LBCA SABCS 2025 Summary

Valerie Fraser
Cancer Research Advocate
January, 2026

SABCS 2025 brought together more than 11,000 scientists, clinicians, healthcare professionals, patients, and advocates for four full days of engaging scientific sessions, poster presentations, and evening events that fostered meaningful connection and exchange of ideas around the latest advances in breast cancer research and care. This year's symposium highlighted significant new insights and innovation, with a strong emphasis on advancing personalized breast cancer care through novel targeted therapies, less invasive surgical and radiation approaches, emerging endocrine therapies, expanded use of liquid biopsies, and a growing focus on patient-centered topics such as lifestyle and survivorship.

The meeting also featured the largest advocacy presence to date, underscoring the critical role of patient advocates in research, education, and survivorship. It was inspiring to see advocates included as panelists and speakers across multiple sessions, bringing essential patient perspectives to this global forum. As always, the breadth of content made it challenging to choose which sessions to attend each day.

For patients and advocates, learning continued each evening at the Alamo Breast Cancer Hot Topics Sessions, where we gathered to connect with fellow advocates and hear leading breast cancer experts summarize the most impactful daily sessions in more patient-friendly language, followed by robust Q&A discussions. I also valued the opportunity to connect each morning with other patients and advocates in the Advocate Lounge during breakfast, where new friendships, collaborations, and ideas naturally emerged. This year saw a notable increase in new advocates, particularly those focused on lobular breast cancer, further strengthening our community. The availability of live session feeds in the Advocate Lounge allowed us to continue networking while staying engaged with the scientific content.

Overall, SABCS 2025 was both inspiring and deeply informative. I learned a tremendous amount from the sessions I attended, as well as from those I reviewed following the symposium, too many to comment on in this summary. One of the most outstanding and impactful sessions for lobular breast cancer was Tuesday's "Special Session 2: Lobular Breast Cancer Updates," moderated by Steffi Oesterreich, PhD (University of Pittsburgh Medical Center), and Marleen Kok, MD, PhD (Netherlands Cancer Institute).

As Dr. Oesterreich emphasized, invasive lobular carcinoma (ILC) is a common breast cancer subtype, predominantly hormone receptor–positive and HER2-negative, with loss of E-cadherin as its defining hallmark. She noted the substantial growth in lobular research over the past decade, reflected by more than 120 lobular breast cancer abstracts presented at SABCS 2025. Dr. Kok expanded on the unique challenges of ILC, including difficulties in diagnosis due to its diffuse growth pattern and challenges in monitoring treatment response. Although research activity has increased significantly, she highlighted that the number of ILC-specific clinical trials remains low. "With trials specific to lobular breast cancer, we're just at the start," she noted.

Dr. Kok also reviewed promising areas of ongoing ILC research, including studies targeting the ROS1 protein—commonly overexpressed and critical for tumor growth in ILC—as well as ERBB2 mutations, which are more prevalent in ILC than typically recognized and are not routinely tested in standard breast

cancer care. She stressed the importance of further studying these molecular features to develop more effective, tailored therapies for patients with lobular breast cancer.

Anne Vincent-Salomon, MD, PhD, Professor and Director of the Institute of Women's Cancers at Institut Curie, reviewed current ILC diagnostic criteria, including classic ILC and WHO-recognized variants. She explained that up to 75% of ILC cases exhibit mixed architectural patterns and discussed a proposed new architecture-based classification system. She also highlighted emerging AI-based diagnostic models and a novel tumor microenvironment–based classification of ILC.

Additional speakers further enriched the session. Philippe Aftimos, MD (Institut Jules Bordet), shared ILC-specific lessons learned from clinical trials investigating endocrine therapy, ERBB2 mutations, the PI3K–AKT–mTOR pathway, ROS1 inhibitors, and immunotherapy, and discussed how these findings may shape future trial design. Christos Sotiriou, MD, PhD (Institut Jules Bordet), presented research integrating morphological, spatial, and gene expression data to classify ILC into four distinct subtypes: normal stroma–enriched (NSE), proliferative (P), androgen receptor–enriched (ARE), and metabolic–immune enriched (MIE). He outlined how these subtypes could have important clinical implications, including improved patient stratification and treatment selection.

Finally, Otto Metzger, MD (Dana-Farber Cancer Institute), addressed the ongoing debate regarding the role of adjuvant chemotherapy in ILC. He emphasized the importance of predictive biomarkers and risk stratification—incorporating tumor size, nodal status, and genomic tools—to guide chemotherapy decisions. He noted that for patients with favorable clinical and biological features, "there is little room to show that chemotherapy adds benefit," while clarifying that this does not imply chemotherapy is ineffective in all ILC cases.

This session was a great start to the symposium and laid a solid foundation for the many other sessions, posters and Hot Topics talks that presented research so important to patients with lobular breast cancer as well as many other forms of breast cancer. The key takeaway for those of us affected by lobular breast cancer is the need to remain vigilant and focused on supporting innovative research, advocating for increased inclusion of ILC in clinical trials, and ensuring that lobular breast cancer remains part of mainstream breast cancer discussions to improve treatment options, outcomes, and survival.

My advice to first-timers to the SABCS is that the program is intense, especially when attending after symposium events into the evening hours. Make sure to have your schedule for sessions together ahead of time, but leave some room for flexibility, and visit the Advocate Lounge for breakfast and lunch breaks as it's a fantastic way to connect with fellow advocates and other researchers who pop in while stopping for a bite to eat! It's so important to take breaks throughout the busy days and make sure you have very comfortable shoes!

I am always excited to share all of the information learned at the SABCS 2025 with patients and to elevate awareness and education about ILC through my national and international advocacy work. I have already shared key insights from the symposium with fellow patients and advocates and am exploring collaborative opportunities with both advocates and researchers. As I participate in several national and international conferences this year, I plan to leverage the latest advances in ILC research to further expand education, advocacy, and research efforts both nationally and globally.