

Raccolta informazioni su Gruppi di Ricerca- DiSCOG

CAPOGRUPPO

Nominativo	Pierfranco Conte
Ruolo Universitario	P.O.
SSD	Med 06
Ruolo ospedaliero (se presente)	Direttore UOC
Sezione di appartenenza	
Unità Operativa Semplice (se presente)	UOC Oncologia Medica 2
Unita' Operativa Complessa	

LINEE DI RICERCA (solo linee di ricerca attuali; se presenti piu' linee di ricerca indicarle con un numero e fare riferimento al numero per tutte le informazioni sottostanti, quando appropriato)

- 1) Terapia adiuvante del carcinoma mammario HER2+
- 2) Caratterizzazione molecolare e trattamenti multimodali del carcinoma mammario avanzato
- 3) Terapia intraperitoneale del carcinoma ovarico con chemioipertermia o immunoterapia cellulare adottiva

AFFERENTI AL GRUPPO DI RICERCA

1) PERSONALE UNIVERSITARIO (PROFESSORI E RICERCATORI)

Nominativo	Ruolo (SSD)	Dipartimento di afferenza
Guarneri Valentina	RU Med06	DiSCOG
Rossi Carlo Riccardo	PO Med18	DiSCOG
Nitti Donato	PO Med18	DiSCOG
Amadori Alberto	PO Med04	DiSCOG

2) PERSONALE NON STRUTTURATO (DOTTORANDI, SPECIALIZZANDI, ASSEGNIсти, BORSISTI)

Nominativo	Ruolo ** per gli specializzandi e dottorandi specificare la scuola di appartenenza	Dipartimento di afferenza
Soldà Caterina	Specializzanda Oncologia	DiSCOG
Rumanò Laura	Specializzanda Oncologia	DiSCOG
Giarratano Tommaso	Specializzando Oncologia	DiSCOG
Campana Luca	Contrattista	IOV

3) PERSONALE TECNICO DI LABORATORIO STRUTTURATO

Nominativo	Livello	Dipartimento di afferenza

4) PERSONALE DI RICERCA APPARTENENTE AD ALTRE AMMINISTRAZIONI (IOV, AZIENDA OSPEDALIERA, VIMM, ETC)

Nominativo	Ruolo	Ente di appartenenza
Dieci Maria Vittoria	Dottoranda	Institut Gustave Roussy
Falci Cristina	Dirigente medico	IOV
Ghiotto Cristina	Dirigente medico	IOV
Nicoletto Ornella	Dirigente Medico	IOV
Bozza Fernando	Dirigente medico	IOV
De Salvo Gianluca	Dirigente medico	IOV

Sommariva Antonio	Dirigente medico	IOV
Orvieto Enrico	Dirigente medico	Az Ospedaliera Padova
André Fabrice	Associate Professor	Institut Gustave Roussy

COLLABORAZIONI NAZIONALI E INTERNAZIONALI SOSTENUTI DA: PROGETTI DI RICERCA/PUBBLICAZIONI/SCAMBI DI PERSONALE (ultimi 5 anni, sostanziate da piu' pubblicazioni e/o progetti di ricerca in comune)

ShortHER Italian network

Il prof. Pierfranco Conte è Principal Investigator dello studio italiano multicentrico randomizzato di fase 3 ShortHER, che confronta due diverse schedule di Trastuzumab adiuvante associato a chemioterapia per le pazienti con carcinoma mammario HER2-positivo (NCT00629278).

After-6 Italian Collaborative Group

Phase III trial of observation versus six courses of paclitaxel in patients with advanced epithelial ovarian cancer in complete response after six courses of paclitaxel/platinum-based chemotherapy: final results of the After-6 protocol 1.

Pecorelli S, Favalli G, Gadducci A, Katsaros D, Panici PB, Carpi A, Scambia G, Ballardini M, Nanni O, Conte P; After 6 Italian Cooperative Group.
J Clin Oncol. 2009 Oct 1;27(28):4642-8.

