

REAL-LIFE DATA ON THE USE OF ABIRATERONE/ ENZALUTAMIDE IN CASTRATION-RESISTANT PROSTATE CANCER

L. MOÑINO DOMÍNGUEZ, A. AGUADO PAREDES, J. CORDERO RAMOS, A. MARTÍNEZ SUÁREZ, R. CASTILLEJO GARCÍA
HOSPITAL UNIVERSITARIO VIRGEN MACARENA, HOSPITAL PHARMACY, SEVILLE, SPAIN

Background and importance

Abiraterone and enzalutamide are used for treating castration-resistant prostate cancer (CRPC). The lack of direct comparisons makes the selection and positioning of these drugs in this new scenario difficult.

Aim and objectives

To compare ABIRATERONE (A) and ENZALUTAMIDE (E) use in metastatic-CRPC, and to provide real clinical data on effectiveness and safety.



Material and methods

OBSERVATIONAL RETROSPECTIVE STUDY
January 2015-September 2021



Patients with **metastatic CRPC** with 50% of the data available in the electronic medical record



Primary effectiveness variable → **PROGRESSION-FREE SURVIVAL (PFS)**

Other variables: **overall survival (OS)** and **survival probabilities**



Safety variables → **PERCENTAGE OF PATIENTS WITH ADVERSE EVENT (AE)** and grade



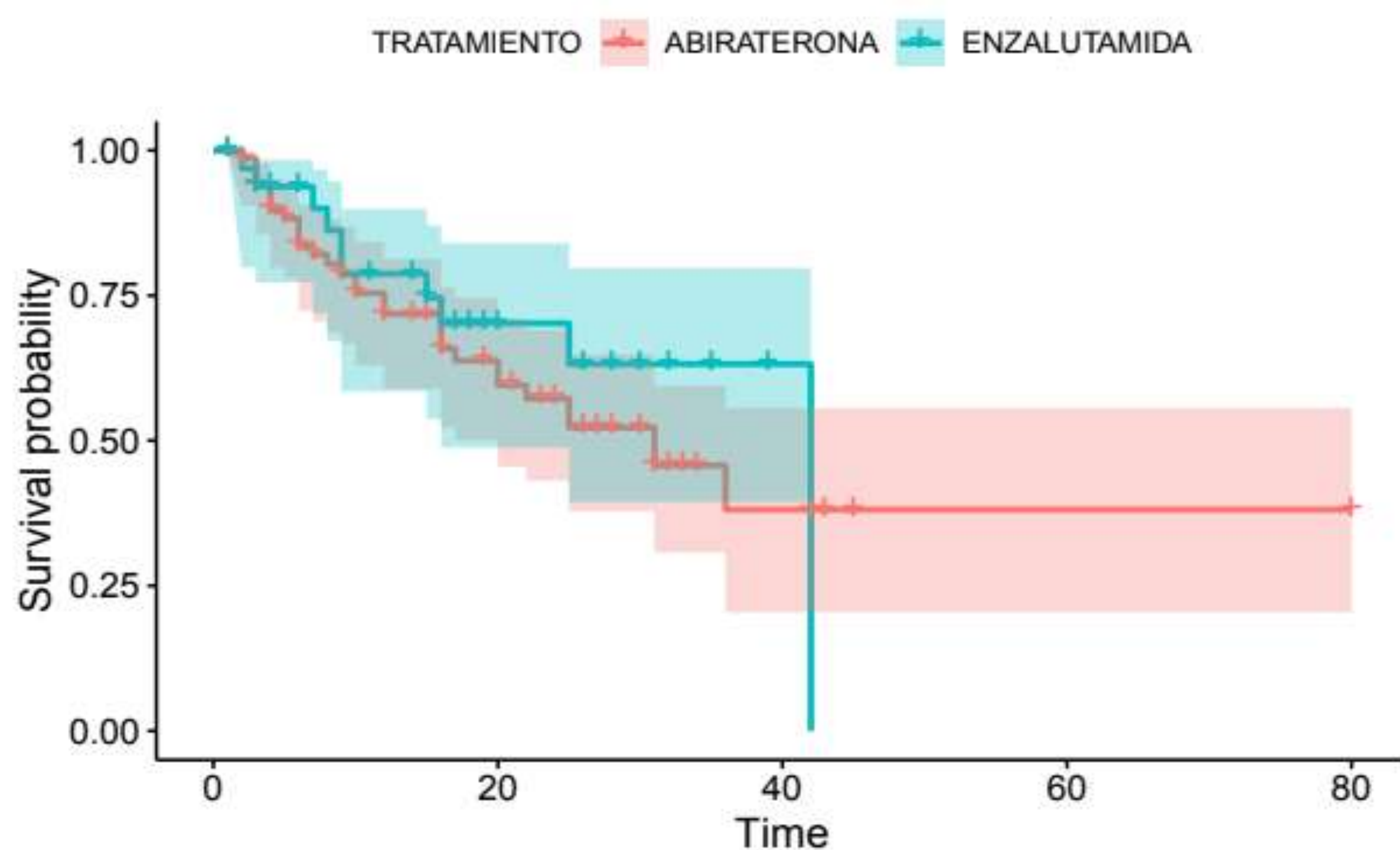
Statistical analysis:
Kaplan–Meier test and comparison by the logRank test using R-software

