

CHARACTERISATION OF CHRONIC TOXICITIES AFTER PEMBROLIZUMAB THERAPY IN A REAL-WORLD COHORT

del Barrio Buesa, S¹; Lucena Campillo, A¹; González-Haba Peña, E¹; Martín Bartolomé, M¹; Montes Gómez, JM¹; Samitier Samitier, D¹; Montero Antón, MDP¹; Carrillo Burdallo, A¹; Domínguez Chaparro, G¹; Gómez Costas, D¹; Herranz Alonso, A¹; Sanjurjo Sáez, M¹

¹ Hospital Pharmacy. Hospital General Universitario Gregorio Marañón. Madrid, Spain.

BACKGROUND AND IMPORTANCE

Immune checkpoint inhibitors (ICIs) have revolutionised cancer treatment. However, **chronic toxicities** that persist beyond treatment discontinuation remain **insufficiently characterised in real-world settings**.

AIM AND OBJECTIVE

Characterise the **prevalence, type and management** of chronic toxicities associated with pembrolizumab.

MATERIALS AND METHODS

Design: Retrospective real-world observational study including patients who discontinued pembrolizumab and remained alive ≥ 12 months afterwards between 01/2014 and 12/2022.

Recorded variables:

Demographic variables: gender, age, body mass index (BMI).
Cancer type.
Pembrolizumab treatment duration.
Type and grade of chronic toxicity.
Management strategies and clinical outcomes.



Study definitions and data collection:

- ✓ **Chronic toxicity** defined as any adverse event persisting ≥ 12 weeks after discontinuation.
- ✓ **Clinical data** retrieved from electronic medical records.
- ✓ **Results** expressed as median and interquartil range (IQR).

RESULTS



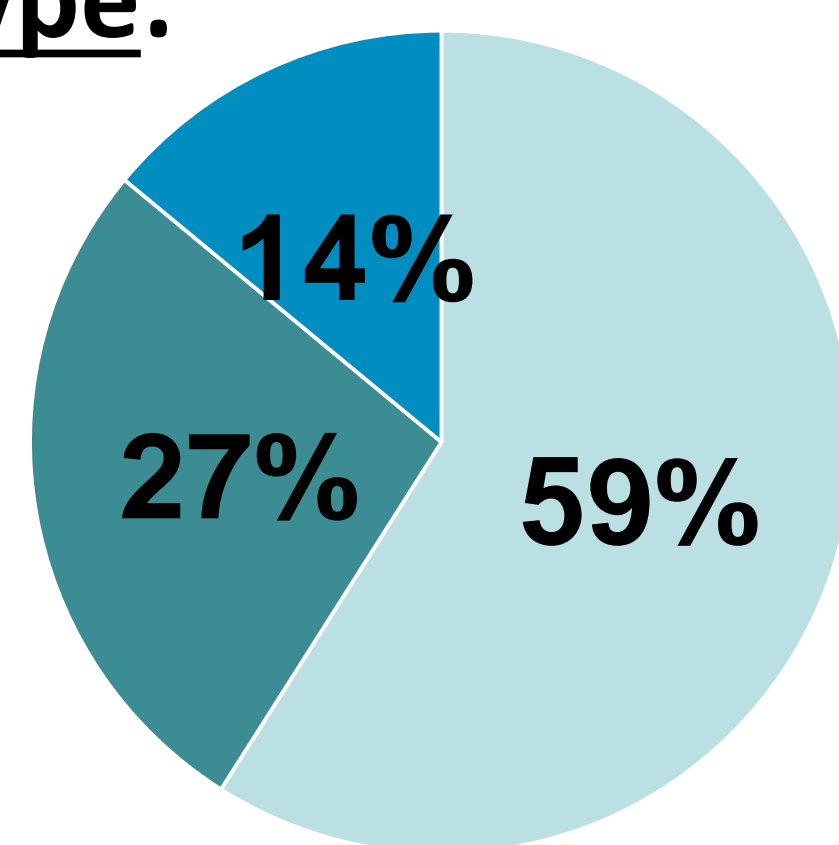
Sample description:

- N= **100 patients**
- Gender: **61% men**
- Median age (years): **64.7** (56.3 – 76)
- Median BMI: **24.8** (22.0 – 28.1)