Weekly low-dose paclitaxel as maintenance treatment in patients with advanced ovarian cancer who had microscopic residual disease at second-look surgery after 6 cycles of paclitaxel/platinum-based chemotherapy: results of an open noncomparative phase 2 multicenter Italian study (After-6 Protocol 2). Gadducci A, Katsaros D, Zola P, Scambia G, Ballardini M, Pasquini E, Fertonani C, Maggi L, Pecorelli S, Conte PF; Members of the After-6 Italian Cooperative Group.

Int J Gynecol Cancer. 2009 May;19(4):615-9.

INSERM U981, Institut Gustave Roussy, Villejuif (France): prof. Fabrice André.

- PROGETTI INERENTI ALLE LINEE DI RICERCA:

Valore prognostico del cambio del livello di espressione dei recettori estrogenici tra tumore primitivo e metastasi (in corso).

Whole exome sequencing di carcinomi mammari a istotipo raro (in corso).

- SCAMBI DI PERSONALE E PUBBLICAZIONI INERENTI ALLE LINEE DI RICERCA:

Maria Vittoria Dieci, MD. Diplome Universitaire en Recherche Translationnelle et Clinique en Cancerologie. (maggio 2012 – ottobre 2013)

Fibroblast growth factor receptor inhibitors as a cancer treatment: from a biologic rationale to medical perspectives.

Dieci MV, Arnedos M, Andre F, Soria JC.

Cancer Discov. 2013 Mar;3(3):264-79

Landscape and evolution of therapeutic research for breast cancer patients.

Dogan S, Dieci MV, Goubar A, Arnedos M, Delaloge S, Andre F.

Breast Cancer Res Treat. 2013 Feb;138(1):319-24.

MD Anderson Cancer Center, Houston, Texas (USA): Prof. Gabriel N. Hortobagyi.

- PUBBLICAZIONI IN COMUNE INERENTI ALLE LINEE DI RICERCA (ultimi 5 anni):

Interpreting cancer biology: refining our therapeutic algorithm in breast cancer.

Hortobágyi G, Conte P.

Oncologist. 2013;18(4):e8-e10.

Bevacizumab treatment for advanced breast cancer.

Alvarez RH, Guarneri V, Icli F, Johnston S, Khayat D, Loibl S, Martin M, Zielinski C, Conte P, Hortobagyi GN. Oncologist. 2011;16(12):1684-97.

Q-TWiST analysis of ixabepilone in combination with capecitabine on quality of life in patients with metastatic breast cancer.

Corey-Lisle PK, Peck R, Mukhopadhyay P, Orsini L, Safikhani S, Bell JA, Hortobagyi G, Roche H, Conte P, Revicki DA. Cancer. 2012 Jan 15;118(2):461-8.

Ixabepilone plus capecitabine in metastatic breast cancer patients with reduced performance status previously treated with anthracyclines and taxanes: a pooled analysis by performance status of efficacy and safety data from 2 phase III studies.

Roché H, Conte P, Perez EA, Sparano JA, Xu B, Jassem J, Peck R, Kelleher T, Hortobagyi GN. Breast Cancer Res Treat. 2011

Frequency and risk factors associated with osteonecrosis of the jaw in cancer patients treated with intravenous bisphosphonates.

Hoff AO, Toth BB, Altundag K, Johnson MM, Warneke CL, Hu M, Nooka A, Sayegh G, Guarneri V, Desrouleaux K, Cui J, Adamus A, Gagel RF, Hortobagyi GN. J Bone Miner Res. 2008 Jun;23(6):826-36.

PARTECIPAZIONE A PROGETTI INTERNAZIONALI (ultimi 5 anni; indicare per ogni linea di ricerca)

Partecipazione ai seguenti progetti/studi clinici internazionali:

LINEA DI RICERCA 2

-Progetti Internazionali:

Valore prognostico del cambio del livello di espressione dei recettori estrogenici tra tumore primitivo e metastasi, in collaborazione con l’Institut Gustave Roussy (Villejuif, France), IN CORSO

Whole exome sequencing di carcinomi mammari a istotipo raro, in collaborazione con l’Institut Gustave Roussy (Villejuif, France), IN CORSO

Ricaratterizzazione biologica della malattia mammaria metastatica (Penn State University), anno 2010 (dati presentati al San Antonio Breast Cancer Symposium 2010)

FINANZIAMENTI (ultimi 5 anni; indicare per ogni linea di ricerca)

LINEA DI RICERCA 1

2007-2009 “Short-HER: multicentric randomised phase III trial of adjuvant chemotherapy plus 3 vs 12 months of trastuzumab in breast cancer patients with HER2 positive disease” Agenzia Italiana del farmaco (AIFA) - Ministero della Salute.

