

## DAFTAR PUSTAKA

- Abdelraouf, E. M., Hussein, R. R. S., Shaaban, A. H., El-Sherief, H. A. M., Embaby, A. S., & Abd El-Aleem, S. A. (2022). Annexin A2 (AnxA2) association with the clinicopathological data in different breast cancer subtypes: A possible role for AnxA2 in tumor heterogeneity and cancer progression. *Life Sciences*, 308, 120967.
- Abdollahi, M., Hajizadeh, E., Haghighat, S., & Baghestani, A. R. (2018). *Prognostic Cut Point for Breast Cancer Age of Diagnosis*.
- Ács, Balázs, et al. "Ki-67 as a controversial predictive and prognostic marker in breast cancer patients treated with neoadjuvant chemotherapy." *Diagnostic pathology* 12.1 (2017): 1-12.
- Ács, Balázs, et al. "Ki-67 as a controversial predictive and prognostic marker in breast cancer patients treated with neoadjuvant chemotherapy." *Diagnostic pathology* 12.1 (2017): 1-12.
- Adiputra, P. A. T., & Sudarsa, I. W. (n.d.). *Skoring Prognostik Survival Pasien Triple Negative Breast Cancer Berbasis Immunoscore*.
- Aleskandarany, Mohammed A., et al. "Prognostic value of proliferation assay in the luminal, HER2-positive, and triple-negative biologic classes of breast cancer." *Breast Cancer Research* 14 (2012): 1-11.
- Al-Zawi, A. S. A., Elamass, M., Kapturek, A., & Idaewor, P. (2021). Ki-67 proliferative index correlation to the immunohistochemistry profile in early female breast cancer: a review of 515 cases. *Medical Research Journal*, 6(2), 108–113.
- Aman, Nguissan Alphonse, et al. "Immunohistochemical evaluation of Ki-67 and comparison with clinicopathologic factors in breast carcinomas." *Asian Pacific journal of cancer prevention: APJCP* 20.1 (2019): 73.
- Andrés-Sánchez, N., Fisher, D., & Krasinska, L. (2022). Physiological functions and roles in cancer of the proliferation marker Ki-67. *Journal of Cell Science*, 135(11), jcs258932.
- Arafah, M. A., Ouban, A., Ameer, O. Z., & Quek, K. J. (2021). Ki-67 LI expression in triple-negative breast cancer patients and its significance. *Breast Cancer: Basic and Clinical Research*, 15, 11782234211016976.
- Ardhiansyah, A. O. (2021). *Dasar-dasar Onkologi dan Hallmark of Cancer (Edisi 2): dari teori preklinik hingga aplikasi klinik* (Vol. 1). Airlangga University Press.

- Arnold, M., Morgan, E., Rumgay, H., Mafra, A., Singh, D., Laversanne, M., Vignat, J., Gralow, J. R., Cardoso, F., & Siesling, S. (2022). Current and future burden of breast cancer: Global statistics for 2020 and 2040. *The Breast*, 66, 15–23.
- Arzanova, E., & Mayrovitz, H. N. (2022). The Epidemiology of Breast Cancer. *Exon Publications*, 1–19.
- Badowska-Kozakiewicz, A., Budzik, M., Liszcz, A., Sobieraj, M., Czerw, A., Sobol, M., Patera, J., & Deptała, A. (2018). Clinicopathological factors associated with novel prognostic markers for patients with triple negative breast cancer. *Archives of Medical Science*, 15(6), 1433–1442.
- Bai, D., Ueno, L., & Vogt, P. K. (2009). Akt-mediated regulation of NFκB and the essentialness of NFκB for the oncogenicity of PI3K and Akt. *International Journal of Cancer*, 125(12), 2863–2870.
- Bistoni, G., & Farhadi, J. (2015). Anatomy and physiology of the breast. *Plastic and Reconstructive Surgery: Approaches and Techniques*, 477–485.
- Biswas, R. S. R. (2020). Molecular subtypes of breast cancer patients according to St Gallen classification. *Chattagram Maa-O-Shishu Hospital Medical College Journal*, 19(1), 55–58.
- Bland, Kirby I., Helena R. Chang, and Edward M. Copeland III. "Modified radical mastectomy and simple mastectomy." *The breast*. Elsevier, 2018. 443-461.
- Blows, F. M., Driver, K. E., Schmidt, M. K., Brooks, A., Van Leeuwen, F. E., Wesseling, J., Cheang, M. C., Gelmon, K., Nielsen, T. O., & Blomqvist, C. (2010). Subtyping of breast cancer by immunohistochemistry to investigate a relationship between subtype and short and long term survival: a collaborative analysis of data for 10,159 cases from 12 studies. *PLoS Medicine*, 7(5), e1000279.
- Braicu, C., Chiorean, R., Irimie, A., Chira, S., Tomuleasa, C., Neagoe, E., Paradiso, A., Achimas-Cadariu, P., Lazar, V., & Berindan-Neagoe, I. (2016). Novel insight into triple-negative breast cancers, the emerging role of angiogenesis, and antiangiogenic therapy. *Expert Reviews in Molecular Medicine*, 18, e18.
- Chaudhary, L. N. (2020). Early stage triple negative breast cancer: management and future directions. *Seminars in Oncology*, 47(4), 201–208.
- Chen, X., He, C., Han, D., Zhou, M., Wang, Q., Tian, J., Li, L., Xu, F., Zhou, E., & Yang, K. (2017). The predictive value of Ki-67 before neoadjuvant chemotherapy for breast cancer: a systematic review and meta-analysis. *Future Oncology*, 13(9), 843–857.
- Chiorean, R., Braicu, C., & Berindan-Neagoe, I. (2013). Another review on triple negative breast cancer. Are we on the right way towards the exit from the labyrinth? *The Breast*, 22(6), 1026–1033.

