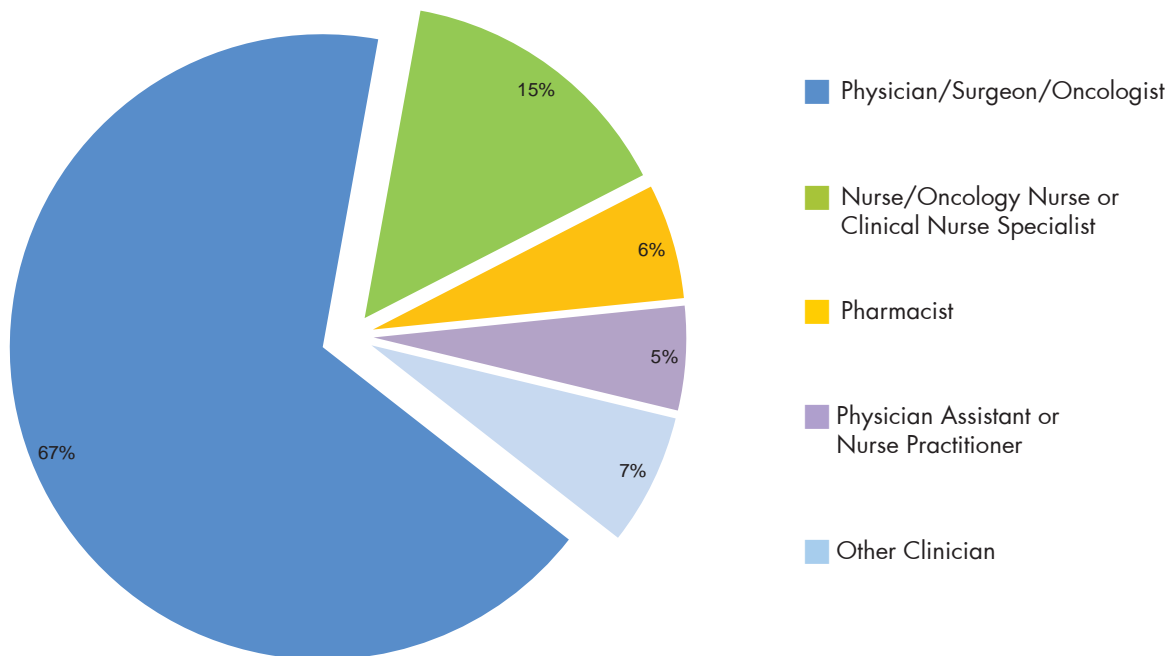


NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. This summary includes the results of the January 2014 NCCN Trends™ Survey, which focused on Metastatic Breast Cancer. This survey was sent to U.S. and International users of NCCN.org.

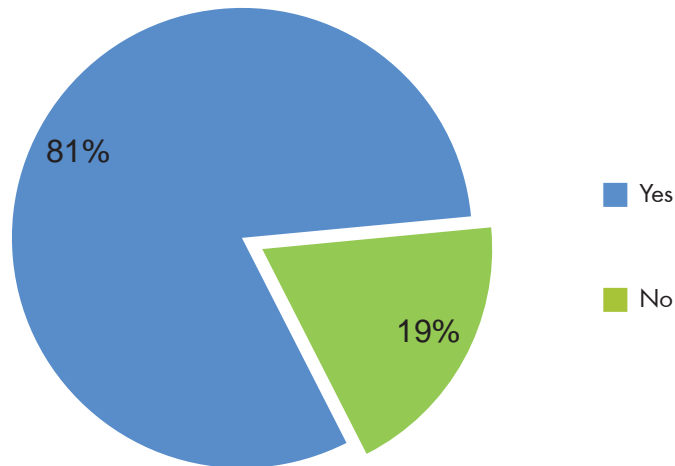
DEMOGRAPHICS

Distribution of Respondent Types (n = 1,413)

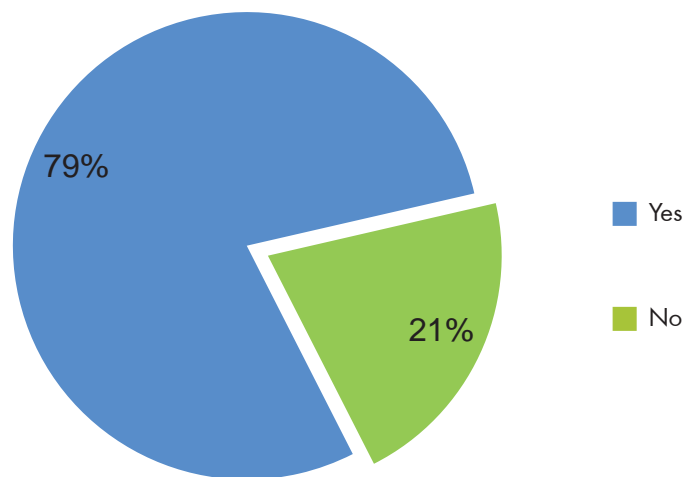


Note: Percentages may not total 100 because of rounding.

Q1. Do you treat patients with metastatic breast cancer? (n = 1,413)



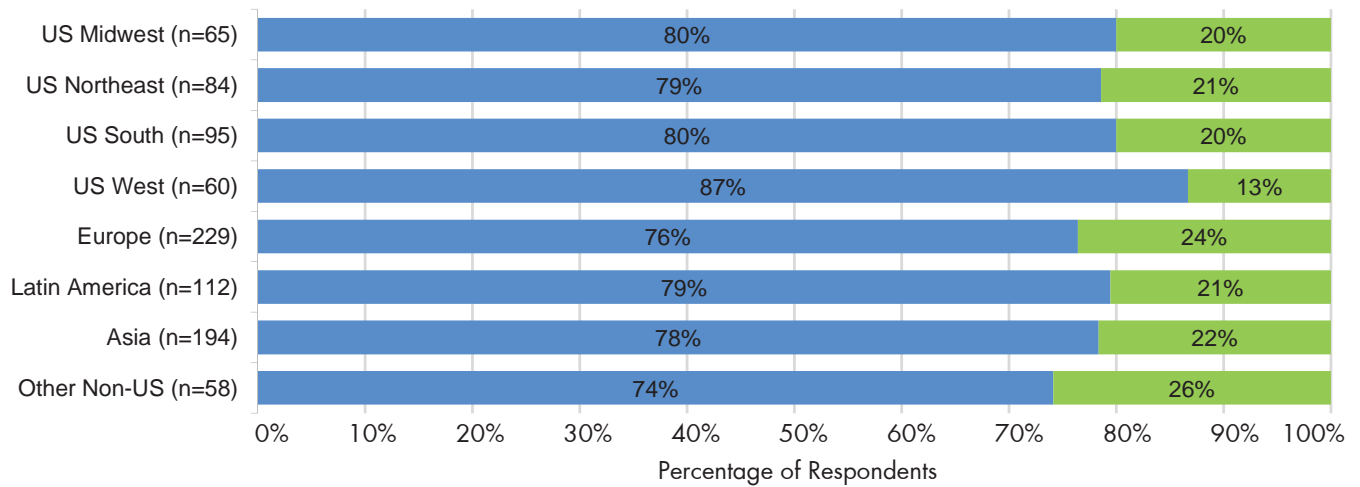
Q2. If you screen for Central Nervous System (CNS) lesions at the time of initial metastatic diagnosis, would you treat if you found asymptomatic CNS disease in the setting of stable systemic disease? (n = 897)



Q2. If you screen for Central Nervous System (CNS) lesions at the time of initial metastatic diagnosis, would you treat if you found asymptomatic CNS disease in the setting of stable systemic disease?

