

2024 RESEARCH FAST FACTS

Triple Negative Breast Cancer (TNBC)



RESEARCH INVESTMENT AT A GLANCE: (1982-2024)

More than **\$175 million** in nearly **270** research grants and close to **50** clinical trials focused on TNBC

75% focus on treatment



ABOUT TNBC

Around 15-20% of all breast cancers are diagnosed as triple negative breast cancer (TNBC). TNBC gets its name because it lacks the three receptors—estrogen (ER), progesterone (PR) and human epidermal growth factor 2 (HER2)—that are present in a majority of breast tumors and can be targeted with many current therapies. People with TNBC do not respond to hormone therapy and most targeted therapies. TNBC also tends to grow and spread more aggressively than other types of breast cancer, is more difficult to treat, and is more likely to recur. More research is needed to better understand TNBC and to find new therapies to treat it.

Learn more about TNBC [here](#).

WHAT WE'RE INVESTIGATING



Testing the effectiveness of a new targeted therapy drug for TNBC and identifying which people are likely to respond to this drug.



Using big data and computer modeling to identify new immunotherapy drug targets to improve survival of people with TNBC.



Using mathematical and computer models to understand how changes in certain proteins can lead to abnormalities in TNBC DNA and to identify potential new drug targets that target these abnormalities.

IN THE KOMEN RESEARCH PIPELINE:

More than **500** potential **new research discoveries** (drugs, biomarkers, devices, etc.) focused on TNBC.

SPOTLIGHT



[Learn more](#) about how Dr. Suranganie Dharmawardhane and ASPIRE trainee Dr. Ailed Cruz-Collazo are investigating how breast cancer cells move to better understand metastasis and to find ways to stop TNBC from spreading to other parts of the body.

WHAT WE'VE LEARNED FROM KOMEN-FUNDED RESEARCH

- Differences in gene expression and mutations in people with African versus European ancestry who have TNBC, may help guide new precision medicine treatments.
- A liquid biopsy (blood test) that measures circulating tumor DNA (ctDNA) and circulating tumor cells (CTCs) may help predict the risk of recurrence after chemotherapy for people with TNBC.
- A novel combination of enzalutamide (Xtandi) and tasisib therapies may be a better treatment option for people with certain types of metastatic TNBC.



[LEARN MORE ABOUT BREAST CANCER](#)

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