- Choi, S. B., Park, J. M., Ahn, J. H., Go, J., Kim, J., Park, H. S., Kim, S. Il, Park, B.-W., & Park, S. (2022). Ki-67 and breast cancer prognosis: does it matter if Ki-67 level is examined using preoperative biopsy or postoperative specimen? *Breast Cancer Research and Treatment*, 192(2), 343–352.
- Coates, Alan S., et al. "Tailoring therapies—improving the management of early breast cancer: St Gallen International Expert Consensus on the Primary Therapy of Early Breast Cancer 2015." *Annals of oncology* 26.8 (2015): 1533-1546.
- Collignon, J., Lousberg, L., Schroeder, H., & Jerusalem, G. (2016). Triple-negative breast cancer: treatment challenges and solutions. *Breast Cancer: Targets and Therapy*, 93–107.
- Costa, R. E. A. R. da, Oliveira, F. T. R. de, Araújo, A. L. N., & Vieira, S. C. (2021). Prognostic factors in triple-negative breast cancer: a retrospective cohort. *Revista Da Associação Médica Brasileira*, 67, 950–957.
- Da Silva, J. L., Nunes, N. C. C., Izetti, P., de Mesquita, G. G., & de Melo, A. C. (2020). Triple negative breast cancer: A thorough review of biomarkers. *Critical Reviews in Oncology/Hematology*, 145, 102855.
- Davey, Matthew G., et al. "Ki-67 as a prognostic biomarker in invasive breast cancer." *Cancers* 13.17 (2021): 4455.
- De Azambuja, E., Cardoso, F., de Castro, G., Colozza, M., Mano, M. S., Durbecq, V., Sotiriou, C., Larsimont, D., Piccart-Gebhart, M. J., & Paesmans, M. (2007). Ki-67 as prognostic marker in early breast cancer: a meta-analysis of published studies involving 12 155 patients. *British Journal of Cancer*, 96(10), 1504–1513.
- Denkert, C., Loibl, S., Müller, B. M., Eidtmann, H., Schmitt, W. D., Eiermann, W., Gerber, B., Tesch, H., Hilfrich, J., & Huober, J. (2013). Ki67 levels as predictive and prognostic parameters in pretherapeutic breast cancer core biopsies: a translational investigation in the neoadjuvant GeparTrio trial. *Annals of Oncology*, 24(11), 2786–2793.
- Do Nascimento, R. G., & Otoni, K. M. (2020). Histological and molecular classification of breast cancer: what do we know? *Mastology*, 30, 1–8.
- Dogra, Atika, et al. "Clinicopathological characteristics of triple negative breast cancer at a tertiary care hospital in India." *Asian Pacific Journal of Cancer Prevention* 15.24 (2015): 10577-10583.
- Elwan, Amira, et al. "Clinicopathological features and treatment challenges in triple negative breast cancer patients: a retrospective cohort study." *Turk J Ophthalmol* 37 (2021): 121-129.