LINEA DI RICERCA 2

2009-2012 “Treatment optimization of HER2 positive breast cancer” (RF-2009-1472600) Bando RICERCA FINALIZZATA 2009 - Ministero della Salute.

LINEA DI RICERCA 3

In attivazione studi clinici prospettici sponsorizzati per la parte clinica da ABIOGEN e dal Gruppo Cooperatore MITO

PUBBLICAZIONI (ultimi 5 anni; solo pubblicazioni ISI e non abstract; indicare per ogni linea di ricerca)

LINEA DI RICERCA 1

International expert consensus on primary systemic therapy in the management of early breast cancer: highlights of the Fourth Symposium on Primary Systemic Therapy in the Management of Operable Breast Cancer, Cremona, Italy (2010).

Berruti A, Generali D, Kaufmann M, Puztai L, Curigliano G, Aglietta M, Gianni L, Miller WR, Untch M, Sotiriou C, Daidone M, Conte P, Kennedy D, Damia G, Petronini P, Di Cosimo S, Bruzzi P, Dowsett M, Desmedt C, Mansel RE, Olivetti L, Tondini C, Sapino A, Fenaroli P, Tortora G, Thorne H, Bertolini F, Ferrozzini F, Danova M, Tagliabue E, de Azambuja E, Makris A, Tampellini M, Dontu G, Van't Veer L, Harris AL, Fox SB, Dogliotti L, Bottini A.

J Natl Cancer Inst Monogr. 2011;2011(43):147-51.

Anti-HER2 neoadjuvant and adjuvant therapies in HER2 positive breast cancer.

Guarneri V, Barbieri E, Dieci MV, Piacentini F, Conte P.

Cancer Treat Rev. 2010 Nov;36 Suppl 3:S62-6.

Multicentric, randomized phase III trial of two different adjuvant chemotherapy regimens plus three versus twelve months of trastuzumab in patients with HER2- positive breast cancer (Short-HER Trial; NCT00629278).

Guarneri V, Frassoldati A, Bruzzi P, D'Amico R, Belfiglio M, Molino A, Bertetto O, Cascinu S, Cognetti F, Di Leo A, Pronzato P, Crinó L, Agostara B, Conte P.

Clin Breast Cancer. 2008 Oct;8(5):453-6.

2) LINEA DI RICERCA 2

A randomized, phase II, three-arm study of two schedules of ixabepilone or paclitaxel plus bevacizumab as first-line therapy for metastatic breast cancer.

Rugo HS, Campone M, Amadori D, Aldrighetti D, Conte P, Wardley A, Villanueva C, Melisko M, McHenry MB, Liu D, Lee F, Pivot X.

Breast Cancer Res Treat. 2013 May 7.

Discordance in receptor status between primary and recurrent breast cancer has a prognostic impact: a single-Institution analysis.

Dieci MV, Barbieri E, Piacentini F, Ficarra G, Bettelli S, Dominici M, Conte PF, Guarneri V.

Ann Oncol. 2013 Jan;24(1):101-8.

The next generation of biologic agents: therapeutic role in relation to existing therapies in metastatic breast cancer.

Conte P, Guarneri V.

Clin Breast Cancer. 2012 Jun;12(3):157-66.

Predictors of human epidermal growth factor receptor 2 fluorescence in-situ hybridisation amplification in immunohistochemistry score 2+ infiltrating breast cancer: a single institution analysis.

Dieci MV, Barbieri E, Bettelli S, Piacentini F, Omarini C, Ficarra G, Balduzzi S, Dominici M, Conte P, Guarneri V.

J Clin Pathol. 2012 Jun;65(6):503-6.

The sequential use of endocrine treatment for advanced breast cancer: where are we?

