EFFECTIVENESS OF ABEMACICLIB, PALBOCICLIB AND RIBOCICLIB IN METASTATIC BREAST CANCER

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Background and Importance

Cyclin-dependent kinase 4/6 inhibitors (CDK4/6 inhibitors): abemaciclib-(ABE), palbociclib-(PAL), and ribociclib-(RIB), have shown efficacy in treating metastatic hormone receptor-positive (HR+) breast cancer (MBC), as demonstrated in the MONARCH-3, PALOMA-2, and MONALEESA-2 trials, respectively.

Aim and objectives

To evaluate and compare the effectiveness of CDK4/6 inhibitors in routine clinical practice.

Materials and Methods

Retrospective observational study (September 2017 to May 2024)

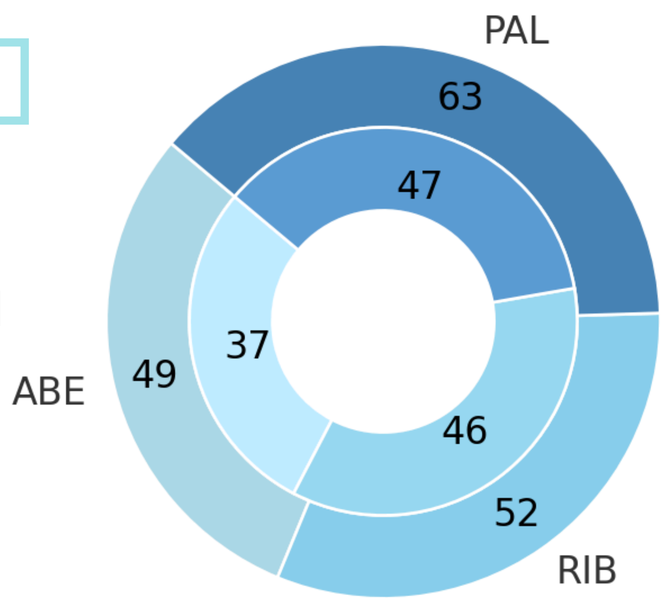
Patients treated with CDK4/6 inhibitors for HR+/HER2- MBC.

Effectiveness was assessed by analyzing median progression-free survival (PFS) and overall survival (OS) using Kaplan-Meier analysis. Survival curves were compared with the log-rank test.

Results

164 patients
Mean age 64.7 years [31-90]
100%

The number of patients, both total and first-line, is shown for each treatment:



Median PFS and OS for first-line therapy were analyzed across treatments, with comparisons among groups:

	PFS (months)	p-value	OS (months)	p-value
ABE	10.4	vs RIB: 0.014 vs PAL: 0.035	12.2	vs RIB: 0.204 vs PAL: 0.312
RIB	18.1	vs PAL: 0.193	9.2	vs PAL: 0.464
PAL	15.4	-	20.2	-

Conclusion and Relevance

The median PFS and OS observed were lower than those reported in pivotal trials, likely due to the observational study design, smaller sample size, and patient characteristics in routine clinical practice. Larger prospective studies are needed to confirm the observed PFS differences between ABE and other CDK4/6 inhibitors.

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