- Emdad, L., Das, S. K., Dasgupta, S., Hu, B., Sarkar, D., & Fisher, P. B. (2013). AEG-1/MTDH/LYRIC: signaling pathways, downstream genes, interacting proteins, and regulation of tumor angiogenesis. In *Advances in cancer research* (Vol. 120, pp. 75–111). Elsevier.
- Ensenyat-Mendez, M., Llinàs-Arias, P., Orozco, J. I. J., Íñiguez-Muñoz, S., Salomon, M. P., Sesé, B., DiNome, M. L., & Marzese, D. M. (2021). Current triple-negative breast cancer subtypes: dissecting the most aggressive form of breast cancer. *Frontiers in Oncology*, 11, 681476.
- Elsberger, B., et al. "Breast cancer patients' clinical outcome measures are associated with Src kinase family member expression." *British journal of cancer* 103.6 (2010): 899-909
- Fan, Y., & He, S. (2022). The characteristics of tumor microenvironment in triple negative breast cancer. *Cancer Management and Research*, 1–17.
- Fasching, Peter A., et al. "Ki67, chemotherapy response, and prognosis in breast cancer patients receiving neoadjuvant treatment." *BMC cancer* 11.1 (2011): 1-13.
- Fasching, Peter A., et al. "Ki67, chemotherapy response, and prognosis in breast cancer patients receiving neoadjuvant treatment." *BMC cancer* 11.1 (2011): 1-13.
- Geyer, Felipe C., et al. "The spectrum of triple-negative breast disease: high-and low-grade lesions." *The American journal of pathology* 187.10 (2017): 2139-2151.
- Giuliano, A. E., Edge, S. B., & Hortobagyi, G. N. (2018). of the AJCC cancer staging manual: breast cancer. *Annals of Surgical Oncology*, 25, 1783–1785.
- Gnant, M., Thomssen, C., & Harbeck, N. (2015). St. Gallen/Vienna 2015: a brief summary of the consensus discussion. *Breast Care*, 10(2), 124–130.
- Goldhirsch, A., Winer, E. P., Coates, A. S., Gelber, R. D., Piccart-Gebhart, M., Thürlimann, B., Senn, H.-J., Albain, K. S., André, F., & Bergh, J. (2013). Personalizing the treatment of women with early breast cancer: highlights of the St Gallen International Expert Consensus on the Primary Therapy of Early Breast Cancer 2013. *Annals of Oncology*, 24(9), 2206–2223.
- Hadiyanto, A. V. S., Miranti, I. P., Prajoko, Y. W., & Istiadi, H. (2022). Histological and Clinical Stage Profiles of Young-aged Breast Carcinoma. *Diponegoro International Medical Journal*, 3(1), 1–6.
- Halperin, Edward C., et al. Perez & Brady's principles and practice of radiation oncology. Lippincott Williams & Wilkins, 2013.
- Hamm, C., Kulkarni, S., Gupta, R., Kay, A., Mathews, J., Hirmiz, K., Woldie, I., Ghafoor, A., Elfiki, T., & Kanjeekal, S. (2016). Early Stage triple negative breast cancer has significantly better outcomes than more advanced disease: a