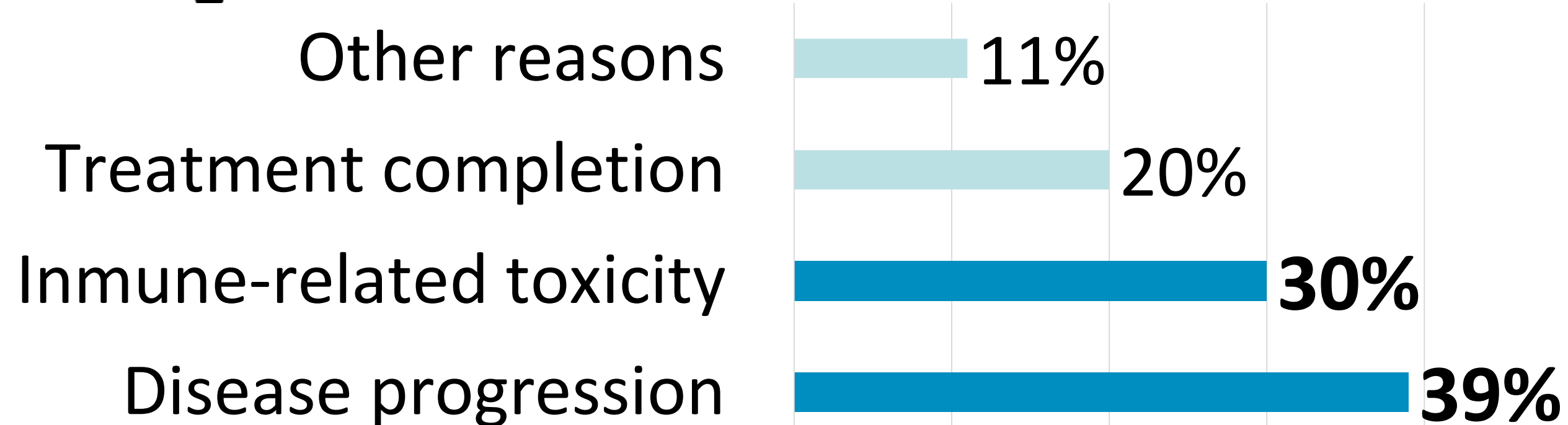


Cancer type:

- Lung cancer
- Melanoma
- Other malignancies

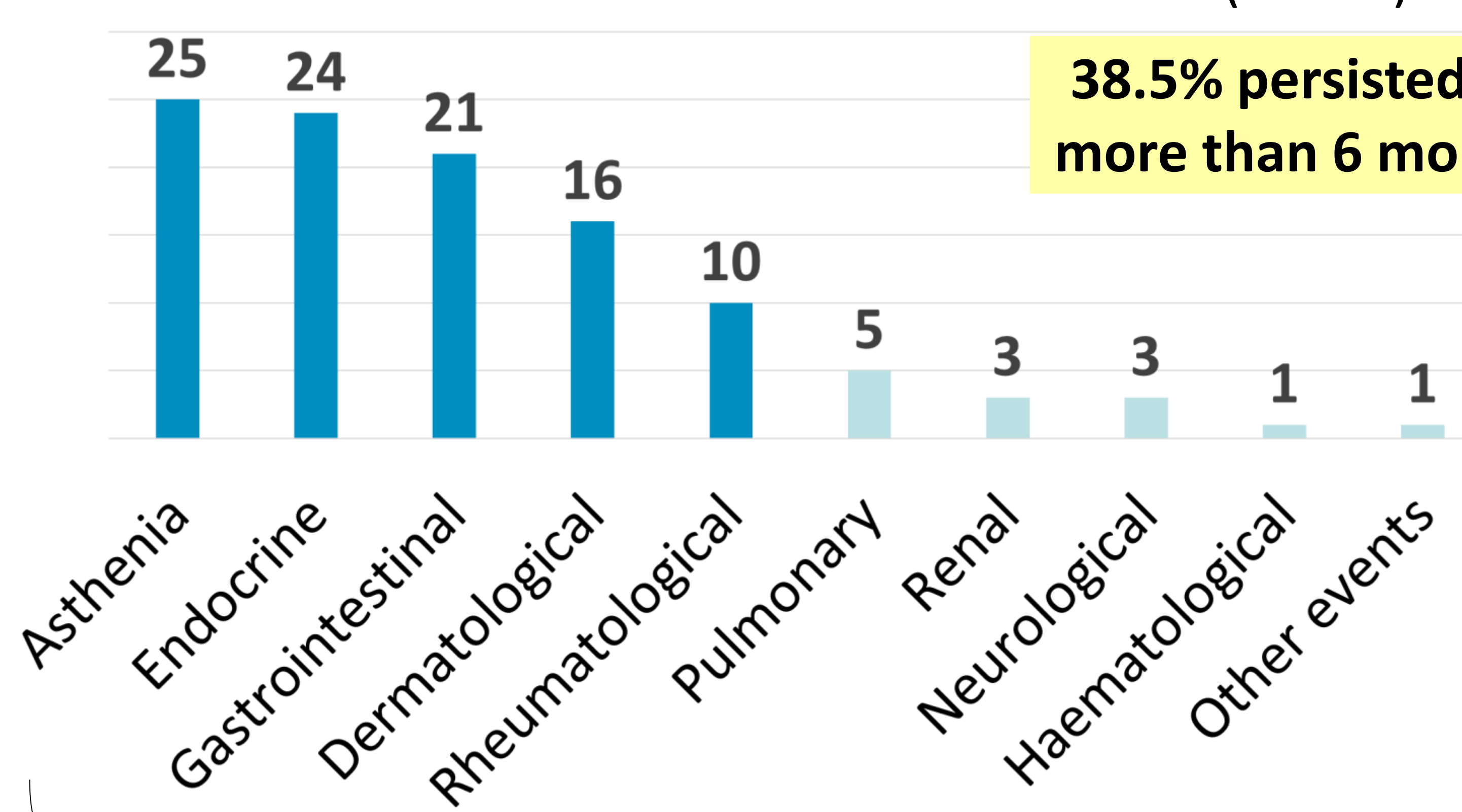


Reasons for discontinuation:



Adverse events:

Total adverse events: 340 → Chronic adverse events: 110 (32.4%)



38.5% persisted for more than 6 months

Median severity grade: 2 (1 -3)



Management strategies of chronic toxicities:

17% Corticosteroids: 89% low-dose / 11% high-dose.
 2% Other immunosuppressants.

CONCLUSION AND RELEVANCE

Chronic toxicities after pembrolizumab are **common, often moderate, and may persist for months**. Endocrine, gastrointestinal and rheumatological irAEs predominate, requiring **long-term follow-up**. Identifying their frequency and management is essential to **optimise multidisciplinary care**.

