

# ANALYSIS OF OLAPARIB AND TALAZOPARIB AS POSSIBLE THERAPEUTIC ALTERNATIVES IN ADVANCED BREAST CANCER AND A GERMLINE BRCA MUTATION

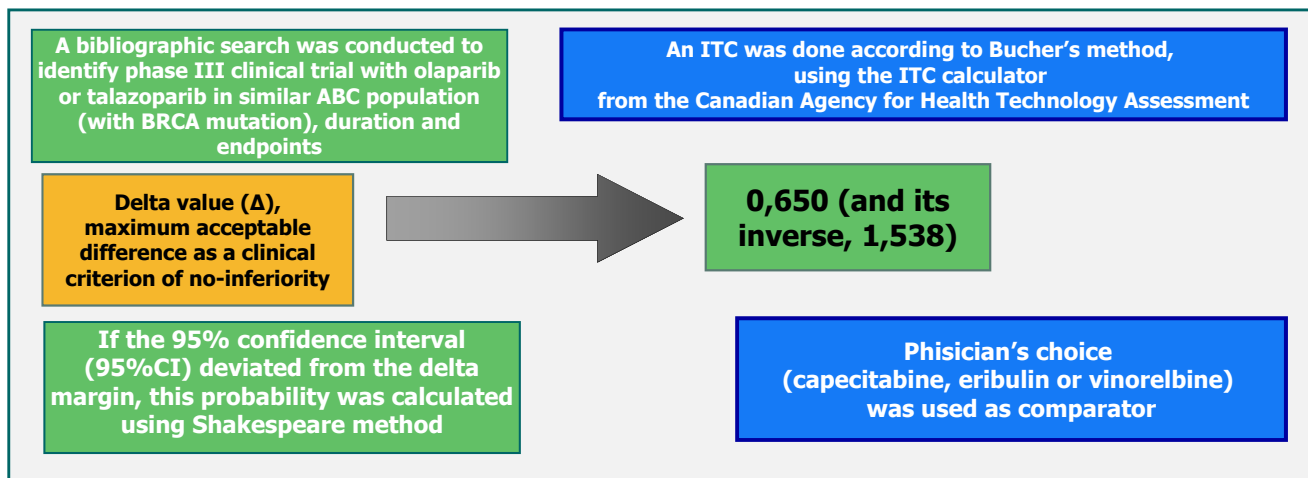


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## PURPOSE

To establish whether olaparib and talazoparib can be declared equivalent therapeutic alternatives (ETA) in patients with ABC and a BRCA mutation, through an indirect treatment comparison (ITC) using a common comparator

## MATERIAL AND METHODS



## RESULTS

Clinical trial included were: open-label, randomized, HER 2 negative, capecitabine, eribulin or vinorelbine as comparator, ECOG 0-1, pretreated with taxane, anthracycline or both, and if platinum was used without progression to this one

Primary end point was radiologic progression-free survival (PFS)

| Reference   | PFS: HR (95%CI)    |
|-------------|--------------------|
| Olaparib    | 0.58 (0.43-0.80)   |
| Talazoparib | 0.54 (0.41-0.71)   |
| ITC         | 1.074 (0.71-1.626) |

Differences were found in the percentage of patients with ECOG 0-1 (olaparib 72.2% vs. talazoparib 53.3%), excepting this characteristic the population of both studies was similar

Two trials were included, one of each drug

The 95%CI was broad (high level of uncertainty) and exceeds the equivalence margin, and the probability of a result falling out the delta margin was < 4,5%.

## CONCLUSION

ITC showed no statistically differences in PFS between olaparib and talazoparib. There is a probable clinical equivalence between both drugs. Although a fraction crosses the confidence interval, this is not statistically significant. Olaparib and talazoparib could be considered as ETA in most patients with advanced breast cancer.



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