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Medical oncologist Mark Robson is focused on customizing treatment options for our patients with breast cancer.

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Chemotherapy is a breast cancer treatment that uses powerful drugs to attack cancer cells. It's sometimes called [systemic therapy](#). That's because chemotherapy drugs circulate throughout bloodstream.

At Memorial Sloan Kettering, women receive chemotherapy from a [team that specializes solely in breast cancer](#). Our medical oncologists (the doctors who treat cancer using drug therapies) work with you to create a customized treatment plan that fits your needs and leads to the best possible outcome for you. We have deep knowledge of the newest available [clinical trials for breast cancer](#). These studies may give you access to advanced therapies years before they're available elsewhere.

The prospect of fitting chemotherapy into your life may be overwhelming. Our medical oncologists will create a schedule that works for you. To help make things a little easier, chemotherapy is available across our locations in [New Jersey](#), in [Westchester County](#), and on [Long Island](#), as well as at our

[Evelyn H. Lauder Breast Center](#) in Manhattan and our [Brooklyn Infusion Center](#).

Here you can find more in-depth information about:

[chemotherapy for early-stage breast cancer](#)

[chemotherapy for metastatic breast cancer](#)

[the side effects of breast cancer chemotherapy](#)

## Chemotherapy for Early-Stage Breast Cancer

Early-stage breast cancer refers to stage I, stage II, and some forms of stage III breast cancer. Although [breast cancer surgery](#) is usually the main form of treatment for early-stage disease, your care team may recommend chemotherapy before breast surgery ([neoadjuvant chemotherapy](#)) or after breast surgery (adjuvant chemotherapy) to improve the outcome of your care.

Reasons your doctor may recommend chemotherapy for early-stage breast cancer include:

- increasing the chances that your surgeon is able to remove all of the cancer
- shrinking the tumor so that you can have a less-extensive surgery
- eliminating cancer cells in the lymph nodes so that you don't have your lymph nodes removed
- attacking breast cancer cells that remain after surgery to reduce the chances that the cancer will come back

[Read about Valerie, an MSK patient who was able to have a less-extensive surgery after receiving chemotherapy.](#)

## Chemotherapy Regimens for Early-Stage Breast Cancer

At some point, your medical oncologist will recommend a chemotherapy plan for you. Also called a chemotherapy regimen, the plan will have important details about your treatment, including:

- which drugs you're receiving
- the order in which you receive them
- the amount of each drug (the dose)
- how often and how long you will need chemotherapy

Most women with early-stage breast cancer receive chemotherapy for approximately three to six months. There's time in between treatments to allow your body to recover. If you are receiving [targeted therapy for early HER2-positive breast cancer](#), treatment could last up to a year.

For some people, doctors may recommend a dose-dense chemotherapy regimen. Dose-dense chemotherapy means there is less time between treatments. You will not need to have a larger dose of chemotherapy.

Research has shown that dose-dense chemotherapy can improve survival and lower the risk of the breast cancer coming back compared to a traditional chemotherapy schedule. Dose-dense chemotherapy does not result in more side effects.

## Common Adjuvant and Neoadjuvant Chemotherapy Drugs

Here are some of the chemotherapy drugs that MSK's medical oncologists commonly prescribe for early-stage breast cancer:

- anthracyclines, such as [doxorubicin](#)
- [cyclophosphamide](#) (Cytoxan®)
- [epirubicin](#) (Ellence®)

[fluorouracil](#)

[methotrexate](#) (Rheumatrex®, Trexall®)

taxanes, such as [paclitaxel](#) (Taxol®)

[docetaxel](#) (Taxotere®)

## Combination Drug Therapy for Early-Stage Breast Cancer

Combination drug therapy means that you receive more than one type of drug at a time.

Combining drug therapies allows your care team to increase the chances that your treatment will be effective against the breast cancer. If a tumor becomes resistant to one drug, your treatment may still be effective because the tumor responds to the second or third drug in the combination you receive.

Combination therapy can be given before or after breast surgery. Most women receive a combination of two or three drugs at the same time. Some of these drugs are [breast cancer targeted therapies](#). These drugs work by targeting specific molecules involved in breast cancer development.

