

# EFFECTIVENESS AND SAFETY OF IBRUTINIB IN CHRONIC LYMPHATIC LEUKAEMIA: MULTICENTRE STUDY

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## BACKGROUND AND IMPORTANCE

**Ibrutinib** is a potent Burton tyrosine kinase inhibitor involved in the proliferation and survival of chronic lymphatic leukaemia (CLL) B-cells. **This study was mainly motivated by suspensions for toxicity.**

## AIM AND OBJECTIVES



The objective is to analyse the **effectiveness and safety of ibrutinib in CLL.**

## MATERIALS AND METHODS

**Retrospective observational study** including all patients with CLL treated with ibrutinib until September-2020 from **two hospitals**. Data were obtained from Farmatools® and clinical records. SPSS Statistics® v17.0 was used for statistical analysis. The analyzed variables were:

DEMOGRAPHIC AND CLINICAL DATA (D/C)	TREATMENT	EFFECTIVENESS	SAFETY
Number of patients	Previous lines ( <b>PL<sub>IBRUTINIB</sub></b> )	Progression-free-survival ( <b>PFS</b> ) and overall-survival ( <b>OS</b> ) using Kaplan-Meyer statistical analysis.	The most frequent number, type and degree of adverse events ( <b>AE</b> ) according to the Common Terminology Criteria for Adverse Events (CTCAE) v4.03
Sex and age			
Presence of mutations in chromosome TP53 ( <b>mut-TP53</b> ) and deletion of chromosome 17 ( <b>del17p</b> )	Duration of treatment ( <b>DT<sub>IBRUTINIB</sub></b> )		Necessary treatment modifications ( <b>TM</b> ) (dose reduction ( <b>DR</b> ); treatment suspension ( <b>TS</b> ); both ( <b>DR-TS</b> )).
Progression to Richter ( <b>PR</b> )			

## RESULTS

- **Effectiveness:** at 12-24 months, the **PFS** was 79.3%-72.8%; the **OS** was 85.1%-76.4%. Mean values obtained were  $\bar{x}$ PFS=38 months  $\pm$  3.3 [95% CI 31.7-44.5] and  $\bar{x}$ OS=40.5 months  $\pm$  2.9 [95% CI 34.8-46.2].

- **Safety:** The most frequent AE ( $\geq 15\%$ ) were diarrhoea, pneumonia, skin rash and haematomas. The most frequent G3-4 AE ( $\geq 5\%$ ) were neutropenia, pneumonia, skin rash, anaemia and atrial fibrillation. A **53% TM** by AE: 23% TS, 19% DR-TS and 11% DR.

D/C	TREATMENT
60 patients	<b>PL<sub>IBRUTINIB</sub></b>
58% Male; median 80 years old (55-98)	56% one-third; 3% $\geq$ four
<b>Mut-TP53</b> (8.3%); <b>Del17p</b> (15%)	Median <b>DT<sub>IBRUTINIB</sub></b> 13.5 months
<b>PR</b> (8.3%)	(1-53)

## CONCLUSION AND RELEVANCE

The effectiveness and safety results obtained were similar to those of the pivotal studies (PS). The **PFS** and **OS** at 12-24 months of our study (79.3%-72.8% and 85.1%-76.4%) **were lower than the results of the PS** (89.8%-82.3% and 90.2%-89.6%). With regard to the safety data, **the PS show lower dropout rates due to AE** (6% vs 23%) and lower dose reductions (8% vs 19%) although the **toxicity profile and the most frequent G3-4 AE's were similar to the PS.**



## REFERENCES AND/OR ACKNOWLEDGEMENTS

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[https://www.ema.europa.eu/en/documents/assessment-report/imbruvica-epar-public-assessment-report\\_en.pdf](https://www.ema.europa.eu/en/documents/assessment-report/imbruvica-epar-public-assessment-report_en.pdf)

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