

ASSOCIATION BETWEEN IMMUNE-RELATED EFFECTS AND EFFECTIVENESS OF FIRST-LINE PEMBROLIZUMAB IN ADVANCED NON-SMALL CELL LUNG CANCER

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BACKGROUND AND IMPORTANCE

Pembrolizumab in monotherapy (in patients with PD-L1 expression $\geq 50\%$) or in combination with platinum-based chemotherapy (CT), (PDL-1 $<50\%$), is the new standard therapy in first-line treatment of advanced or metastatic non-small cell lung cancer (mNSCLC).



AIM AND OBJETIVES

To determine whether the incidence of immune-related adverse events (irAEs) following the use of pembrolizumab in first-line mNSCLC, is associated with clinical outcomes in real-world practice.

MATERIALS AND METHODS

An observational, retrospective study

Patients with mNSCLC treated with pembrolizumab in first-line

From January 2017 to January 2021

Baseline patient characteristics were collected

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Treatment effectiveness: OS and PFS was measured

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Immune-related adverse effects (irAEs) were categorised

OS and PFS were calculated for the population with any irAEs of any grade (irAEs+) and compared to patients without irAEs (irAEs-), in order to test our hypothesis.

RESULTS

A total of 62 patients:

Mean age 67.44 years; 77.42% men

47% former smokers, 45% smokers

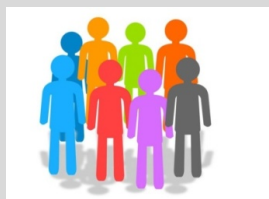
Adenocarcinoma (87%)

ECOG/PS-1=50%, ECOG/PS-0=38%, ALK/ROS-1/EGFR negative (89%)

PD-L1 $\geq 50\%$ (N=31), PD-L1 $<50\%$ (N=27) and unknown (N=4)

50% received pembrolizumab and 50% pembrolizumab + CT

75.81% patients discontinued treatment due to progression



irEAs (N=164) were observed in 77.4% of patients

Overall (N=62)

Median OS (months):

10.6 (95%CI 8.2-13.05)

irAEs+ (N=48)

10.9 (95%CI: 8.6 - 13.2)

irAE- (N=14)

4.4 (95% CI: 0 - 15.3)

Median PFS (months):

7.4 (IC95%: 4,6 - 10,3)

8.7 (95%CI: 5.9 - 11.6)

2.3 (95% CI: 0 - 11.7)

There were no significant differences in PFS and OS among the different populations

CONCLUSIONS AND RELEVANCE

Our population did not reach statistical significance in the association between the presence of irEAs and clinical benefit.

This may be due to limited sample size.

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