By Geography†

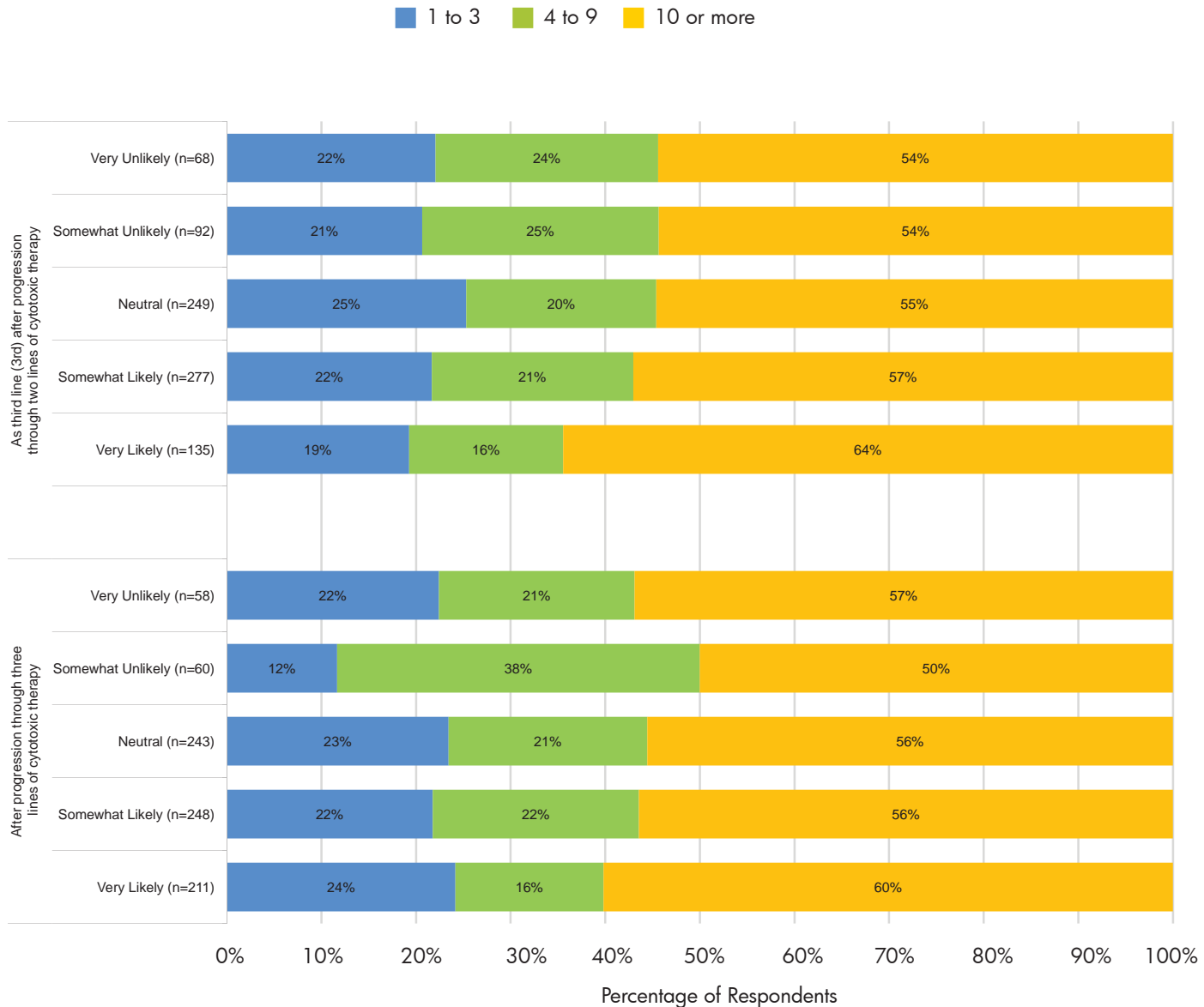
- US Midwest
- US Northeast
- US South
- US West
- Europe
- Latin America
- Asia
- Other Non-US



†Note: Percentages may not total 100 because of rounding

Q6. If an eribulin mesylate naïve patient with metastatic Breast Cancer requests eribulin mesylate therapy, how likely are you to administer eribulin mesylate therapy in each of the following clinical scenarios? Please use the following scale.