Results

- 99 patients (abiraterone=70 and enzalutamide=29)
- No significant differences in baseline characteristics: mean age (75.6±9.1 years vs 75.8±7.5 E)
- Metastases at baseline → mainly bone(36.34%) and lung(6%)
- Gleason at baseline: ≥8 in 45.7% of those treated with abiraterone and 31% with enzalutamide
- ECOG 0-1: 92.9% in abiraterone group and 89.7% for enzalutamide



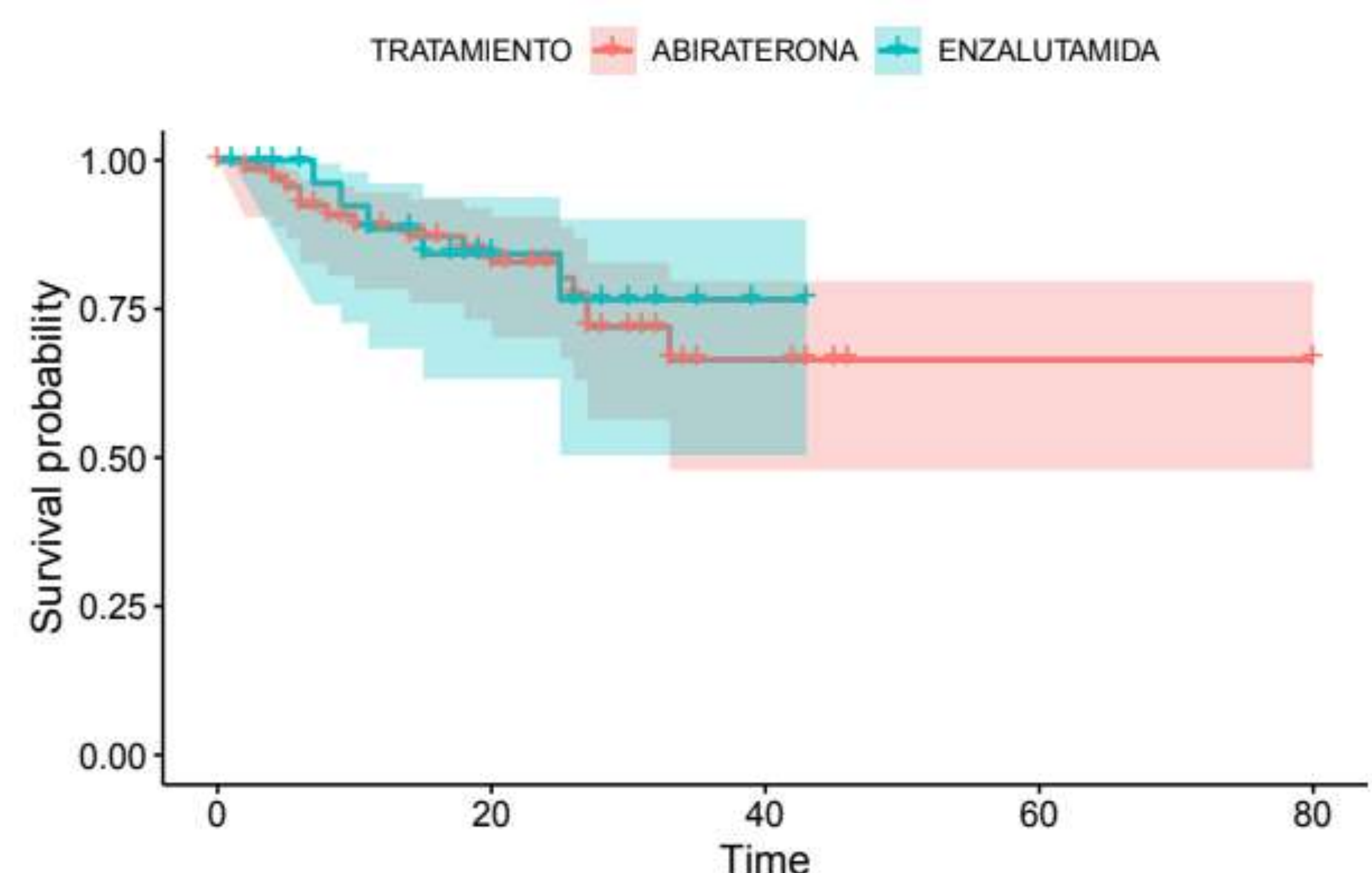
PROGRESSION-FREE SURVIVAL



- Median **PFS** abiraterone 31 months (CI95% 20-NA)
- Median **PFS** enzalutamide 42 months (CI95% NA-NA)

no significant differences between both drugs (p=0.5)

OVERALL SURVIVAL



Median OS was not reached in either group, with no significant differences (p=0.7)

SAFETY

Abiraterone	Enzalutamide
62.9% present ≥1 AE (8.6% ≥G2)	69% present ≥1AE(10.3% ≥G2)
Most frequent: -G1-asthenia(22.3%) -G1-hypertension(12.3%)	Most frequent: -G1-asthenia(62.1%) -G1-headache(13.8%) *One patient discontinued due to G3-anemia

Conclusion and relevance

Statistical differences in PFS were not found. Median OS was not reached in either group; AE were mild to moderate for both. We cannot affirm that there are differences in effectiveness and safety between the two treatments.

