SACITUZUMAB-GOVITECAN IN METASTATIC TRIPLE-NEGATIVE BREAST CANCER: A MULTICENTER EFFECTIVENESS AND SAFETY STUDY

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BACKGROUND AND IMPORTANCE

Sacituzumab-govitecan(SG) is a new antibody-drug conjugate approved for unresectable/metastatic triple negative breast cancer(TNBC), available from the end of 2022 in the Spanish public health system, so there are still few data published in real life.

AIM AND OBJETIVES

To analyze the effectiveness and safety of SG in TNBC of patients from the three main hospitals of a city

MATERIALS AND METHODS

Retrospective, observational, and multicenter study

including all patients treated with SG

until July/2023

Data were obtained from the electronic medical record and prescription software. SPSS-Statistics v.21® was used for processing

VARIABLES

- Sex, age
- Body mass index (BMI)
- Hormone receptor (HR)
- Human epidermal growth receptor-2 (HER2) status
- Location of metastases
- BRCA mutational status
- ECOG
- Duration of treatment
- Cause of treatment discontinuation
- Previous chemotherapy lines

Effectiveness:
- Objetive response rate (ORR)
- Progression-free survival (PFS)
- Overall survival (OS)

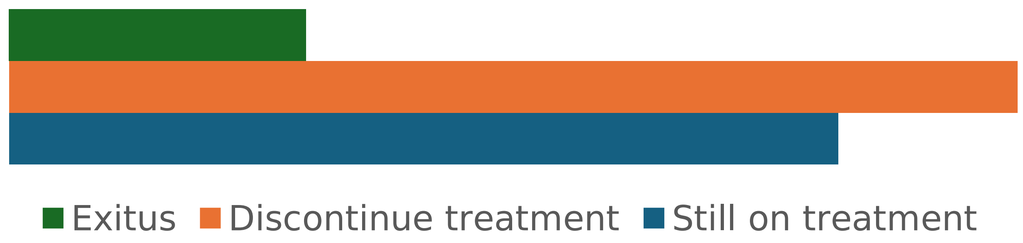
Safety:
- Adverse effects

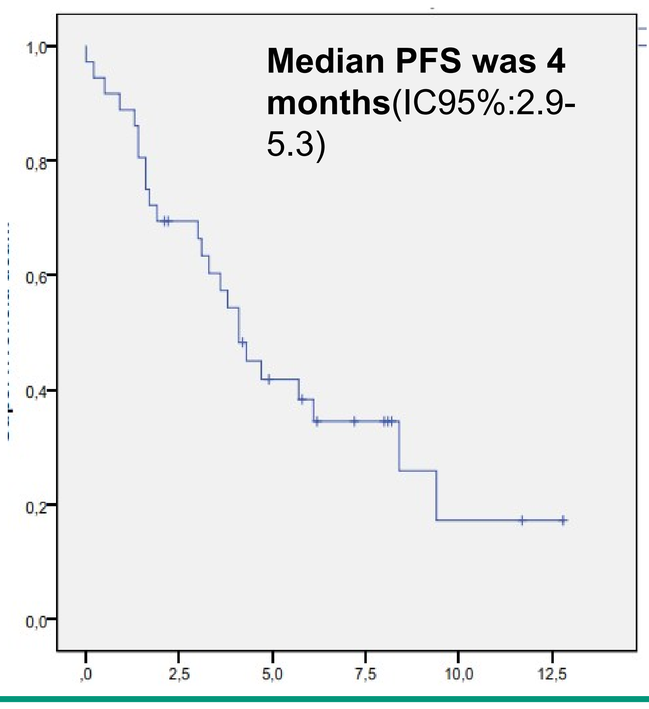
RESULTS

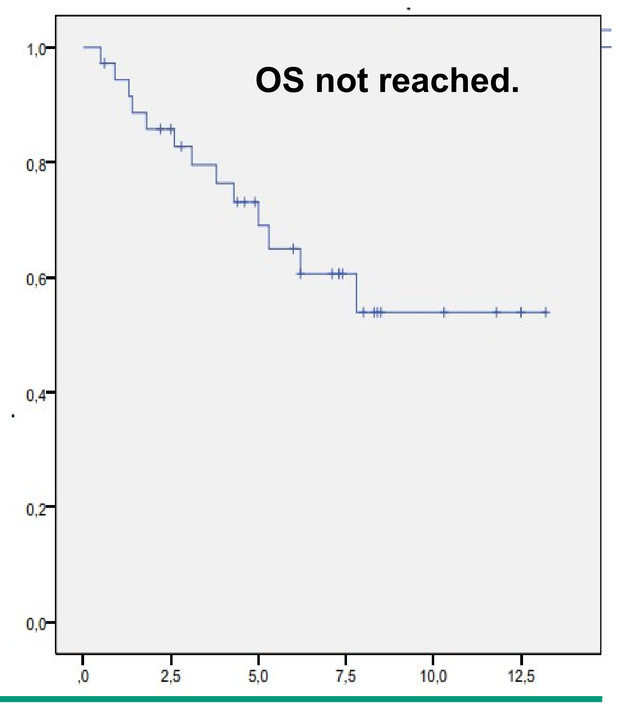
N= 36		
Female, n (%)	100	
Age, median (RIQ)	52,5 (RIQ: 64.3-46.8)	
BMI, media (SD)	25,8 (4,9)	
primary prophylaxis with G-CSF, N (%)	30,6	
Metastases, n (%)	Lung	63,9
	Bone	36
	Hepatic	30,5
	Ganglionar	25
BRCA, n (%)	Negative	61,1
	BRCA2	5,6
	Not available	33,3
ECOG 0-1, n (%)	75	
Cycles receives, median (RIQ)	4 (8,1-2,4)	
Previous CT-lines, median (RIQ)	2 (3-1)	

EFFECTIVENESS

ORR, n (%)	25,0
Stable disease, n (%)	22,2







SAFETY

Some AE during treatment, n (%)	97,2
Asthenia	80.5%(G3-4:2.8%
Neutropenia	61%(G3-4:8.3%
Diarrhea	44.4%(G3-4:11.1%
Alopecia	44.4%(G3-4:5.5%

69.4% had any reduction or delay of dose because of toxicity

no patient discontinued treatment due to AEs

CONCLUSIONS AND RELEVANCE

Median PFS was lower than in the pivotal ASCENT trial; moreover. Although the majority presented some AE, in no case these forced to treatment discontinuation. Further studies with a larger sample size and longer follow-up period are needed to confirm these real-life results.

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