- single centre retrospective review. *Journal of Cancer Therapy*, 7(10), 665.
- Hanahan, D., & Weinberg, R. A. (2011). Hallmarks of cancer: the next generation. *Cell*, 144(5), 646–674.
- Hashmi, A. A., Hashmi, K. A., Irfan, M., Khan, S. M., Edhi, M. M., Ali, J. P., Hashmi, S. K., Asif, H., Faridi, N., & Khan, A. (2019). Ki67 index in intrinsic breast cancer subtypes and its association with prognostic parameters. *BMC Research Notes*, 12(1), 1–5.
- Hassan, I., Tarcisia, T., Agnestina, A., Cornain, S., & Nasar, I. M. (2013). Ki-67 marker useful for classification of malignant invasive ductal breast cancer. *Universa Medicina*, 32(3), 179–186.
- Hoeflerlin, L. A., Chalfant, C. E., & Park, M. A. (2013). Challenges in the treatment of triple negative and HER2-overexpressing breast cancer. *Journal of Surgery and Science*, 1(1), 3.
- Hortobagyi, G. N., Edge, S. B., & Giuliano, A. (2018). New and important changes in the TNM staging system for breast cancer. *American Society of Clinical Oncology Educational Book*, 38, 457–467.
- Houvenaeghel, G., Cohen, M., Classe, J. M., Rey, F., Mazouni, C., Chopin, N., Martinez, A., Daraï, E., Coutant, C., & Colombo, P. E. (2021). Lymphovascular invasion has a significant prognostic impact in patients with early breast cancer, results from a large, national, multicenter, retrospective cohort study. *ESMO Open*, 6(6), 100316.
- Hu, G., Wei, Y., & Kang, Y. (2009). The multifaceted role of MTDH/AEG-1 in cancer progression. *Clinical Cancer Research*, 15(18), 5615–5620.
- Jain, A., Chellappa, V., & Dharanipragada, K. (2023). *Inter-Relationship of Ki-67 and Triple-Negative Breast Cancer*.
- Kamranzadeh, Hosein, et al. "Association between Ki-67 expression and clinicopathological features in prognosis of breast cancer: A retrospective cohort study." *Journal of research in medical sciences: the official journal of Isfahan University of Medical Sciences* 24 (2019).
- Kanyılmaz, Gül, et al. "Prognostic importance of Ki-67 in breast cancer and its relationship with other prognostic factors." *European journal of breast health* 15.4 (2019): 256.
- Keam, B., Im, S.-A., Lee, K.-H., Han, S.-W., Oh, D.-Y., Kim, J. H., Lee, S.-H., Han, W., Kim, D.-W., & Kim, T.-Y. (2011). Ki-67 can be used for further classification of triple negative breast cancer into two subtypes with different response and prognosis. *Breast Cancer Research*, 13, 1–7.
- Khan, M., & Sarkar, D. (2021). The scope of astrocyte elevated gene-1/metadherin (AEG-1/MTDH) in cancer clinicopathology: A review. *Genes*, 12(2), 308.

- Lehmann-Che, J., et al. "Immunohistochemical and molecular analyses of HER2 status in breast cancers are highly concordant and complementary approaches." *British journal of cancer* 104.11 (2011): 1739-1746
- Li, C., Li, R., Song, H., Wang, D., Feng, T., Yu, X., Zhao, Y., Liu, J., Yu, X., & Wang, Y. (2011). Significance of aeg-1 expression in correlation with vegf, microvessel density and clinicopathological characteristics in triple-negative breast cancer. *Journal of Surgical Oncology*, 103(2), 184–192.
- Li, J., Yang, L., Song, L., Xiong, H., Wang, L., Yan, X., Yuan, J., Wu, J., & Li, M. (2009). Astrocyte elevated gene-1 is a proliferation promoter in breast cancer via suppressing transcriptional factor FOXO1. *Oncogene*, 28(36), 3188–3196.
- Li, L. T., Jiang, G., Chen, Q., & Zheng, J. N. (2015). Ki67 is a promising molecular target in the diagnosis of cancer. *Molecular Medicine Reports*, 11(3), 1566–1572.
- Liedtke, C., Hess, K. R., Karn, T., Rody, A., Kiesel, L., Hortobagyi, G. N., Pusztai, L., & Gonzalez-Angulo, A. M. (2013). The prognostic impact of age in patients with triple-negative breast cancer. *Breast Cancer Research and Treatment*, 138, 591–599.
- Lugano, R., Ramachandran, M., & Dimberg, A. (2020). Tumor angiogenesis: causes, consequences, challenges and opportunities. *Cellular and Molecular Life Sciences*, 77, 1745–1770.
- Łukasiewicz, S., Czeczelewski, M., Forma, A., Baj, J., Sitarz, R., & Stanisławek, A. (2021). Breast cancer—epidemiology, risk factors, classification, prognostic markers, and current treatment strategies—an updated review. *Cancers*, 13(17), 4287.
- Luporsi, Elisabeth, et al. "Ki-67: level of evidence and methodological considerations for its role in the clinical management of breast cancer: analytical and critical review." *Breast cancer research and treatment* 132 (2012): 895-915.
- Manna, D., & Sarkar, D. (2021). Multifunctional role of astrocyte elevated gene-1 (AEG-1) in cancer: focus on drug Resistance. *Cancers*, 13(8), 1792.
- Mehta, Anurag, et al. "Diagnostic ability of real-time quantitative polymerase chain reaction versus immunohistochemistry for Ki-67 assessment in breast cancer: An Indian perspective." *The Indian Journal of Medical Research* 150.3 (2019): 254.
- Menon, S. S., Guruvayoorappan, C., Sakthivel, K. M., & Rasmi, R. R. (2019). Ki-67 protein as a tumour proliferation marker. *Clinica Chimica Acta*, 491, 39–45.
- Naito, Yoichi, et al. "Correlation, comparison, and combined analysis of Ki-67 and histological grade for early luminal breast cancer." *Annals of Oncology* 23 (2012): xi90.

