EVALUATION STUDY OF THE CHAGE IN ADMINISTRATION TIMING OF FIXED COMBINATION: NETUPITANT AND PALONOSETRON IN ONCOHEMATOLOGIC PATIENTS WITH HIGH DOSES OF CARBOPLATIN

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Background and Importance

Chemotherapy (CT) regimens with carboplatin AUC≥4 should receive an antiemetic prophylaxis based on a **triple** combination of drugs: netupitant with palonosetron [NEPA(300/0,5 mg), Akinzeo®] and dexamethasone (DEX).

- NEPA administration: 1 h before CT → At home, before going to day hospital
  - → Alternative: NEPA 15 minutes before CT → At day hospital

Aim and Objectives

- Evaluate the effectiveness, in terms of no acute and delayed chemotherapy-induced nausea and vomiting (CINV), of the change in administration timing of NEPA from 1 hour to 15 minutes before the chemotherapy

Materials and Methods

- Single-center, national, open-label study
- N=129 patients
- Duration: February to May 2021
- Evaluation tool: MAT questionnaire → 24h (early CINV); 4 days (delayed CINV)
- Statistic analysis: ΔCINV % between NEPA 0 and NEPA 1: Chi-Square test

NEPA 0 (control)

NEPA (P.O) 1h before CT
+
DEX (I.V) 30 min before CT

NEPA 1 (control)

NEPA (P.O) 15 min before CT
+
DEX (I.V) 30 min before CT

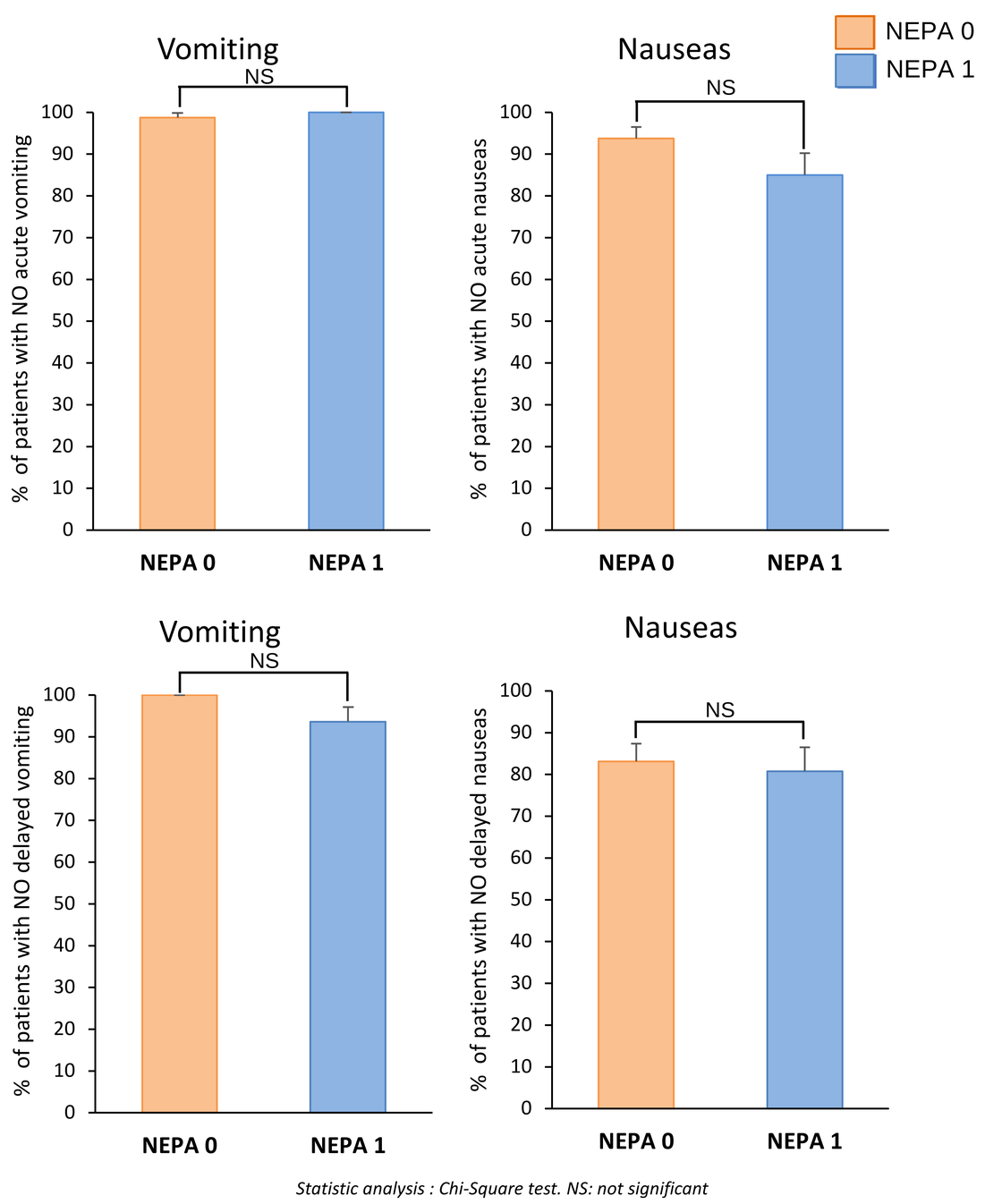
Results

N=129 patients → NEPA 0 : 82 (63.6); NEPA 1 : 47 (36.4)

Patients´ characteristic	NEPA 0	NEPA 1
Participants – n (%)	82	47
Age in years (mean ± SD)	67.9 (58.8-77.0)	65.4 (54.9-76.0)
Sex (M/F) – n patients (%)	46/36 (56.1/43.9)	14/28 (29.8/59.6)
Type of cancer – n patients (%)		
Lung	56 (68.3)	27 (57.4)
Gynecological	17 (20.7)	14 (29.8)
Head and neck	4 (4.9)	2 (4.3)
Others	5 (6.1)	4 (8.5)
Cancer stage - n patients (%)		
III	28 (34.1)	15 (31.9)
IV	35 (42.7)	21 (44.7)
Others	19 (23.2)	11 (23.4)

ACUTE CINV (<24h)

DELAYED CINV (24-120h)



Statistic analysis : Chi-Square test. NS: not significant

Thirteen patients started in NEPA 0 and then moved to NEPA 1; the results of the intrapatient study showed that developing CINV is more related to personal characteristics than of NEPA administration timing.

Conclusion and Relevance

- The change of NEPA administration timing (15 min before CT) has showed similar effectiveness to the standard one (1 h before CT), with the benefit that NEPA can be administered at onco-hematological day hospital rather than taking home.
- Simplifying the antiemetic prophylaxis regimen is expected to increase adherence while maintaining the treatment effectiveness.