Barrios C, Forbes JF, Jonat W, Conte P, Gradishar W, Buzdar A, Gelmon K, Gnant M, Bonneterre J, Toi M, Hudis C, Robertson JF.

Ann Oncol. 2012 Jun;23(6):1378-86.

Pertuzumab monotherapy after trastuzumab-based treatment and subsequent reintroduction of trastuzumab: activity and tolerability in patients with advanced human epidermal growth factor receptor 2-positive breast cancer.

Cortés J, Fumoleau P, Bianchi GV, Petrella TM, Gelmon K, Pivot X, Verma S, Albanell J, Conte P, Lluch A,

Salvagni S, Servent V, Gianni L, Scaltriti M, Ross GA, Dixon J, Szado T, Baselga J.
J Clin Oncol. 2012 May 10;30(14):1594-600.

Enhancing intracellular taxane delivery: current role and perspectives of nanoparticle albumin-bound paclitaxel in the treatment of advanced breast cancer.

Guarneri V, Dieci MV, Conte P.
Expert Opin Pharmacother. 2012 Feb;13(3):395-406.

Triple negative breast cancer: proposals for a pragmatic definition and implications for patient management and trial design.

Eiermann W, Bergh J, Cardoso F, Conte P, Crown J, Curtin NJ, Gligorov J, Gusterson B, Joensuu H, Linderholm BK, Martin M, Penault-Llorca F, Pestalozzi BC, Razis E, Sotiriou C, Tjulandin S, Viale G.
Breast. 2012 Feb;21(1):20-6.

Q-TWiST analysis of ixabepilone in combination with capecitabine on quality of life in patients with metastatic breast cancer.

Corey-Lisle PK, Peck R, Mukhopadhyay P, Orsini L, Safikhani S, Bell JA, Hortobagyi G, Roche H, Conte P, Revicki DA.
Cancer. 2012 Jan 15;118(2):461-8.

Primary pulmonary cancer colliding with metastatic breast carcinoma: hitherto unreported cases of cancer-to-cancer metastasis focusing on clinical implications.

Piacentini F, Rossi G, Casali C, Cadioli A, Barbieri E, Guarneri V.
Lung Cancer. 2011 Oct;74(1):145-8.

Bevacizumab treatment for advanced breast cancer.

Alvarez RH, Guarneri V, Icli F, Johnston S, Khayat D, Loibl S, Martin M, Zielinski C, Conte P, Hortobagyi GN.
Oncologist. 2011;16(12):1684-97.

Ixabepilone plus capecitabine in metastatic breast cancer patients with reduced performance status previously treated with anthracyclines and taxanes: a pooled analysis by performance status of efficacy and safety data from 2 phase III studies.

Roché H, Conte P, Perez EA, Sparano JA, Xu B, Jassem J, Peck R, Kelleher T, Hortobagyi GN. Breast Cancer Res Treat. 2011 Feb;125(3):755-65.

Randomized phase III trial of ixabepilone plus capecitabine versus capecitabine in patients with metastatic breast cancer previously treated with an anthracycline and a taxane.

Sparano JA, Vrdoljak E, Rixe O, Xu B, Manikhas A, Medina C, Da Costa SC, Ro J, Rubio G, Rondon M, Perez Manga G, Peck R, Poulart V, Conte P.
J Clin Oncol. 2010 Jul 10;28(20):3256-63.

Bevacizumab and osteonecrosis of the jaw: incidence and association with bisphosphonate therapy in three large prospective trials in advanced breast cancer.

Guarneri V, Miles D, Robert N, Diéras V, Glaspy J, Smith I, Thomssen C, Biganzoli L, Taran T, Conte P.
Breast Cancer Res Treat. 2010 Jul;122(1):181-8.

Phase II trial of pertuzumab and trastuzumab in patients with human epidermal growth factor receptor 2-positive metastatic breast cancer that progressed during prior trastuzumab therapy.

Baselga J, Gelmon KA, Verma S, Wardley A, Conte P, Miles D, Bianchi G, Cortes J, McNally VA, Ross GA, Fumoleau P, Gianni L.
J Clin Oncol. 2010 Mar 1;28(7):1138-44.