- Munzone, Elisabetta, et al. "Prognostic value of Ki-67 labeling index in patients with node-negative, triple-negative breast cancer." *Breast cancer research and treatment* 134 (2012): 277-282.
- Nigam, Jitendra S., et al. "Association of ki-67 with clinicopathological factors in breast cancer." *Cureus* 13.6 (2021).
- Nielsen, Torsten O., et al. "Assessment of Ki67 in breast cancer: updated recommendations from the international Ki67 in breast cancer working group." *JNCI: Journal of the National Cancer Institute* 113.7 (2021): 808-819.
- Nurmayeni, N., & Windarti, I. (2022). Gambaran Subtipe Molekuler Kanker Payudara di Indonesia. *Jurnal Agromedicine*, 9(2), 146–149.
- Niu, Gang, et al. "Cetuximab-based immunotherapy and radioimmunotherapy of head and neck squamous cell carcinoma." *Clinical Cancer Research* 16.7 (2010): 2095-2105
- Organization, W. H., Cancer, I. A. for R. on, & Organization, W. H. (2020). *Global cancer observatory*.
- Ostad, S. N., & Parsa, M. (2011). Breast cancer from molecular point of view: Pathogenesis and biomarkers. *Breast Cancer—Focusing Tumor Microenvironment, Stem Cells and Metastasis*.
- Park, S., Park, S., Kim, J., Ahn, S., Park, K. H., & Lee, H. (2018). Assessment of Ki-67 for predicting effective prognosis in breast cancer subtypes. *Biomedical Science Letters*, 24(1), 9–14.
- Pascual, M. C., Montaña, J. J., Franch, P., Sánchez-Contador, C., & Ramos, M. (2022). Survival of Breast Cancer by Stage, Grade and Molecular Groups in Mallorca, Spain. *Journal of Clinical Medicine*, 11(19), 5708.
- Perreard, Laurent, et al. "Classification and risk stratification of invasive breast carcinomas using a real-time quantitative RT-PCR assay." *Breast Cancer Research* 8.2 (2006): 1-11.
- Phillips, L., Gill, A. J., & Baxter, R. C. (2019). Novel prognostic markers in triple-negative breast cancer discovered by MALDI-mass spectrometry imaging. *Frontiers in Oncology*, 9, 379.
- Piedra-Delgado, Luis, et al. "Survival according to the site of metastasis in triple-negative breast cancer patients: The Peruvian experience." *Plos one* 19.2 (2024): e0293833.
- Pogoda, K., Niwińska, A., Murawska, M., & Pieńkowski, T. (2013). Analysis of pattern, time and risk factors influencing recurrence in triple-negative breast cancer patients. *Medical Oncology*, 30, 1–8.
- Potemski, Piotr, et al. "Ki-67 expression in operable breast cancer: a comparative study of immunostaining and a real-time RT-PCR assay." *Pathology-Research and Practice* 202.7 (2006): 491-495.