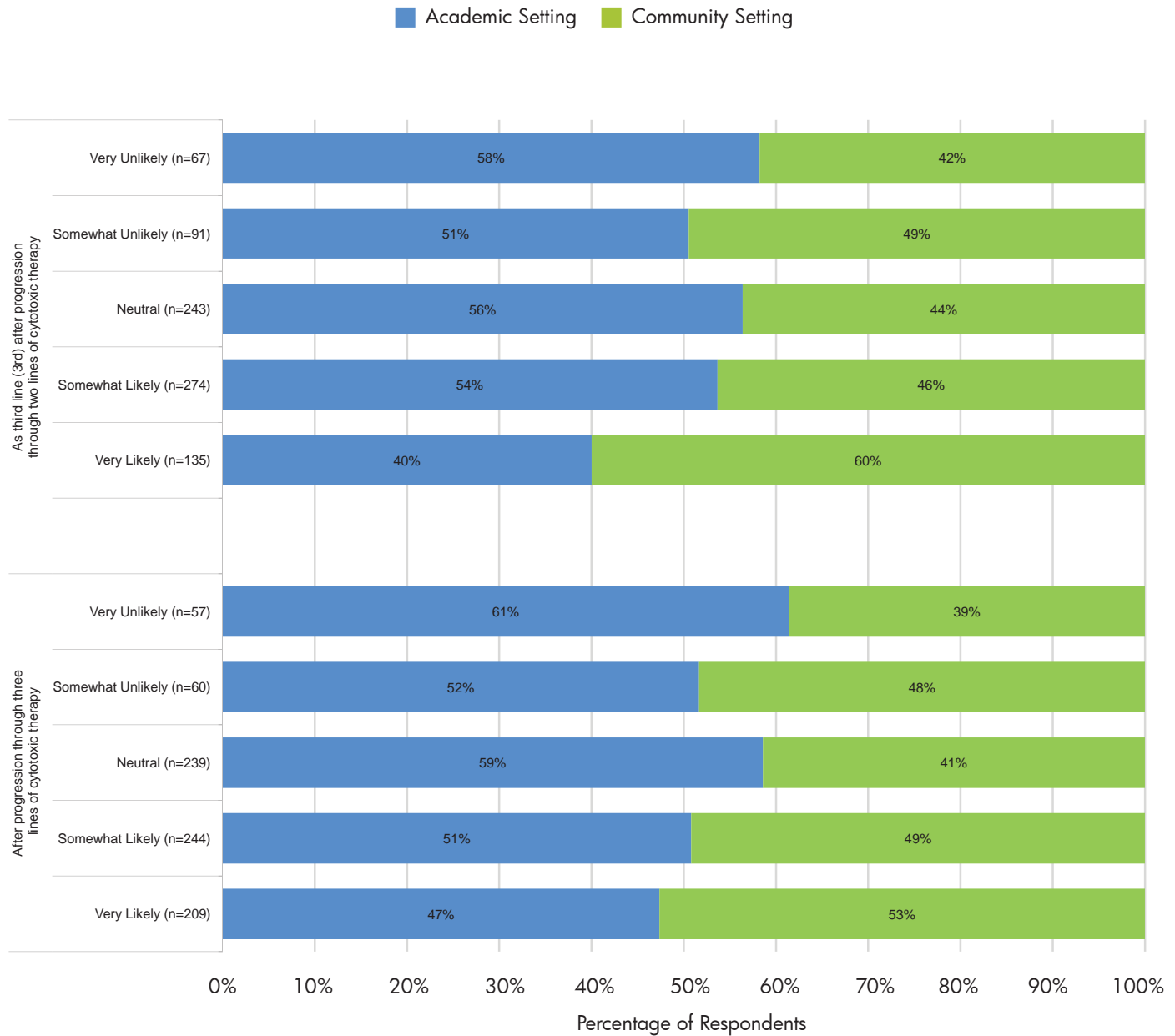
By Practice Size†



†Note: Percentages may not total 100 because of rounding

Q6. If an eribulin mesylate naïve patient with metastatic Breast Cancer requests eribulin mesylate therapy, how likely are you to administer eribulin mesylate therapy in each of the following clinical scenarios? Please use the following scale.