By Geography

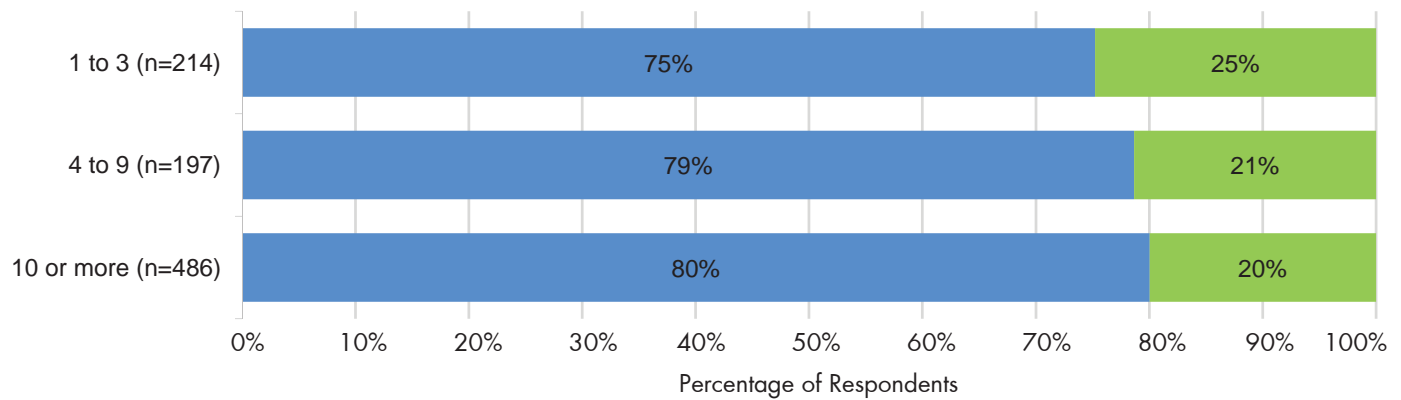
■ Yes
■ No



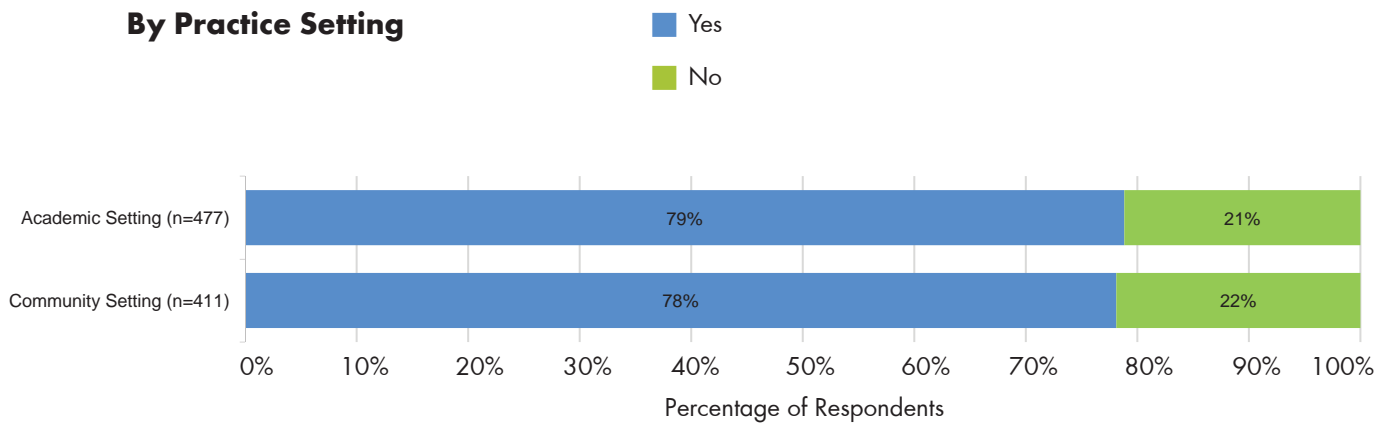
Q2. If you screen for Central Nervous System (CNS) lesions at the time of initial metastatic diagnosis, would you treat if you found asymptomatic CNS disease in the setting of stable systemic disease?

By Practice Size

■ Yes
■ No



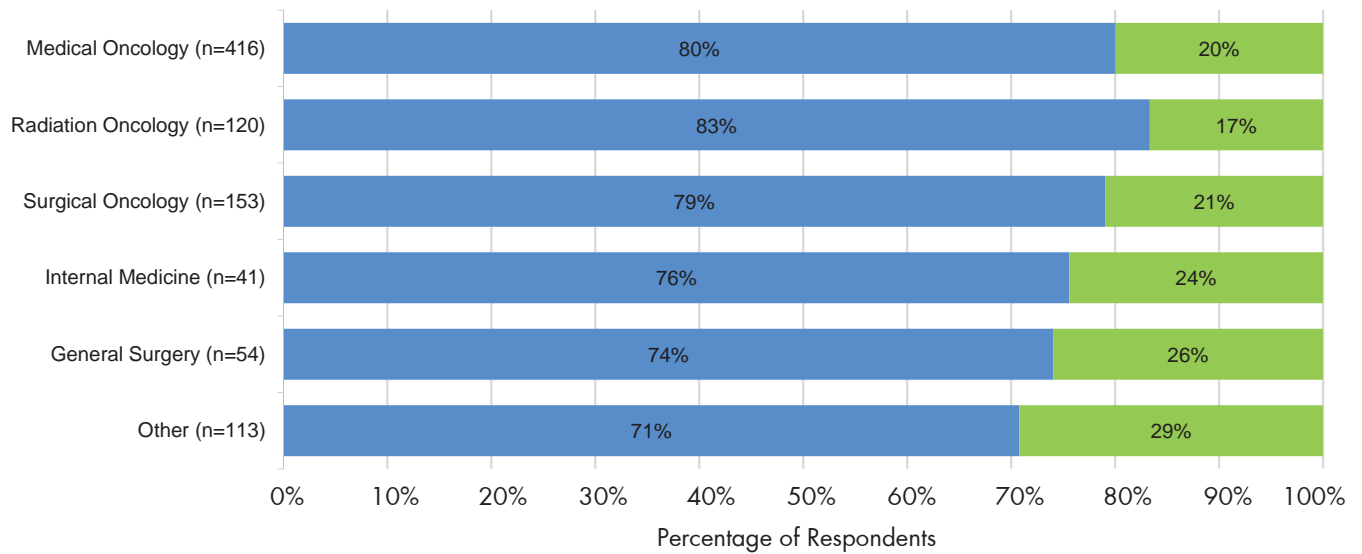
Q2. If you screen for Central Nervous System (CNS) lesions at the time of initial metastatic diagnosis, would you treat if you found asymptomatic CNS disease in the setting of stable systemic disease?