- Prihantono, P., Hatta, M., Binekada, C., Sampepajung, D., Haryasena, H., Nelwan, B., Asadul Islam, A., & Nilawati Usman, A. (2017). Ki-67 expression by immunohistochemistry and quantitative real-time polymerase chain reaction as predictor of clinical response to neoadjuvant chemotherapy in locally advanced breast cancer. *Journal of Oncology*, 2017.
- Purwanto, I., Dwiprahasto, I., Aryandono, T., & Mubarika, S. (2020). Treatment options for Indonesian triple negative breast cancer patients: a literature review of current state and potentials for future improvement. *J Med Sci*, 52(1), 81–101.
- Rao, C., Shetty, J., & Prasad, K. H. L. (2013). Immunohistochemical profile and morphology in triple–Negative breast cancers. *Journal of Clinical and Diagnostic Research: JCDR*, 7(7), 1361.
- Ragab, Halla Mohamed, et al. "Assessment of Ki-67 as a potential biomarker in patients with breast cancer." *Journal of Genetic Engineering and Biotechnology* 16.2 (2018): 479-484.
- Reddy, S. M., Sinha, A. K., Hsu, L., Barcenas, C. H., & Valero, V. (2016). *Recurrence and survival outcomes of triple-negative breast cancer survivors disease-free at 5-years and relationship to low hormone receptor positivity (1-9% versus < 1%)*. American Society of Clinical Oncology.
- Remnant, L., Kochanova, N. Y., Reid, C., Cisneros-Soberanis, F., & Earnshaw, W. C. (2021). The intrinsically disorderly story of Ki-67. *Open Biology*, 11(8), 210120.
- Santiago, L., Daniels, G., Wang, D., Deng, F.-M., & Lee, P. (2017). Wnt signaling pathway protein LEF1 in cancer, as a biomarker for prognosis and a target for treatment. *American Journal of Cancer Research*, 7(6), 1389.
- Shetty, Jayaprakash, and Chandrika Rao. "Expression of E cadherin and Ki 67: emerging prognostic markers in triple-negative breast cancer." *Indian Journal of Surgical Oncology* 10 (2019): 377-381.
- Shi, X., & Wang, X. (2015). The role of MTDH/AEG-1 in the progression of cancer. *International Journal of Clinical and Experimental Medicine*, 8(4), 4795.
- Susini, Tommaso, et al. "Preoperative assessment of HER-2/neu status in breast carcinoma: the role of quantitative real-time PCR on core-biopsy specimens." *Gynecologic oncology* 116.2 (2010): 234-239.
- Simon, Sérgio Daniel, Pedro HZ de Moraes, and Vladimir Galvão de Aguiar. "Adjuvant Chemotherapy of Breast Cancer." *Breast Diseases: An Evidence-Based Pocket Guide* (2019): 489-495.
- Singh, D., Roy, N., & Das, S. M. (2020). Epidemiology, pattern of recurrence and survival in triple-negative breast cancer. *Asian Pacific Journal of Cancer Care*, 5(2), 87–94.

- Sinn, Hans-Peter, et al. "Comparison of immunohistochemistry with PCR for assessment of ER, PR, and Ki-67 and prediction of pathological complete response in breast cancer." *BMC cancer* 17 (2017): 1-10.
- Sobri, F. B., Azhar, Y., Wibisana, I. G. N., & Rachman, A. (2017). Manajemen terkini kanker payudara. *Media Aesculapius, Jakarta*.
- Solid, T. W. P. P. K. (2010). *Panduan Penatalaksanaan Kanker Payudara*. PERABOI.
- Soliman, N. A., & Yussif, S. M. (2016). Ki-67 as a prognostic marker according to breast cancer molecular subtype. *Cancer Biology & Medicine*, 13(4), 496.
- Song, Z., Chang, Y., Jia, H., Xu, B., Yang, L., Xu, Y., Zhang, J., Wang, M., & Yang, L. (2022). *Metadherin inhibits triple-negative breast cancer chemosensitivity to paclitaxel via activation of the AKT/GSK-3 $\beta$  signaling pathway*.
- Sood, N., & Nigam, J. S. (2014). Correlation of CK5 and EGFR with clinicopathological profile of triple-negative breast cancer. *Pathology Research International*, 2014.
- Sriramulu, S., Sun, X.-F., Malayaperumal, S., Ganesan, H., Zhang, H., Ramachandran, M., Banerjee, A., & Pathak, S. (2021). Emerging role and clinicopathological significance of AEG-1 in different cancer types: a concise review. *Cells*, 10(6), 1497.
- Srivastava, P., Wang, T., Clark, B. Z., Yu, J., Fine, J. L., Villatoro, T. M., Carter, G. J., Brufsky, A. M., Gorantla, V. C., & Huggins-Puhalla, S. L. (2022). Clinical-pathologic characteristics and response to neoadjuvant chemotherapy in triple-negative low Ki-67 proliferation (TNLP) breast cancers. *NPJ Breast Cancer*, 8(1), 51.
- Stuart-Harris, R., Caldas, C., Pinder, S. E., & Pharoah, P. (2008). Proliferation markers and survival in early breast cancer: a systematic review and meta-analysis of 85 studies in 32,825 patients. *The Breast*, 17(4), 323–334.
- Sukumar, J., Gast, K., Quiroga, D., Lustberg, M., & Williams, N. (2021). Triple-negative breast cancer: Promising prognostic biomarkers currently in development. *Expert Review of Anticancer Therapy*, 21(2), 135–148.
- Suyatno, R. K. A., Andinata, B., Iskandar, R. R., & Wibisana, I. G. (2020). Panduan penatalaksanaan kanker. *PERABOI (Perhimpunan Ahli Bedah Onkologi Indonesia)*, 115.
- Su, Peng, Qinghui Zhang, and Qifeng Yang. "Immunohistochemical analysis of Metadherin in proliferative and cancerous breast tissue." *Diagnostic Pathology* 5 (2010): 1-7.
- Swede, H., Sarwar, A., Magge, A., Braithwaite, D., Cook, L. S., Gregorio, D. I., Jones, B. A., R Hoag, J., Gonsalves, L., & L Salner, A. (2016). Mortality risk

