

















**Abstract Number: CP-06** 

# KETOCONAZOLE AND PERFORMANCE STATUS AS PREDICTIVE FACTORS OF RESPONSE TO ABIRATERONE IN METASTASIC PROSTATE CANCER IN REAL-LIFE CONDITIONS

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## **OBJECTIVES**

Abiraterone is an oral antiandrogen therapy approved in September 2011 by the European Medicines Agency (EMA) for metastatic castration resistant prostate cancer (mCRPC) in men whose disease had progressed on a docetaxel-based chemotherapy, and was included in our Hospital's formulary in 2012. **OBJECTIVE:** To assess the effectiveness of abiraterone in patients with mCRPC in our hospital in real-life conditions and to analyze previous ketonazole therapy and patient performance status as prognosis factors of response to the treatment with abiraterone.

## METHODS

**Design:** retrospective observational study (January 2012-October 2014)

- Inclusion criteria: patients that had started treatment with abiraterone for mCRPC after chemotherapy
- Exclusion criteria: clinical trial patients

**VARIABLES** 

Demographic: date of birth Clinical: ECOG, progression date

Pharmacotherapeutic: dosing, treatment duration, previous treatments for the mCRPC

**EFFECTIVENESS:** Progression free survival (PFS)

- Median PFS (Kaplan-Meier plots)
  - Subgroup analyses by:
    - -previous ketoconazole therapy
    - -peformance status

## RESULTS

**Table 1.** Baseline population characteristics

| BASELINE POPULATION (n=36)                            |                 |           |  |  |  |
|---|-----------------|-----------|--|--|--|
| Mean age [range]                                      | 78 [65 - 87]    |           |  |  |  |
| ECOG PS n (%)   | ECOG ≤1         | 30 (83.3) |  |  |  |
|   | ECOG >1         | 6 (16.7)  |  |  |  |
| Previous Ketoconazole therapy n (%)                   | 13 (36.1)       |           |  |  |  |
| Median duration of treatment with abiraterona [range] | 7.1 [3.0 -23.7] |           |  |  |  |

**EFFECTIVENESS VARIABLE:** Median PFS 7.5 months (CI 95% 5.14 - 9.85)

Table 2. Subgroup analyses of posible predictive response factors

|                                 | Patients without Previous Ketoconazole |              | Patients with Previous Ketoconazole |             |      |
|---------------------------------|--|--------------|-------------------------------------|-------------|------|
|                                 |  |              |                                     |             |      |
|                                 | PFS                                    | (CI 95%)     | PFS                                 | (CI 95%)    | p    |
| KETOCONAZOL AS PREVIOUS THERAPY | 9.5                                    | (5.7 - 11.4) | 6.9                                 | (4.3 - 9.8) | n.s. |
|                                 | Patients with                          |              | Patients with                       |             |      |
|                                 | ECOG≤1                                 |              | ECOG>1                              |             |      |
|                                 | PFS                                    | (CI 95%)     | PFS                                 | (CI 95%)    | p    |
|                                 |  |              |                                     |             |      |

## CONCLUSIONS

The effectiveness of abiraterone in the treatment of mCRPC under real-life conditions is consistent with the clinical trials. Patients without previous ketoconazole treatment and a good performance status had better progression free survival outcomes, although there was no result statistically significant.

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