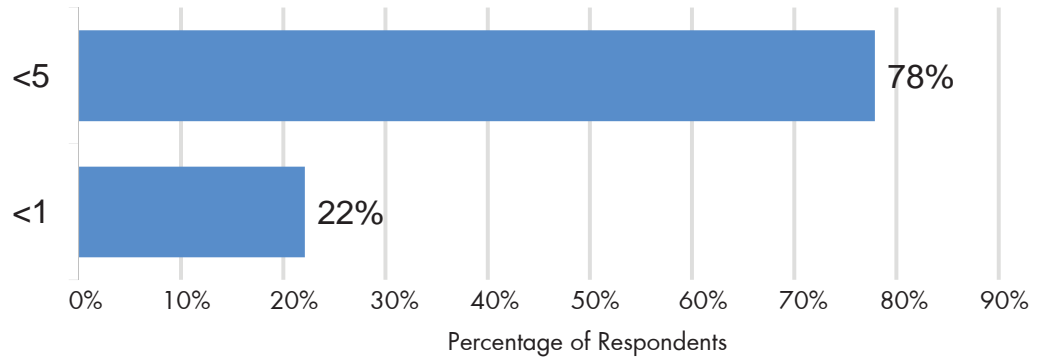
Q2. If you screen for Central Nervous System (CNS) lesions at the time of initial metastatic diagnosis, would you treat if you found asymptomatic CNS disease in the setting of stable systemic disease?

By Specialty

■ Yes
■ No

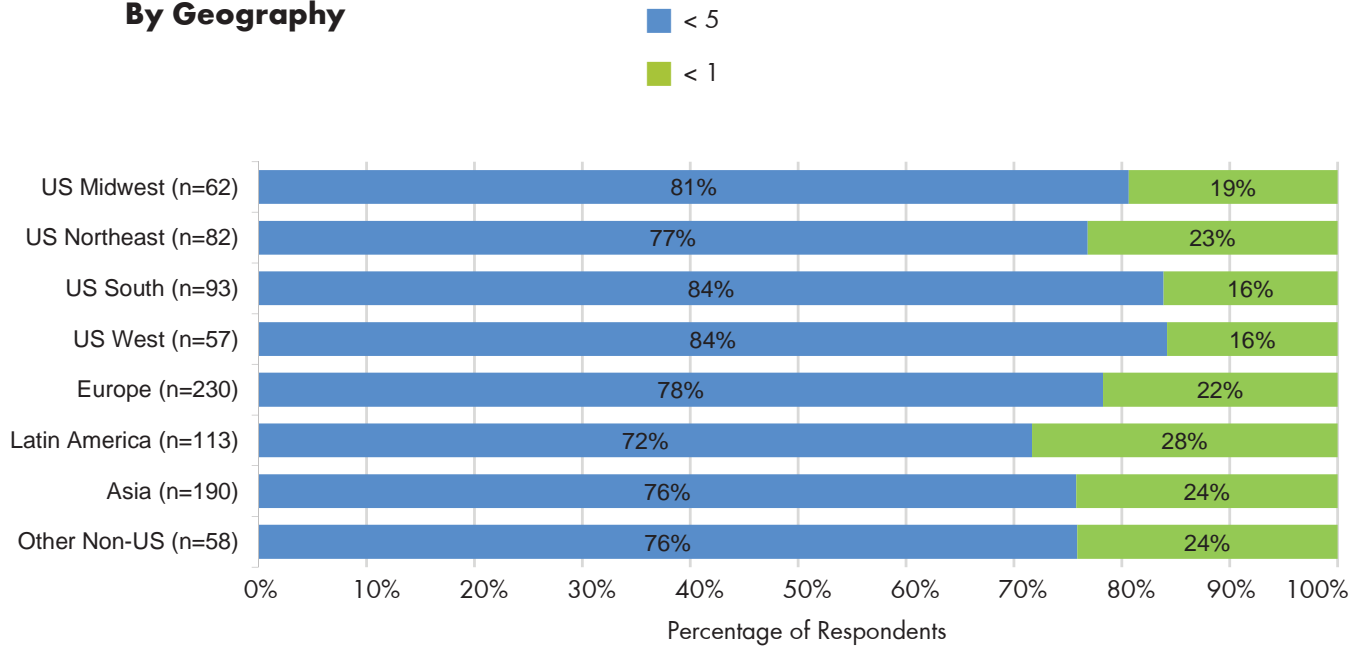


Q3. What is the maximum number of lesions you would treat with stereotactic radiosurgery (SRS)? (n = 885)

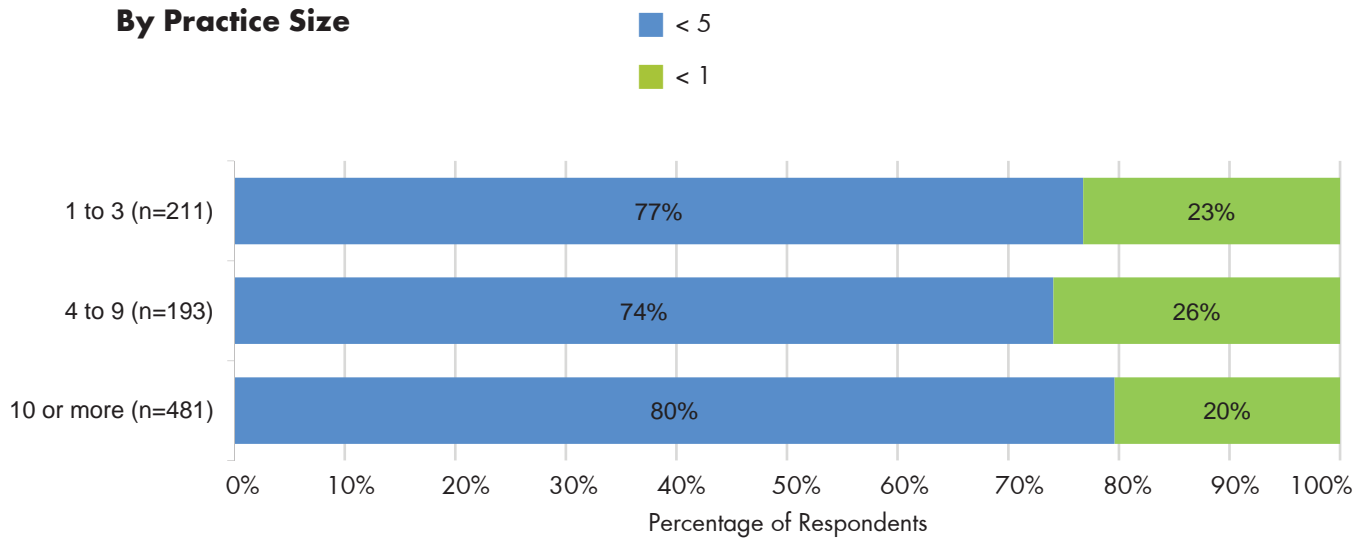


Q3. What is the maximum number of lesions you would treat with stereotactic radiosurgery (SRS)?

