Although HER2 overexpression has been correlated with aggressive resistance and/or relapse tumors characterized by poor survival and lack of therapeutic responses, a mechanism of T-cell clearance and potential resistance to anti PD-1 therapy (Figure 2 and had antitumor activity alone and in combination with chemotherapy). Several mechanisms of action have led to promising clinical outcomes in breast cancer had response rates of 39% and 33%, respectively (Table 1).

Table 1: Selection and Timing of Dose Administration

<table>
<thead>
<tr>
<th>Cycle</th>
<th>Time After Administration (hours)</th>
<th>Drug Dose and Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cycle 1</td>
<td>Day 1</td>
<td>IV: 1000 mg/m², oral: 1200 mg daily</td>
</tr>
<tr>
<td>Cycle 2</td>
<td>Day 1</td>
<td>IV: 1000 mg/m², oral: 1200 mg daily</td>
</tr>
<tr>
<td>Cycle 3 onward</td>
<td>Day 1</td>
<td>IV: 1000 mg/m², oral: 1200 mg daily</td>
</tr>
</tbody>
</table>

**Study Population**

All eligible patients must have histologically/cytologically confirmed locally advanced, recurrent, or metastatic HER2 positive breast cancer (Cohort 1) or HER2 positive GC/GEJC.

**Tislelizumab**

Tislelizumab is a humanized anti-PD-L1 IgG4 monoclonal antibody that has been shown to have antitumor activity both as monotherapy and in combination with chemotherapy. The drug was administered at a dose of 200 mg IV every 3 weeks in Cohort 1 and Cohort 2.

**Primary Effectiveness Endpoints**

Tislelizumab and chemotherapy (Cohort 1) or tislelizumab and chemotherapy plus capecitabine (Cohort 2) had favorable safety and tolerability profiles. The primary effectiveness endpoint is confirmed objective response rate (ORR).

**Secondary Effectiveness Endpoints**

Secondary endpoints include duration of response, time to progression, and overall survival (OS). The study is ongoing, and the final results will be reported to the scientific community. In addition, the long-term safety and tolerability of tislelizumab and chemotherapy will be evaluated.

**References**


**Trial Status**

The study is ongoing, and the final results will be reported to the scientific community. In addition, the long-term safety and tolerability of tislelizumab and chemotherapy will be evaluated.

**Acknowledgments**

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