The adverse event profile for the patients who received paclitaxel subsequent to AC was consistent with that seen in the pooled Intergroup study. Neutropenia occurred in 29% of patients (61% with grade III–IV severity) and was higher with the combination regimens than with cisplatin alone, as were episodes of fever and neutropenia. There were 55/102 (53%) courses with febrile neutropenia occurring on the paclitaxel/cisplatin arm and 9/102 (9%) on the cisplatin arm. Neutropenic fever was reported in 61/102 (59%) and 3/102 (3%) of patients, respectively. A total of 46/102 (45%) patients experienced one or more episodes of febrile neutropenia. In Study CA139-281, patients received paclitaxel at 100 mg/m²/week). If no dose-limiting toxicity was observed, patients were to receive 155 mg/m² and 175 mg/m² in subsequent cycles, respectively. The progression-free survival, which was not significantly different between the arms, was 1.5 months for the paclitaxel/cisplatin arm and 1.8 months for the cisplatin/etoposide arm.Overall, the median survival time for patients with metastatic breast cancer is approximately 18 months, with a 1-year survival rate of approximately 60%. The median survival time for patients with stage IV breast cancer is approximately 24 months, with a 1-year survival rate of approximately 70%. The median survival time for patients with stage III breast cancer is approximately 36 months, with a 1-year survival rate of approximately 80%.