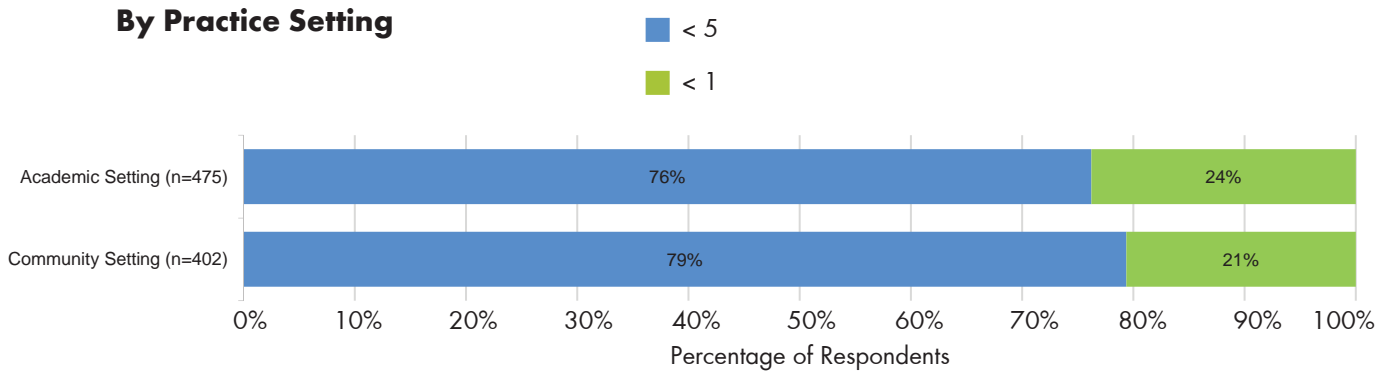
By Geography



Q3. What is the maximum number of lesions you would treat with stereotactic radiosurgery (SRS)?

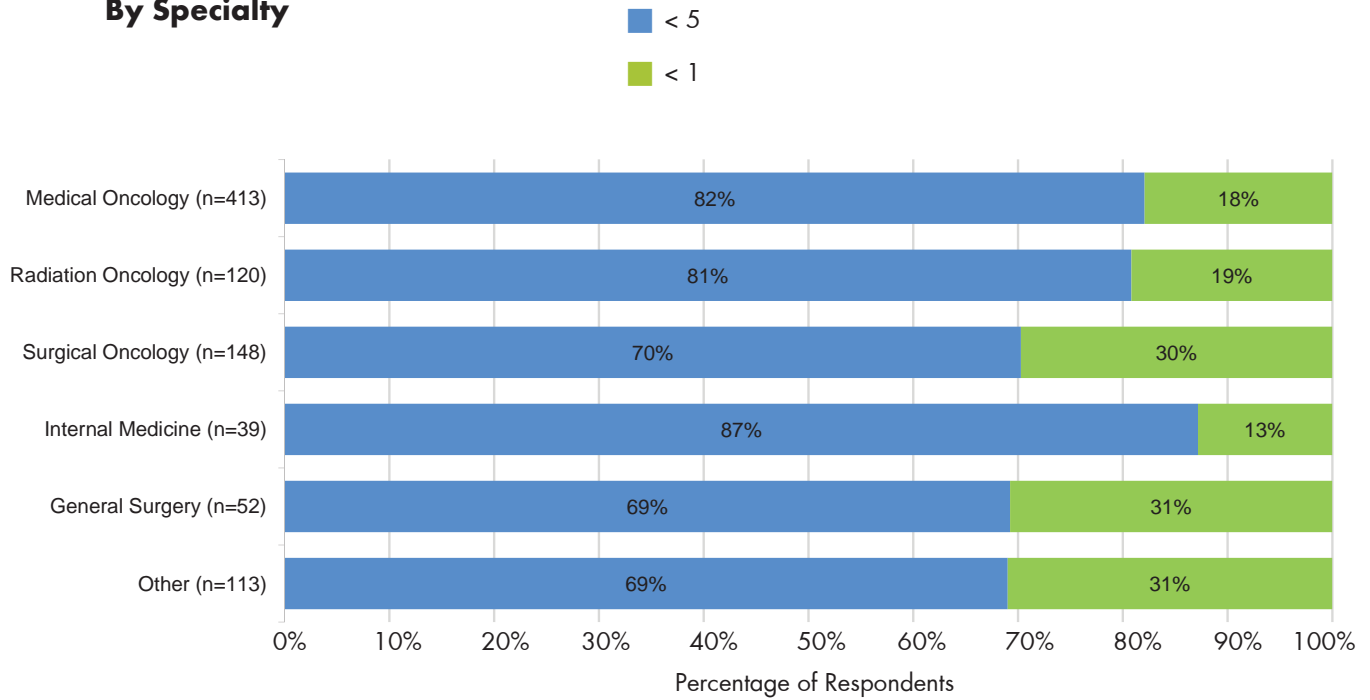


Q3. What is the maximum number of lesions you would treat with stereotactic radiosurgery (SRS)?

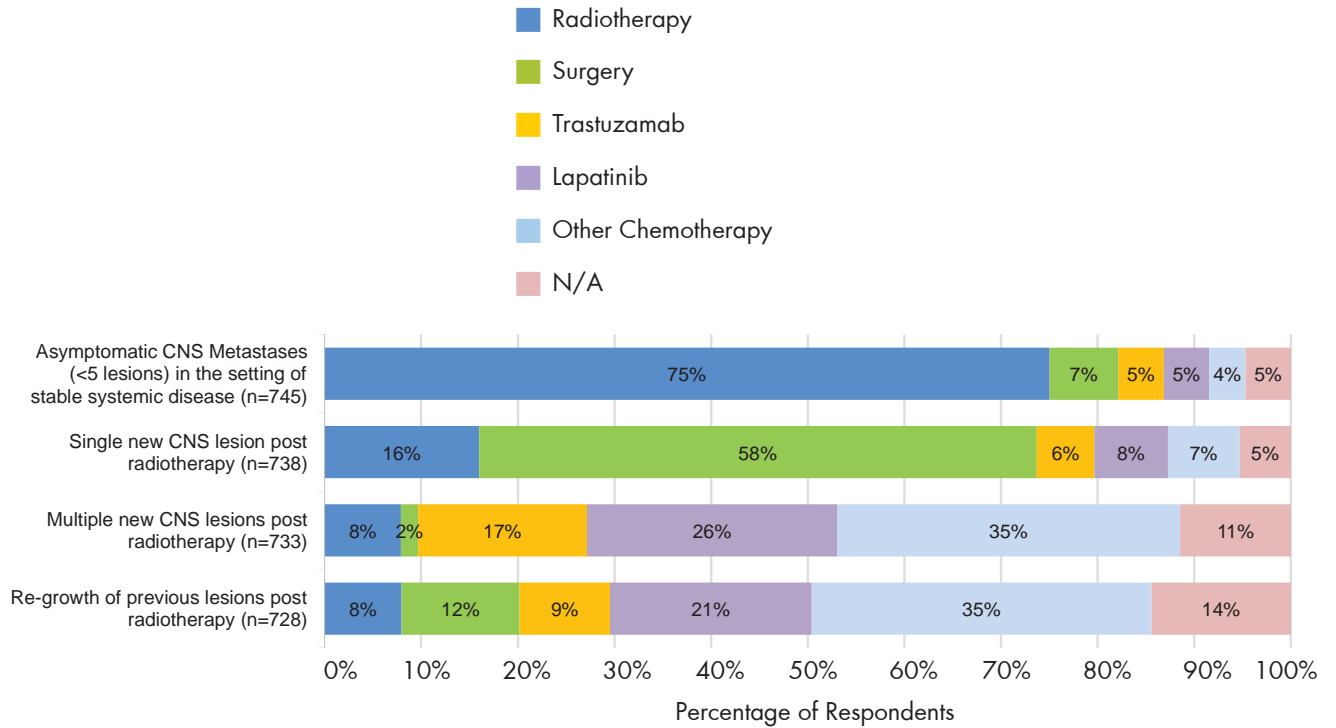


Q3. What is the maximum number of lesions you would treat with stereotactic radiosurgery (SRS)?

