

DETERMINATION OF PREDICTIVE FACTORS FOR IMMUNE-RELATED TOXICITY IN LUNG CANCER PATIENTS TREATED WITH IMMUNOTHERAPY

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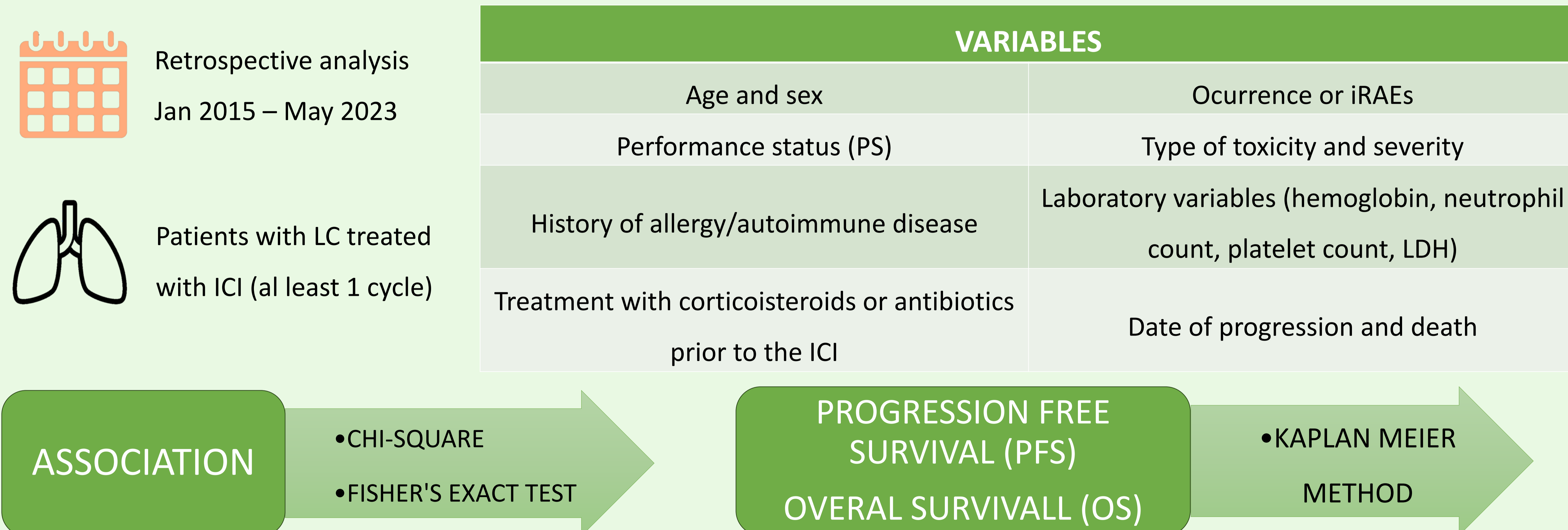
What was done

We conduct a retrospective observational study in order to analyze possible factors associated with the incidence of **immune-related adverse events (iRAEs)** in **lung cancer (LC)** patients treated with **immune checkpoint inhibitors (ICI)**.

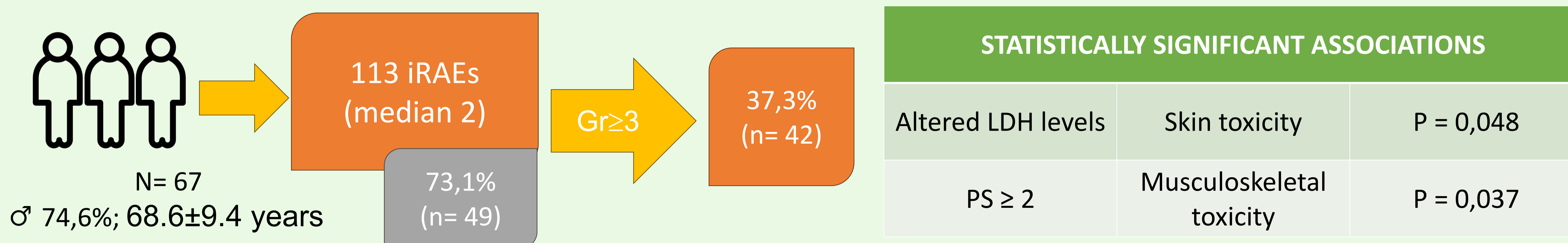
Why was done

Immunotherapy has provided better responses and tolerance in the treatment of LC than intravenous chemotherapy. However, it can also induce autoimmune adverse effects that could lead to hospital admission or death of the patient. Due to the risk of iRAEs, we have analyzed possible factors related to its occurrence in order to **improve patient's safety**.

How it was done



What was achieved



	Liver toxicity	Asthenia	Musculoskeletal toxicity
History of allergy/autoimmune disease	P= 0,015	P = 0,027	P = 0,006
Corticosteroids prior ICI	P= 0,015	P = 0,021	P = 0,006
Antibiotics prior ICI	P= 0,015	P= 0,032	P = 0,005

Patients with iRAEs had longer PFS (14.8 vs. 3.3 months) and longer OS (19.2 vs. 2.9 months).

What is next

New variables should be identified or new algorithms should be designed to predict the occurrence of severe iRAEs.



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