- from comorbidities independent of triple-negative breast cancer status: NCI-SEER-based cohort analysis. *Cancer Causes & Control*, 27, 627–636.
- Tan, H., & Fu, D. (2023). Influence of advanced age on the prognosis of triple-negative breast cancer patients: A surveillance, epidemiology, and end results-based study. *Journal of Cancer Research and Therapeutics*.
- Thangarajah, Fabinsy, et al. "A retrospective analysis of Ki-67 index and its prognostic significance in over 800 primary breast cancer cases." *Anticancer research* 37.4 (2017): 1957-1964
- Turkman, Y. E. (2015). Biologic, demographic, and social factors affecting triple negative breast cancer outcomes. *Number 1/February 2015*, 19(1), 62–67.
- Urruticoechea, A., Smith, I. E., & Dowsett, M. (2005). Proliferation marker Ki-67 in early breast cancer. *Journal of Clinical Oncology*, 23(28), 7212–7220.
- Valachis, A., Nyström, P., Fredriksson, I., Wennstig, A.-K., & Ahlgren, J. (2021). Treatment patterns, risk for hospitalization and mortality in older patients with triple negative breast cancer. *Journal of Geriatric Oncology*, 12(2), 212–218.
- Viale, G., Group, the I. B. C. S., Regan, M. M., Group, the I. B. C. S., Mastropasqua, M. G., Group, the I. B. C. S., Maffini, F., Group, the I. B. C. S., Maiorano, E., & Group, the I. B. C. S. (2008). Predictive value of tumor Ki-67 expression in two randomized trials of adjuvant chemoendocrine therapy for node-negative breast cancer. *JNCI: Journal of the National Cancer Institute*, 100(3), 207–212.
- Vissio, E., Metovic, J., Osella-Abate, S., Bertero, L., Migliaretti, G., Borella, F., Benedetto, C., Sapino, A., Cassoni, P., & Castellano, I. (2020). Integration of Ki-67 index into AJCC 2018 staging provides additional prognostic information in breast tumours candidate for genomic profiling. *British Journal of Cancer*, 122(3), 382–387.
- Wang, C., & Yang, Q. (2011). Astrocyte elevated gene-1 and breast cancer. *Oncology Letters*, 2(3), 399–405.
- Wang, R.-X., Chen, S., Jin, X., & Shao, Z.-M. (2016). Value of Ki-67 expression in triple-negative breast cancer before and after neoadjuvant chemotherapy with weekly paclitaxel plus carboplatin. *Scientific Reports*, 6(1), 30091.
- Wang, X.-X., Jiang, Y.-Z., Li, J.-J., Song, C.-G., & Shao, Z.-M. (2016). Effect of nodal status on clinical outcomes of triple-negative breast cancer: a population-based study using the SEER 18 database. *Oncotarget*, 7(29), 46636.
- Widodo, I., Dwianingsih, E. K., Anwar, S. L., Triningsih, F. E., Utoro, T., & Aryandono, T. (2017). Prognostic value of clinicopathological factors for Indonesian breast carcinomas of different molecular subtypes. *Asian Pacific Journal of Cancer Prevention: APJCP*, 18(5), 1251.