By Specialty



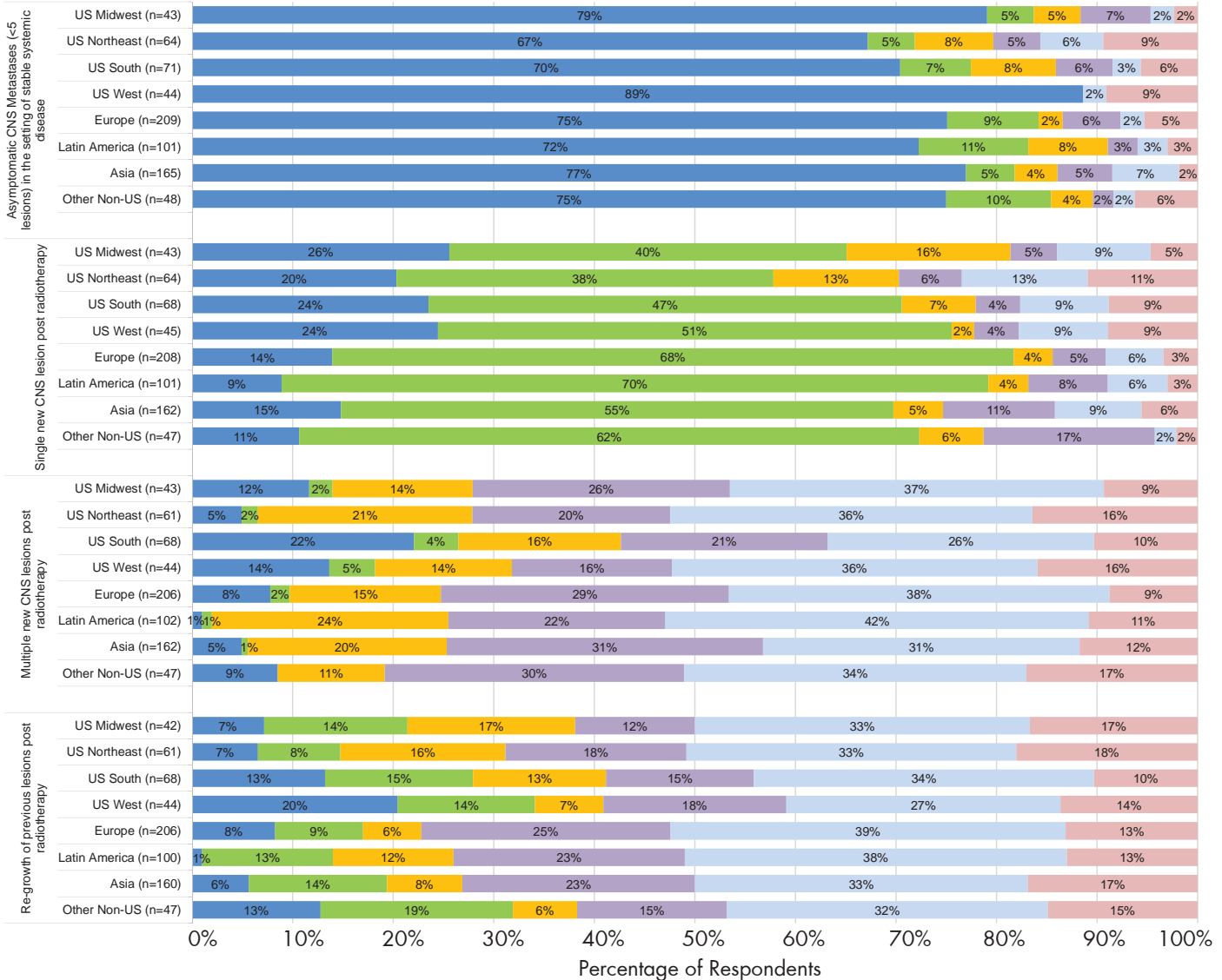
Q4. In each of the following scenarios of CNS Metastases, please select your preferred front-line regimen for treating each one. (Please select one per row)



Results: January 2014
METASTATIC BREAST CANCER

Q4. In each of the following scenarios of CNS Metastases, please select your preferred front-line regimen for treating each one. (Please select one per row)

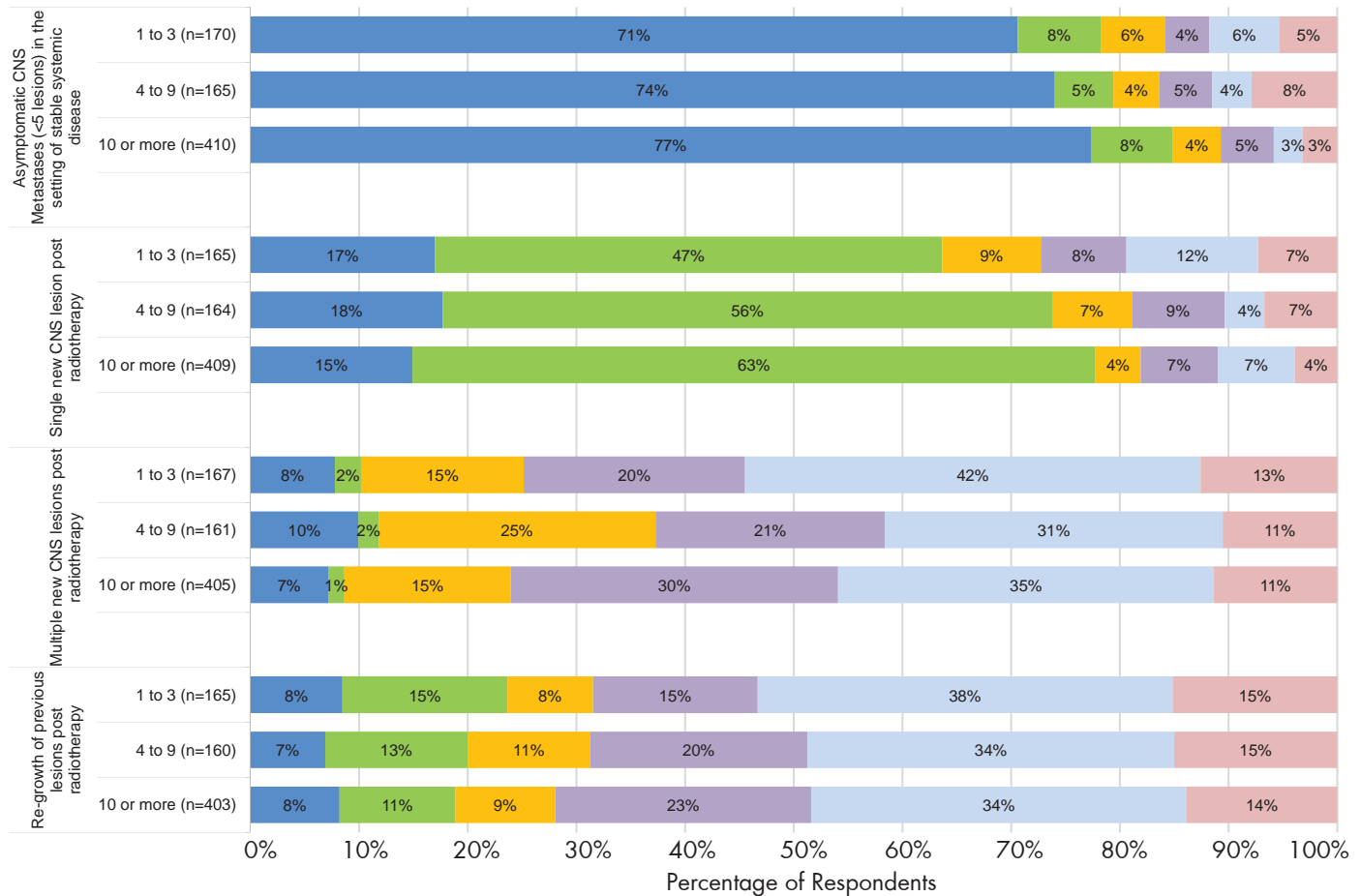
By Geography



Q4. In each of the following scenarios of CNS Metastases, please select your preferred front-line regimen for treating each one. (Please select one per row)

