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Klara Geršak 1,2* Barbara Gazić 1,2 Andreja Klevišar Ivančič 1,2 Cvetka Grašič Kuhar 1,2 Stromal tumor infiltrating
lymphocyte scores in core needle
biopsy and its correlation to
complete pathological response
to neoadjuvant systemic therapy

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- → prospective observational study
- → early breast cancer patients stage IIA-IIIB
- → all histologic subtypes (except for luminal-A-like)
- → CNB samples stained with HE, we scored TILs expressed as the percentage of area of intratumoral stroma covered by lymphocytes
- → pCR was defined as complete remission in breast and axillary nodes
- we used univariate linear regression to calculate TIL/pCR correlation values
- → we also determined the optimal TIL cutoff value, which

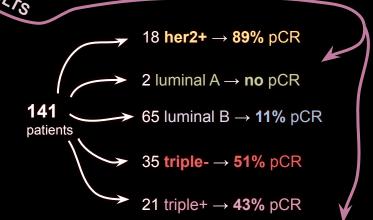
showed the best differentiation between the two outcome groups when used to segregate our patients into low TIL and high TIL subgroups -- for that, we performed a chi-square test using TIL cutoff values from 0 to 100 in increments of 1

CONCLUSIONS

AIM

higher TIL
scores correlate
with higher pCR
→ comparable
results to
literature →
our TIL scoring
quality seems
good

to **prospectively** assess **TIL** and **pCR** correlation on **core needle biopsy (CNB)** samples in patients before NAST



pCR group: mean and stdev 28.12(±26.15), median 20 no-pCR group: mean and stdev 10.33(±15.12), median 5

- → p-value of <0.001 and a standard error of 0.0017
- → the optimal TIL cutoff value in our patients was 10 (p 0.00003)