An open-label expanded access study of lapatinib and capecitabine in patients with HER2-overexpressing locally advanced or metastatic breast cancer.

Capri G, Chang J, Chen SC, Conte P, Cwiertka K, Jerusalem G, Jiang Z, Johnston S, Kaufman B, Link J, Ro J, Schütte J, Oliva C, Parikh R, Preston A, Rosenlund J, Selzer M, Zembryki D, De Placido S.

Ann Oncol. 2010 Mar;21(3):474-80.

Lapatinib plus letrozole for postmenopausal patients with advanced HER2(+)/HR(+) breast cancer.

Guarneri V.

Expert Rev Anticancer Ther. 2009 Nov;9(11):1549-57.

Metastatic breast cancer: therapeutic options according to molecular subtypes and prior adjuvant therapy.

Guarneri V, Conte P.

Oncologist. 2009 Jul;14(7):645-56.

All-oral combination of oral vinorelbine and capecitabine as first-line chemotherapy in HER2-negative metastatic breast cancer: an International Phase II Trial.

Tubiana-Mathieu N, Bougnoux P, Becquart D, Chan A, Conte PF, Majois F, Espie M, Morand M, Vaissiere N, Villanova G.

Br J Cancer. 2009 Jul 21;101(2):232-7.

Epirubicin plus low-dose trastuzumab in HER2 positive metastatic breast cancer.

Gennari A, De Tursi M, Carella C, Ricevuto E, Orlandini C, Frassoldati A, Conte P, Bruzzi P, Iacobelli S. Breast Cancer Res Treat. 2009 May;115(1):131-6.

Comparison of HER-2 and hormone receptor expression in primary breast cancers and asynchronous paired metastases: impact on patient management.

Guarneri V, Giovannelli S, Ficarra G, Bettelli S, Maiorana A, Piacentini F, Barbieri E, Dieci MV, D'Amico R, Jovic G, Conte P.

Oncologist. 2008 Aug;13(8):838-44.

3) LINEA DI RICERCA 3

Timing for starting second-line therapy in recurrent ovarian cancer.

Guarneri V, Barbieri E, Dieci MV, Piacentini F, Conte P.

Expert Rev Anticancer Ther. 2011 Jan;11(1):49-55.

Achievements and unmet needs in the management of advanced ovarian cancer.

Guarneri V, Piacentini F, Barbieri E, Conte PF.

Gynecol Oncol. 2010 May;117(2):152-8.

Phase III trial of observation versus six courses of paclitaxel in patients with advanced epithelial ovarian cancer in complete response after six courses of paclitaxel/platinum-based chemotherapy: final results of the After-6 protocol 1.

Pecorelli S, Favalli G, Gadducci A, Katsaros D, Panici PB, Carpi A, Scambia G, Ballardini M, Nanni O, Conte P; After 6 Italian Cooperative Group.

J Clin Oncol. 2009 Oct 1;27(28):4642-8.

Weekly low-dose paclitaxel as maintenance treatment in patients with advanced ovarian cancer who had microscopic residual disease at second-look surgery after 6 cycles of paclitaxel/platinum-based chemotherapy: results of an open noncomparative phase 2 multicenter Italian study (After-6 Protocol 2).

Gadducci A, Katsaros D, Zola P, Scambia G, Ballardini M, Pasquini E, Fertonani C, Maggi L, Pecorelli S, Conte PF; Members of the After-6 Italian Cooperative Group.

Int J Gynecol Cancer. 2009 May;19(4):615-9.

Intraperitoneal chemotherapy in the management of patients with advanced epithelial ovarian cancer: a critical review of the literature.

Gadducci A, Conte PF.

Int J Gynecol Cancer. 2008 Sep-Oct;18(5):943-53.

TECNOLOGIA, METODICHE, COMPETENZE DISPONIBILI PER POSSIBILI FUTURE COLLABORAZIONI

Disegno, coordinamento, gestione e analisi finale dei dati di studi clinici multicentrici atti a valutare nuove terapie o approcci terapeutici per il carcinoma mammario e ovarico. Raccolta, gestione e interpretazione di analisi molecolari e genomiche per caratterizzazione del carcinoma mammario.