By Practice Size

- Radiotherapy
- Surgery
- Trastuzamab
- Lapatinib
- Other Chemotherapy
- N/A



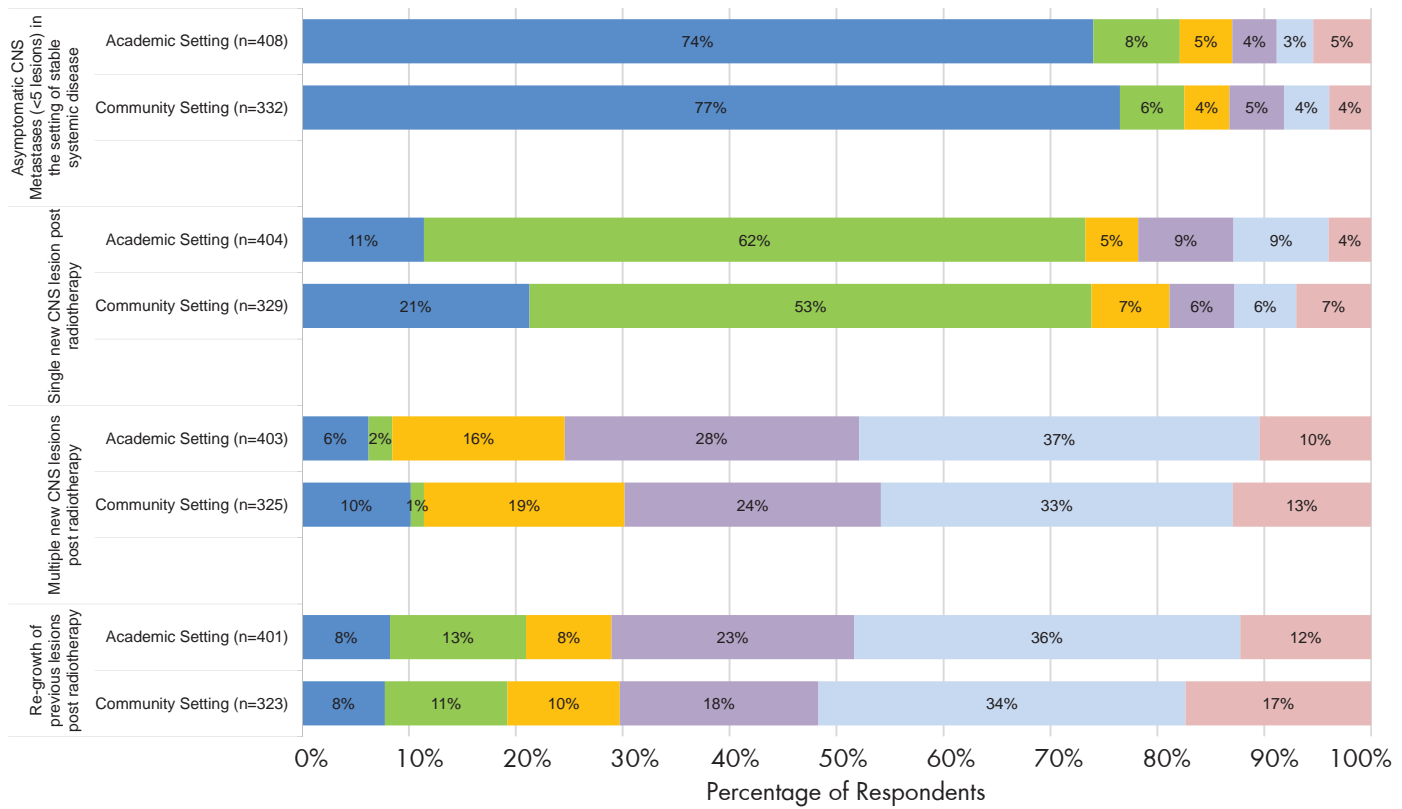
Results: January 2014

METASTATIC BREAST CANCER

Q4. In each of the following scenarios of CNS Metastases, please select your preferred front-line regimen for treating each one. (Please select one per row)