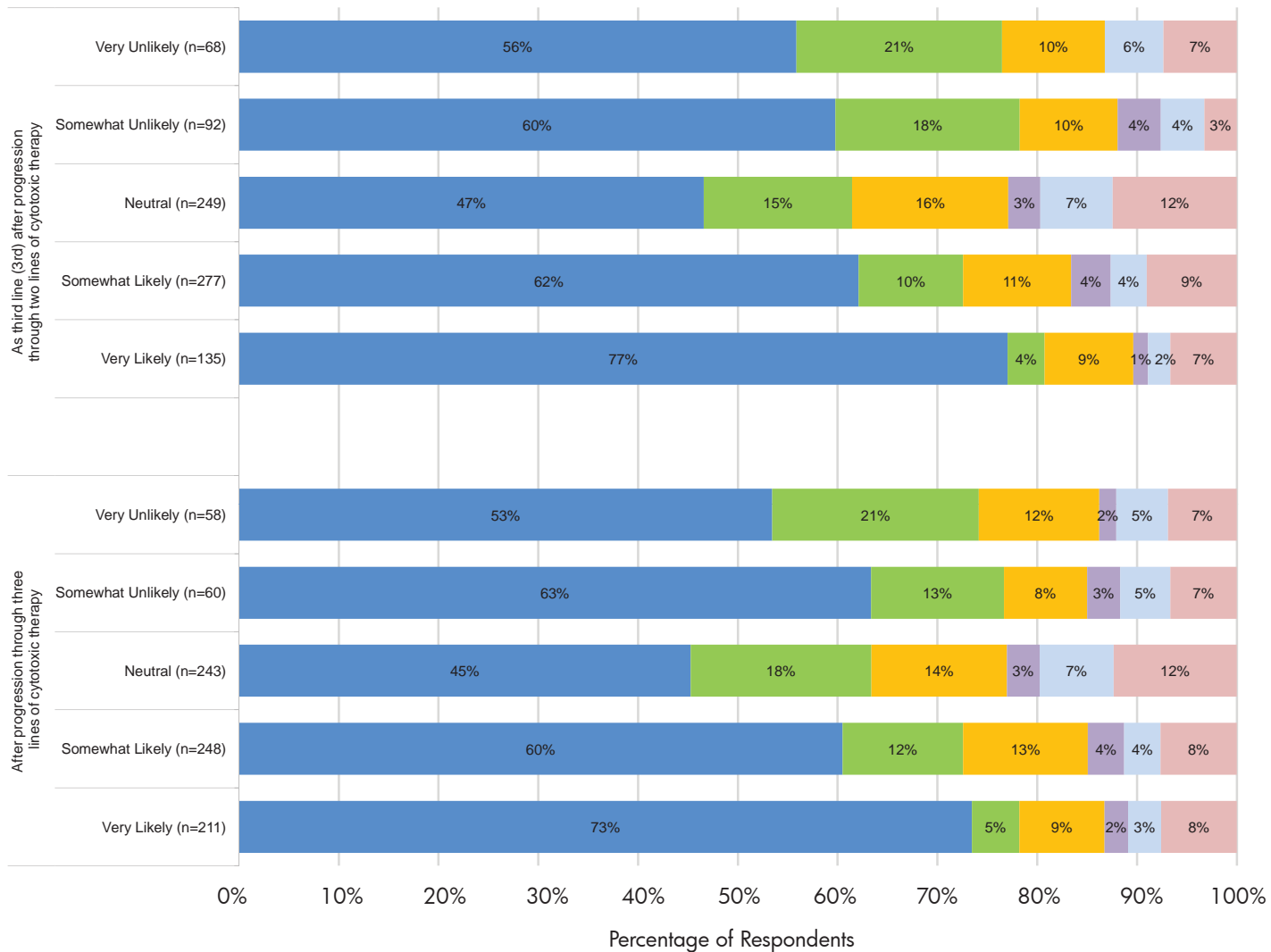
By Practice Setting



Q6. If an eribulin mesylate naïve patient with metastatic Breast Cancer requests eribulin mesylate therapy, how likely are you to administer eribulin mesylate therapy in each of the following clinical scenarios? Please use the following scale.

By Specialty†

- Medical Oncology
- Radiation Oncology
- Surgical Oncology
- Internal Medicine
- General Surgery
- Other



†Note: Percentages may not total 100 because of rounding

NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. NCCN Trends™ surveys are designed to reach targeted populations that can include several thousand clinicians as a potential sample size. NCCN can also provide analytics on existing NCCN Trends™ and clinician demographic data sets, allowing for greater insight into oncology practice patterns.

To commission an **NCCN Trends™** survey, to discuss analytic and data services, or to request information on other NCCN programs and resources, please contact:

Christine MacCracken, MSHEd, BSN
Director, Business Insights
215.690.0557
maccracken@nccn.org

National Comprehensive Cancer Network® (NCCN®)

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