Here are some of the drug combinations that MSK's medical oncologists commonly prescribe:

### Dose-Dense AC-T Chemotherapy

Doxorubicin and cyclophosphamide, followed by paclitaxel

Used to treat early-stage breast cancer, particularly in younger women or women with aggressive disease

Given intravenously before or after surgery

### Dose-Dense AC-TH Chemotherapy and Targeted Therapy

Doxorubicin and cyclophosphamide, followed by paclitaxel and trastuzumab (Herceptin®)

Used to treat early-stage HER2-positive breast cancer

Given intravenously before or after surgery

### Dose-Dense AC-THP Chemotherapy and Targeted Therapy

Doxorubicin and cyclophosphamide, followed by paclitaxel, trastuzumab, and pertuzumab (Perjeta®)

Used to treat early-stage breast cancer

Given intravenously before or after surgery

### CMF Chemotherapy

Cyclophosphamide, methotrexate, and 5-fluorouracil

Used to treat early-stage breast cancer

Given intravenously or by pill after surgery, depending on what your doctor recommends

### TC Chemotherapy

Docetaxel and cyclophosphamide  
Used to treat lower-risk, early-stage breast cancer  
Given intravenously after surgery

#### TCH Chemotherapy and Targeted Therapy

Docetaxel, carboplatin, and trastuzumab  
Used to treat HER2-positive breast cancer  
Given intravenously before or after surgery

#### TCHP Chemotherapy and Targeted Therapy

Docetaxel, carboplatin, trastuzumab, and pertuzumab  
Used to treat early-stage breast cancer  
Given intravenously before or after surgery

#### TH Chemotherapy and Targeted Therapy

Paclitaxel and trastuzumab  
Used to treat early-stage, low-risk HER2-positive breast cancer  
Given intravenously before or after surgery

## Chemotherapy for Metastatic Breast Cancer

Advances in treatment are making it possible for women with metastatic breast cancer (cancer that has spread to other parts of the body) to live for many years. New drug therapies can not only slow down or stop a tumor's growth but also keep symptoms at bay.

Which treatment your doctor recommends will vary based on your medical history, age, and [breast cancer type](#), among other factors. Combinations of drugs are commonly prescribed for women with early-stage disease. Most women with advanced breast cancer generally receive only one drug at a time.

Chemotherapy drugs that MSK doctors commonly prescribe for advanced breast cancer include:

[albumin-bound paclitaxel](#) (Abraxane®)

[carboplatin](#)

[capecitabine](#) (Xeloda®)

[docetaxel](#)

[eribulin](#) (Halaven®)

[etoposide](#) (VP16, Etopophos®)

[gemcitabine](#)(Gemzar®)

[irinotecan](#) (Camptosar®)

[liposomal doxorubicin](#) (Lipodox®)

[paclitaxel](#)

[vinorelbine](#)(Navelbine®)

Women with advanced disease can also benefit from genomic testing. This is also called tumor sequencing or molecular profiling. It is offered to all MSK patients with metastatic breast cancer. Genomic testing involves looking at the cancer cells to see if there are any genetic mutations (changes in the genes) that could be linked to the specific type of breast cancer you have.

Our experts use a highly sophisticated testing approach developed by MSK researchers called [MSK-IMPACT™](#). The information gained from MSK-IMPACT can help us personalize your care. We can rule out drug therapies that may not work for you or sometimes recommend cutting-edge clinical trials designed to target the specific mutations in your tumor.

## Side Effects of Breast Cancer Chemotherapy

Chemotherapy usually works by attacking rapidly dividing cells. This means that chemotherapy can harm not only cancer cells but also healthy cells that are dividing rapidly, like the ones that cause your hair to grow.

Whether you have side effects from breast cancer chemotherapy will depend on the details of your treatment plan. The care teams at MSK are committed to helping you feel your best during and after treatment. During treatment, we'll watch carefully for your reaction to the drugs and adjust the drugs or dose as necessary. We'll also continue to monitor you for possible long-term effects after your treatment ends.

We offer a variety of other [specialized services](#) to support you during your treatment. Many MSK patients find that our [Integrative Medicine Service](#) can be a valuable part of their treatment plan. Programs include massage, acupuncture, hypnotherapy, meditation, visualization, music therapy, and nutritional counseling.

One side effect of chemotherapy can be hair loss. MSK offers scalp cooling to help minimize hair loss. Learn more about [scalp cooling](#), or ask your care team for more information.

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Call [646-497-9064](tel:646-497-9064)

Mon - Fri, 8:00 AM-6:00 p.m., ET

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