

SURVIVAL BENEFIT WITH LENALIDOMIDE AND DEXAMETHASONE IN PATIENTS WITH MYELOMA: AREA UNDER THE CURVE-BASED REANALYSIS

CP-148

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BACKGROUND

Benboubker et al. recently reported the results of lenalidomide+dexamethasone (Ld) in patients with melanoma versus the standard therapy, with a difference between medians of 4.3 months in progression free survival (PFS).

NEVERTHELESS

As seen in the shape of the curves, difference in median survival (DMS) may not provide a good estimate of the survival benefit.

PURPOSE

To **reanalyze** the survival benefit of lenalidomide from the PFS curves using an area-under-curves (AUC) based method.

MATERIALS AND METHODS

Kaplan-Meier PFS and OS **curves** were extracted from Benboubker et al.'s article.

METHOD

According to a previously published method (1)

GRAPHICAL AUC

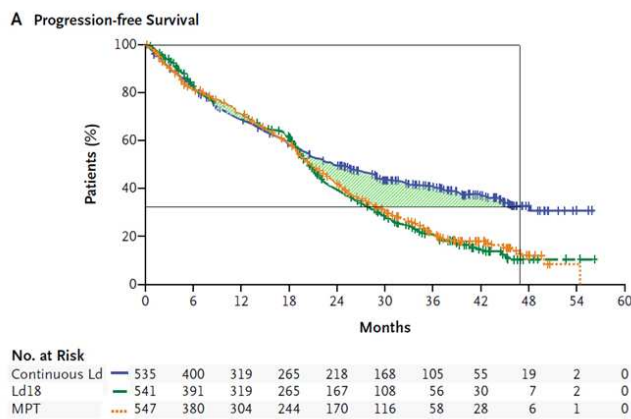
Graphical AUC was applied compared to DMS.

AUC method quantifies the difference between areas, and the results are expressed in time units.

(1) Alegre-Del Rey E.J., et al. **Area-based measures for assessing survival benefit in Kaplan-Meier's curves**. ESMO Congress, Amsterdam 2013. URL: <http://eccamsterdam2013.ecco-org.eu/scientific-programme/searchable-programme.aspx#anchorScpr> (accessed 08/10/2014).

RESULTS

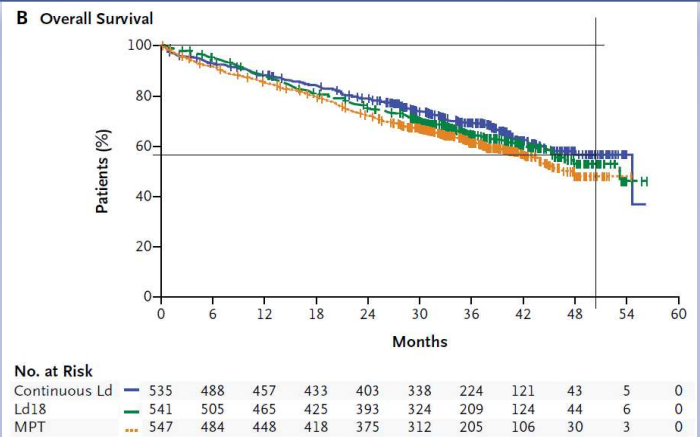
PROGRESSION FREE SURVIVAL



67.5% patients included & 47 months of follow-up,

PFS = 2.7 months (17.0 vs. 14.3)

OVERALL SURVIVAL



43.5% patients analyzed & 50 months of follow-up

OS = 5.3 months (25.5 vs. 20.2)

CONCLUSIONS

AUC-based analysis showed a shorter survival benefit than the difference in median survival.

This is probably related to the shape of the curves, which diverged at the medium zone of the graph.

OS reanalysis is very limited because the observation time is insufficient to provide mature data.