By Practice Setting

- Radiotherapy
- Surgery
- Trastuzamab
- Lapatinib
- Other Chemotherapy
- N/A

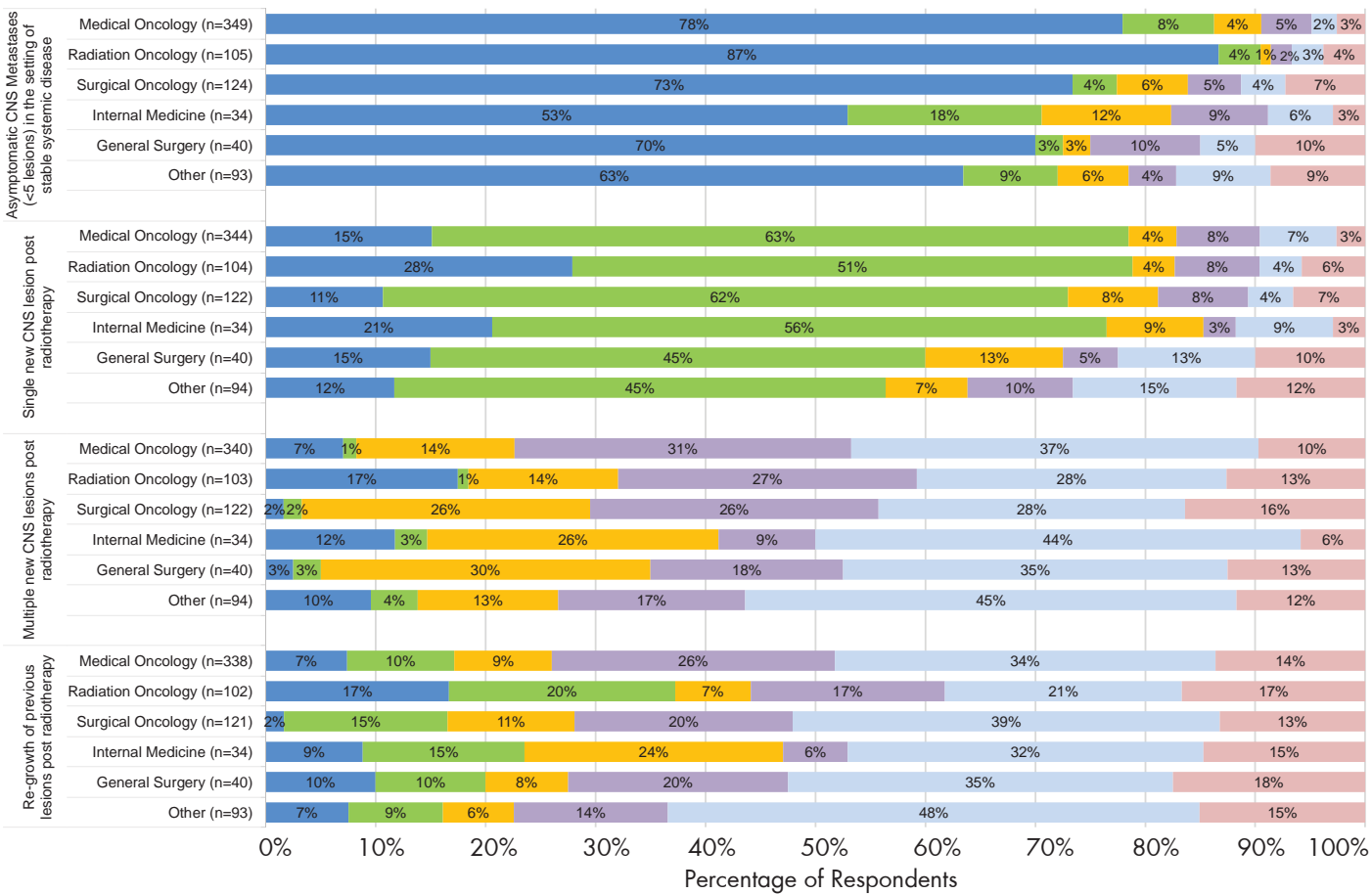


Results: January 2014
METASTATIC BREAST CANCER

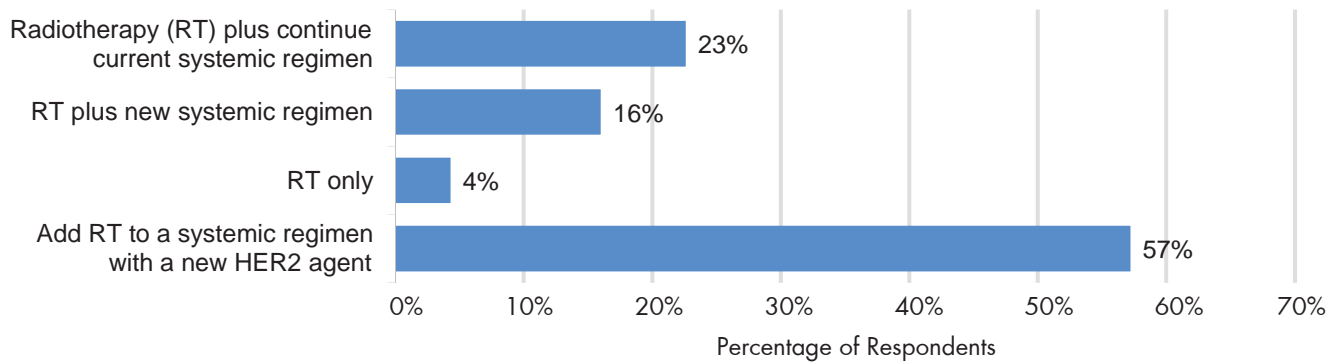
Q4. In each of the following scenarios of CNS Metastases, please select your preferred front-line regimen for treating each one. (Please select one per row)

By Specialty

- Radiotherapy
- Surgery
- Trastuzamab
- Lapatinib
- Other Chemotherapy
- N/A



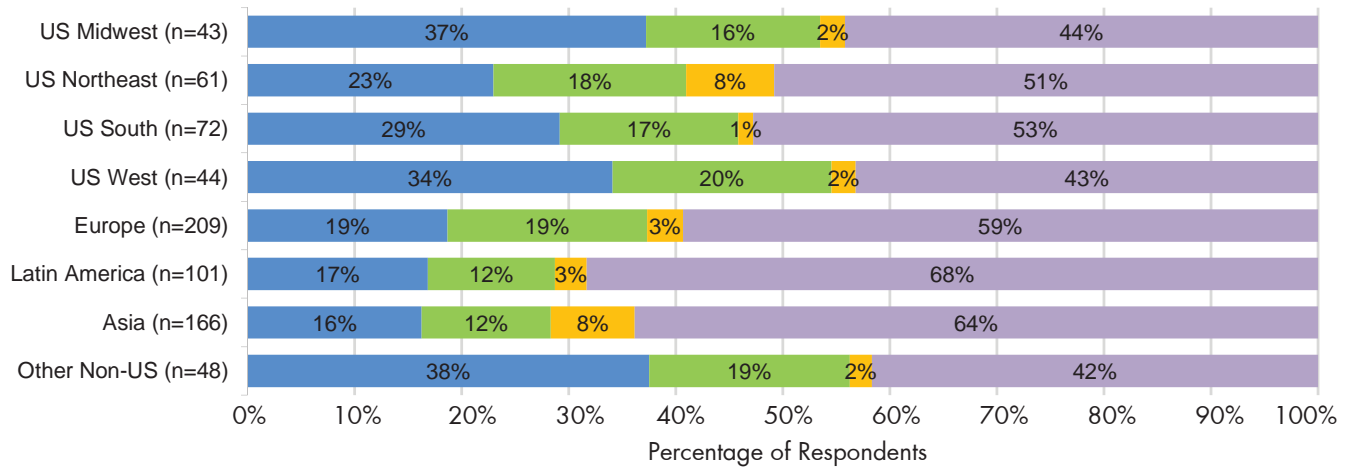
**Q5. If an HER2 positive breast cancer patient receiving system therapy develops brain metastases, what is the next step in treating the patient? (Select one)
(n = 745)**



Q5. If an HER2 positive breast cancer patient receiving system therapy develops brain metastases, what is the next step in treating the patient? (Select one)