- Wilson, Timothy R., et al. "Development of a robust RNA-based classifier to accurately determine ER, PR, and HER2 status in breast cancer clinical samples." *Breast cancer research and treatment* 148 (2014): 315-325.
- Wirtz, Ralph M., et al. "Biological subtyping of early breast cancer: a study comparing RT-qPCR with immunohistochemistry." *Breast cancer research and treatment* 157 (2016): 437-446
- Wu, Q., Ma, G., Deng, Y., Luo, W., Zhao, Y., Li, W., & Zhou, Q. (2019). Prognostic value of Ki-67 in patients with resected triple-negative breast cancer: a meta-analysis. *Frontiers in Oncology*, 9, 1068.
- Yavuz, B. B., Aktan, M., & Kanyilmaz, G. (2022). Prognostic Factors in Patients with Triple Negative Breast Cancer Undergoing Adjuvant Radiotherapy: A 10-Year Single Center Experience: Triple negative breast cancer. *Archives of Breast Cancer*, 377–385.
- Yin, J., Zhu, C., Wang, G., & Gu, J. (2022). Treatment for Triple-Negative Breast Cancer: An Umbrella Review of Meta-Analyses. *International Journal of General Medicine*, 5901–5914.
- Ying, Z., Li, J., & Li, M. (2011). Astrocyte elevated gene 1: biological functions and molecular mechanism in cancer and beyond. *Cell & Bioscience*, 1, 1–6.
- Yoo, B. K., Emdad, L., Lee, S.-G., Su, Z., Santhekadur, P., Chen, D., Gredler, R., Fisher, P. B., & Sarkar, D. (2011). Astrocyte elevated gene-1 (AEG-1): A multifunctional regulator of normal and abnormal physiology. *Pharmacology & Therapeutics*, 130(1), 1–8.
- Yuan, Peng, et al. "Ki-67 expression in luminal type breast cancer and its association with the clinicopathology of the cancer." *Oncology letters* 11.3 (2016): 2101-2105.
- Zhu, X., Chen, L., Huang, B., Wang, Y., Ji, L., Wu, J., Di, G., Liu, G., Yu, K., & Shao, Z. (2020). The prognostic and predictive potential of Ki-67 in triple-negative breast cancer. *Scientific Reports*, 10(1), 225.

## LAMPIRAN

### LEMBAR INFORMASI DAN PERSETUJUAN PASIEN

#### JUDUL PENELITIAN

Hubungan antara Ekspresi AEG-1 dan ATG5 pada *Triple Negative Breast Cancer*  
*Operable dengan Disease Free Survival*

- Kode Penelitian :
- Subyek penelitian :

Anda ditawarkan untuk ikut serta dalam suatu penelitian. Sebelum memutuskan ikut serta, penting bagi anda untuk memahami latar belakang penelitian, bagaimana data anda akan digunakan, berbagai prosedur penelitian, manfaat bagi anda, risiko dan ketidaknyamanan yang mungkin akan terjadi.

Luangkan waktu anda untuk membaca informasi berikut dengan seksama, dan diskusikan dengan dokter bila anda menginginkan nya. Jika anda sedang ikut penelitian lain, maka anda tidak dapat ikut dalam penelitian ini.

#### APA LATAR BELAKANG DAN TUJUAN PENELITIAN INI?

Anda menderita kanker payudara stadium dini (Stadium I, Stadium II)\*; Stadium lokal lanjut *operable* (Stadium T3N1M0)\*, belum dengan penyebaran, dan kanker anda termasuk subtype molekuler *Triple Negative Breast Cancer* (ditandai dengan ekspresi reseptor estrogen negatif, ekspresi reseptor progesterone negatif dan HER-2 Neu negatif). Kondisi ini diketahui dari pemeriksaan jaringan Histopatologi dari hasil operasi kanker payudara anda. (Tanda \*: sesuai stadium kanker payudara pasien).

Penyakit anda biasanya akan diobati dengan operasi, kemoterapi, dengan atau tanpa radiasi. Meskipun pengobatan telah dilakukan secara maksimal, namun beberapa pasien bisa mengalami kekambuhan. Salah satu penyebab kekambuhan adalah sifat tumor, kondisi pasien, dan faktor-faktor terkait gen.