

SAFETY AND TOLERABILITY OF PALBOCICLIB IN CLINICAL PRACTICE IN A TERTIARY HOSPITAL

Fernández Fradejas J¹, Quesada-Muñoz L¹, Vélez-Díaz-Pallarés M¹, Vida Navas E², Cortés Salgado A², Cabello Bravo A¹, Bermejo Vicedo, T¹

¹ Pharmacy Department. Hospital Universitario Ramón y Cajal. Madrid. Spain. ² Oncology Department. Hospital Universitario Ramón y Cajal. Madrid. Spain.

BACKGROUND AND IMPORTANCE

Due to its recent commercialization, palbociclib's security profile is submitted to special surveillance. Tolerability problems often led to dose reductions, introduction of supportive treatment or even treatment discontinuation.

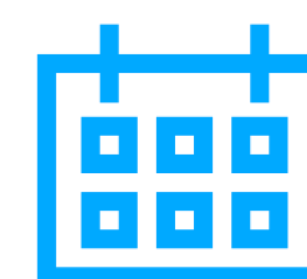
AIM AND OBJECTIVES

To evaluate the safety and tolerability of palbociclib in clinical practice in a third-level hospital.

MATERIALS AND METHODS



Study design Retrospective, cohort study.



When? 1 January 2019 – 31 August 2019.

How?

Demographic and clinical data were collected from the electronic medical record. Toxicity level was classified according to CTCAE v 5.0.



Inclusion criteria: All patients who received at least one cycle of palbociclib.

RESULTS

PATIENTS AND TREATMENT

N = 40 (all female). Median **age**: 60 years (range 34-88). **ECOG** 0-1 at baseline: all patients.
Number of cycles received: 4 (range 1-8).
Combination therapy: aromatase inhibitor (75%), fulvestrant (25%).

SAFETY AND TOLERABILITY

Adverse event (AE)	Incidence (%)
Grade 3-4 neutropenia	47
Any grade anaemia	45
Any grade thrombocytopenia	37
Any grade leukopenia	35
Grade 1-2 neutropenia	30
Nausea	15
Asthenia	15
Any grade lymphopenia	7
Hypertransaminasemia	7
Infections	5

TOXICITY MANAGEMENT

Action required	Patients (%)
Temporary interruption	50
Dose reduction to 100 mg	22,5
Dose reduction to 75 mg	0
G-CSF* (supportive therapy)	7,5
Treatment discontinuation	2,5

*Granulocyte colony-stimulating factor.

No patients suffered from febrile neutropenia.

CONCLUSIONS

- ✓ Our population showed mainly haematological toxicities, with an incidence of neutropenia similar to clinical trials (CT).
- ✓ Incidence of infections and non-haematological toxicities was lower than reported in CT.
- ✓ Treatment was generally well tolerated and AE were easily controlled.



@j_ffradejas
@farhc