**INTRODUCTION**

Breast Cancer (BC) is the most common cancer in women, with an estimated 464,000 new cases diagnosed in 2012 in Europe (29% of all female cancers). The number of patients with advanced disease with metastasis, and it is estimated that around 20-30% of these presenting with early or locally breast cancer develop progressive disease at a later stage.

**APPLICATIONS**

Ribociclib is a novel, selective, oral cyclin-dependent kinase 4/6 inhibitor. It is approved for the treatment of hormone receptor positive (HR+) HER2 negative advanced breast cancer after progression on endocrine treatment. The most important safety concern is lymphopenia.

**METHODS**

This study is an interventional, hybrid, non-interventional study of a Portuguese cohort of adult women with HR+/HER2- advanced or metastatic breast cancer. All patients were diagnosed with ABC between January 2019 and January 2023, with retrospective and prospective secondary data collection from electronic medical records (EMR) of the participant hospitals.

**RESULTS**

- **Patient characteristics**: A total of 202 patients diagnosed with ABC were considered eligible for the study. The median follow-up duration was 11.9 months (minimum 0.3 months).
- **Treatment lines**: Regarding ribociclib treatment lines, 207 (76.7%) received ribociclib in first-line (1L), as monotherapy or in combination therapy. Of note, 282 patients diagnosed with ABC were considered eligible for the study, of which 207 (76.7%) received ribociclib in first-line (1L), 20 (7.6%) in second-line (2L), and 24 (9.2%) as de novo treatment.
- **Safety**: Of note, 9 patients (3.4%) experienced grade ≥3 AEs after initiating treatment with ribociclib.
- **Survival rates**: The 12-month therapy maintenance rate was 0.650, there is an estimated 35.0% probability of disease progression or death during the first year of treatment.
- **PFS**: The 12-month progression-free survival (PFS) rate was 0.716.
- **Progression-free survival**: A total of 207 (76.7%) patients received ribociclib in first-line (1L), as monotherapy or in combination therapy. Of note, 282 patients diagnosed with ABC were considered eligible for the study, of which 207 (76.7%) received ribociclib in first-line (1L), 20 (7.6%) in second-line (2L), and 24 (9.2%) as de novo treatment.
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