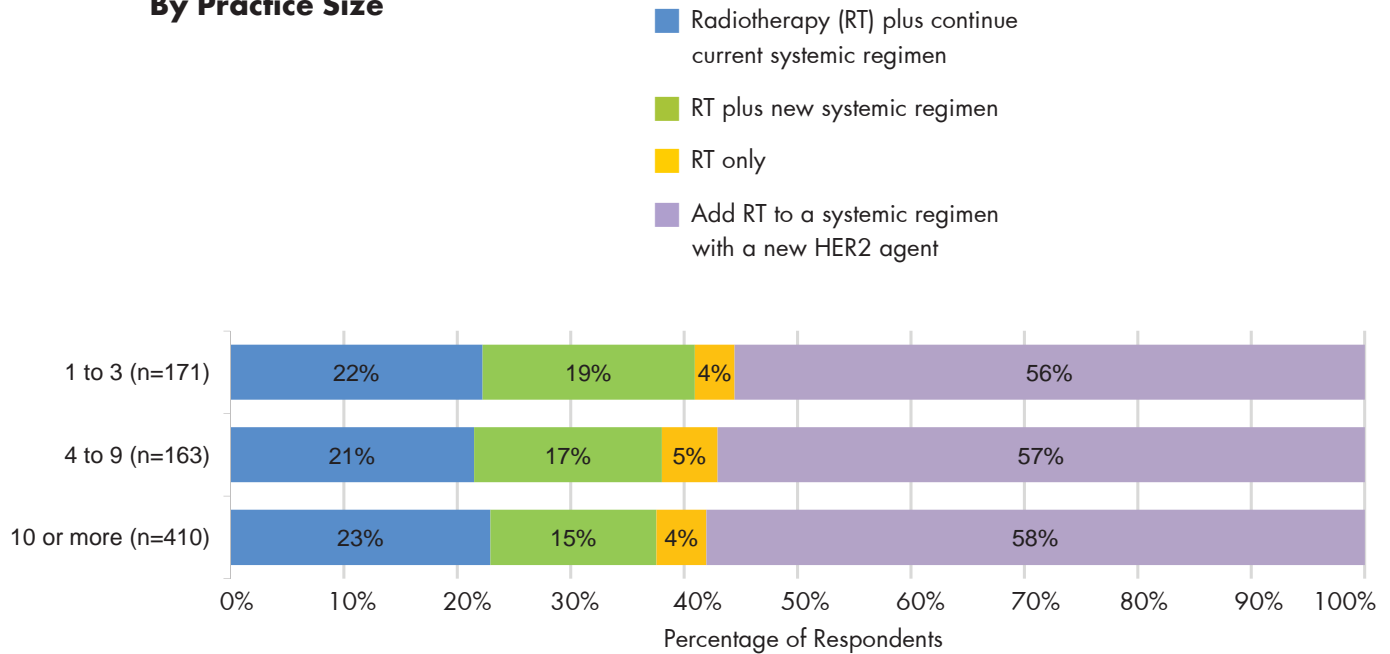
By Geography

- Radiotherapy (RT) plus continue current systemic regimen
- RT plus new systemic regimen
- RT only
- Add RT to a systemic regimen with a new HER2 agent



Q5. If an HER2 positive breast cancer patient receiving system therapy develops brain metastases, what is the next step in treating the patient? (Select one)

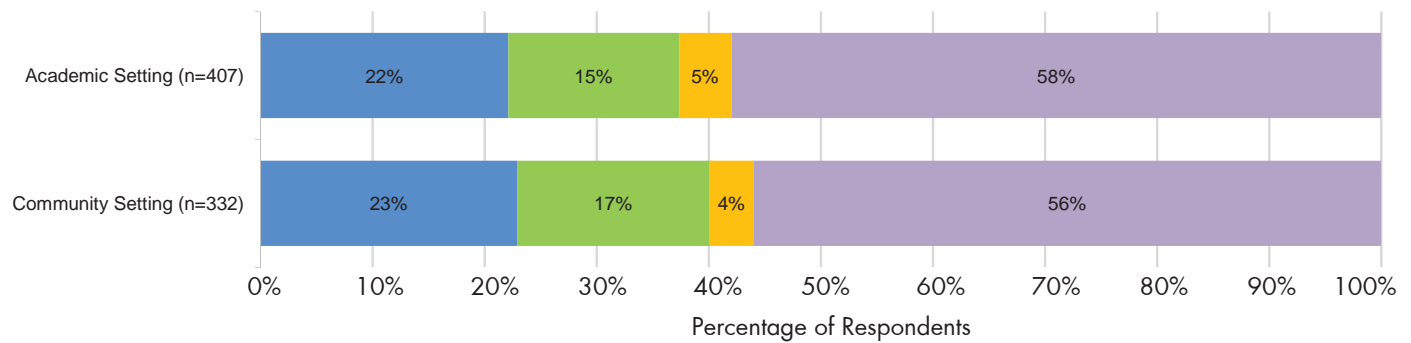
By Practice Size



Q5. If an HER2 positive breast cancer patient receiving system therapy develops brain metastases, what is the next step in treating the patient? (Select one)

By Practice Setting

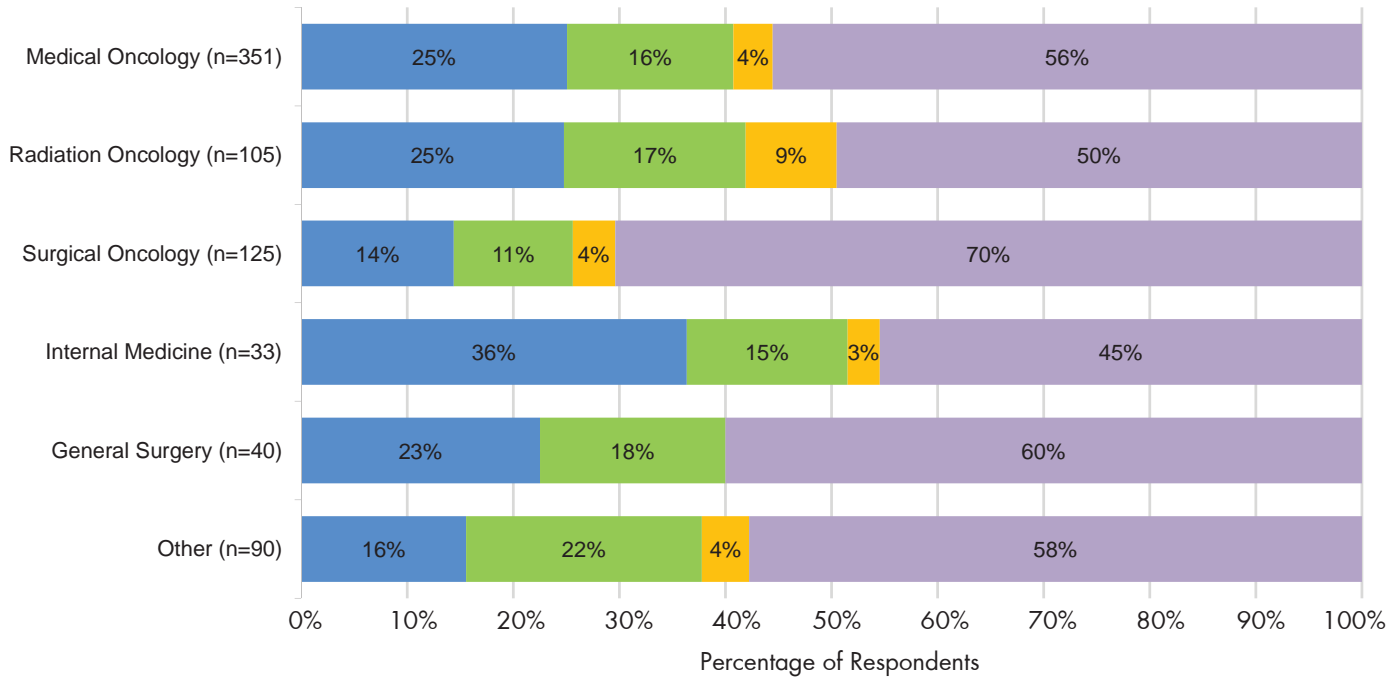
- Radiotherapy (RT) plus continue current systemic regimen
- RT plus new systemic regimen
- RT only
- Add RT to a systemic regimen with a new HER2 agent



Q5. If an HER2 positive breast cancer patient receiving system therapy develops brain metastases, what is the next step in treating the patient? (Select one)

By Specialty

- Radiotherapy (RT) plus continue current systemic regimen
- RT plus new systemic regimen
- RT only
- Add RT to a systemic regimen with a new HER2 agent



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:

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Senior Director, Business Insights
215.690.0557
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National Comprehensive Cancer Network® (NCCN®)

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