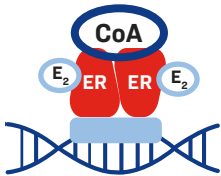


The estrogen pathway is the primary driver in ER+, HER2-, ABC¹

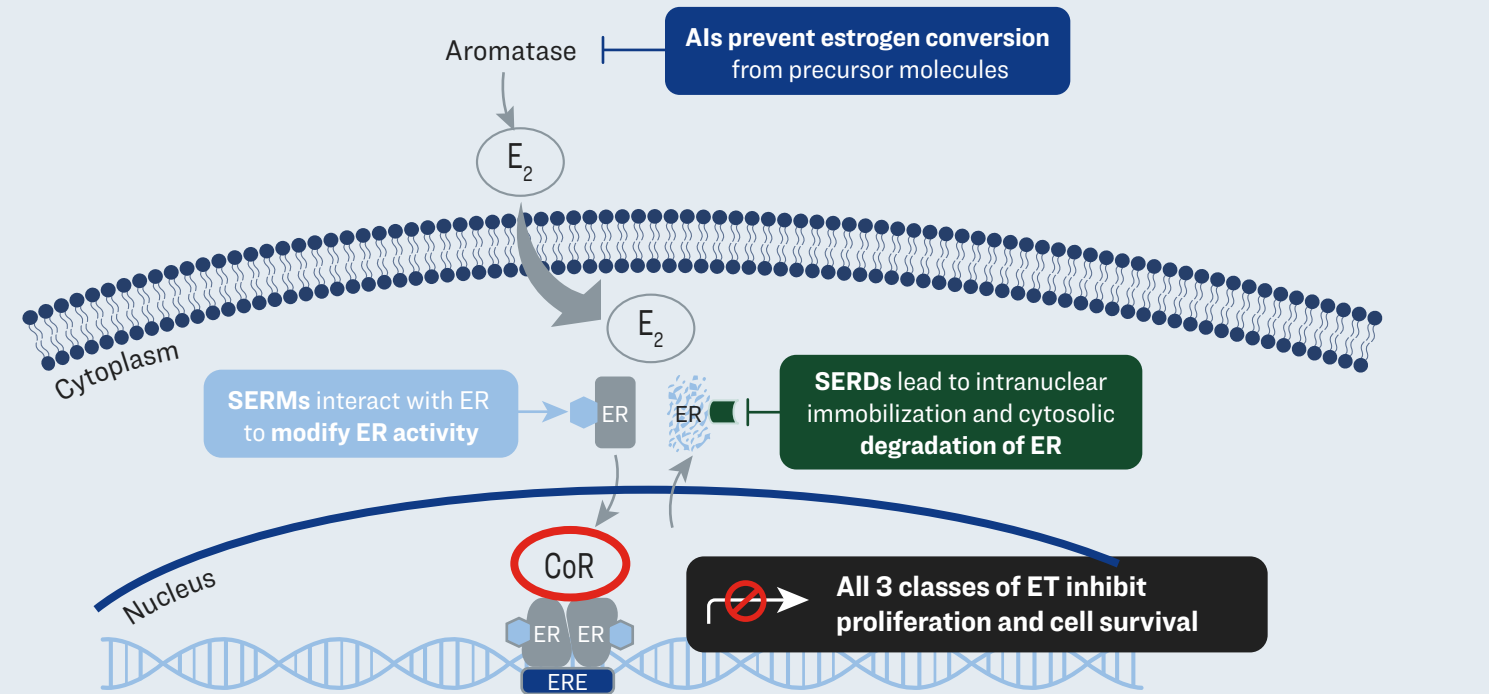


Breast cancer is the most common cause of cancer mortality in women²

≈70% of cases are classified as estrogen receptor-positive (ER+)¹

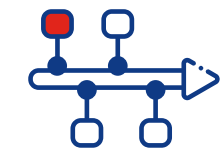
The ER pathway controls proliferation-promoting and anti-apoptotic pathways^{1,3,4}

Three classes of endocrine therapies (ETs) are approved to target the estrogen pathway in patients with ER+, HER2-, ABC^{1,5,6}



Data from Le Romancer M, et al.,¹ Chen YC, et al.,⁵ and Patel HK, Bihani T.⁶

ET remains the backbone of therapy for ER+, HER2-, ABC following 30 years of therapeutic advancement^{5,7}



ET + CDK4/6i is the first-line standard of care in the incurable setting of ER+, HER2-, ABC⁸



Despite the efficacy of first-line ET + CDK4/6i, progression inevitably occurs^{5,9}

Ongoing research and clinical trials are investigating novel approaches to block the ER pathway⁷

ABC, advanced breast cancer; AI, aromatase inhibitor; CDK4/6i, cyclin-dependent kinase 4/6 inhibitor; CoR, corepressors; E₂, estrogen; ER, estrogen receptor; ERE, estrogen response element; ET, endocrine therapy; HER2-, human epidermal growth factor receptor 2 negative; SERD, selective estrogen receptor degrader; SERM, selective estrogen receptor modulator.
1. Le Romancer M, et al. *Endocr Rev*. 2011;32(5):597-622. 2. Misganaw M, et al. *PLoS One*. 2023;18(1):e0279656. 3. Shanle EK, et al. *Adv Drug Deliv Rev*. 2010;62(13):1265-1276. 4. Williams MM, et al. *Cell Death Dis*. 2018;9(21). 5. Chen YC, et al. *Expert Opin Investig Drugs*. 2022;31(6):515-529. 6. Patel HK, Bihani T. *Pharmacol Ther*. 2018;186:1-24. 7. Patel R, et al. *NPJ Breast Cancer*. 2023;9(20). 8. Gradishar WJ, et al. *J Natl Compr Canc Netw*. 2023;21(6):594-608. 9. Zhou FH, et al. *Front Cell Dev Biol*. 2023;11:1148792.