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REAL-LIFE EFFECTIVENESS OF IBRUTINIB IN CHRONIC LYMPHOCYTIC LEUKEMIA

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OBJECTIVE

To evaluate the effectiveness of ibrutinib in patients with chronic lymphocytic leukemia (CLL) in our hospital, in order to have real-life effectiveness data to confirm the high efficacy found in clinical trials.

METHODS

Single-center retrospective study of all CLL patients with ibrutinib (July2016-June2022). Variables of age, sex, mutations, Binet stage at baseline, B symptoms at baseline, baseline ECOG, line of treatment, starting dose and dose reduction were collected. The presence of high-risk cytogenetics was determined: 17p deletion, TP53 mutation, 11q deletion, immunoglobulin heavy chain mutational status(IGHV).
Overall survival(OS), progression-free survival(PFS) and sustained improvement in hematological parameters in patients with cytopenias at baseline were collected as effectiveness variables.
The Kaplan-Meier method was used to measure OS and PFS using SPSS®.

RESULTS

▪47 patients (68% male) were included. Mean age was 69 ± 11 years.

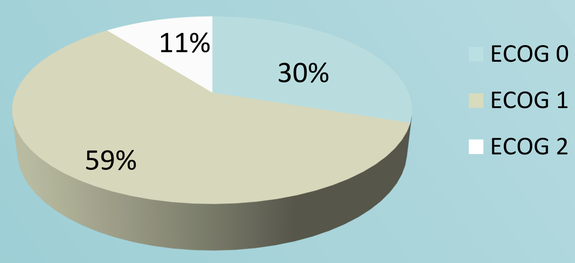
▪**Mutations**: TP53 alteration (19.15% patients), unmutated IGHV (59.5%), 11q deletion (8.5%), 17p deletion (8.5%)

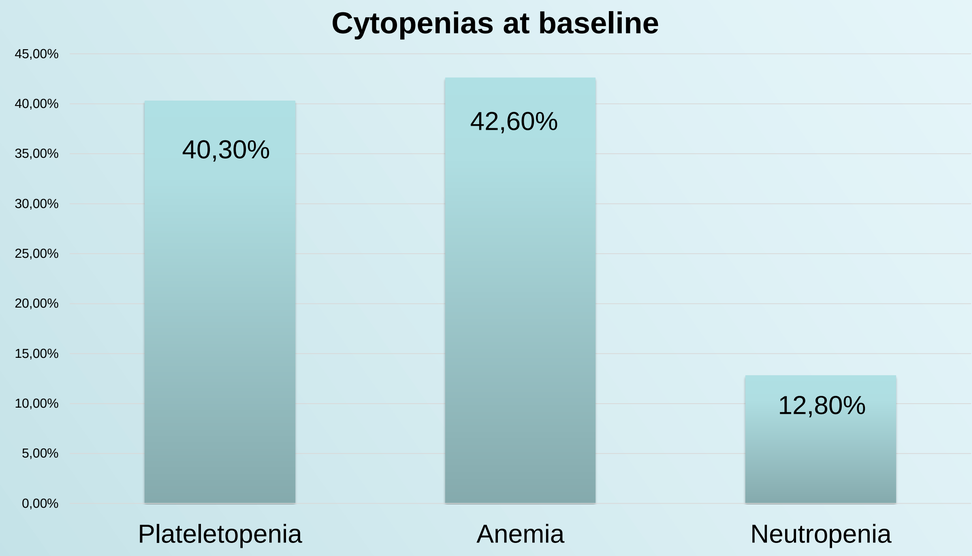
▪**Binet** classification: A(42.6%), B(19.1%), C(21.3%)

▪**B symptoms** at baseline: 42.6% patients

▪ 65.95% patients initiated as first-line treatment

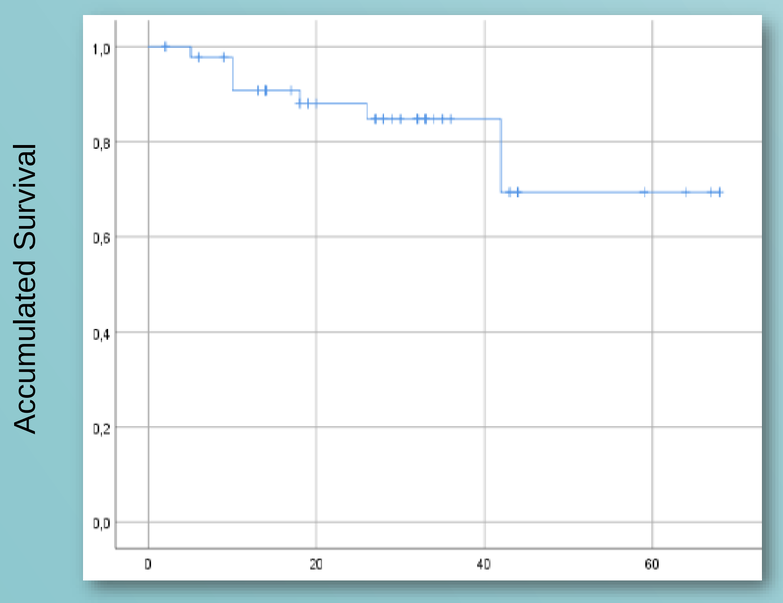
▪All started with a dose of 420mg, with 4 dose reductions due to toxicity



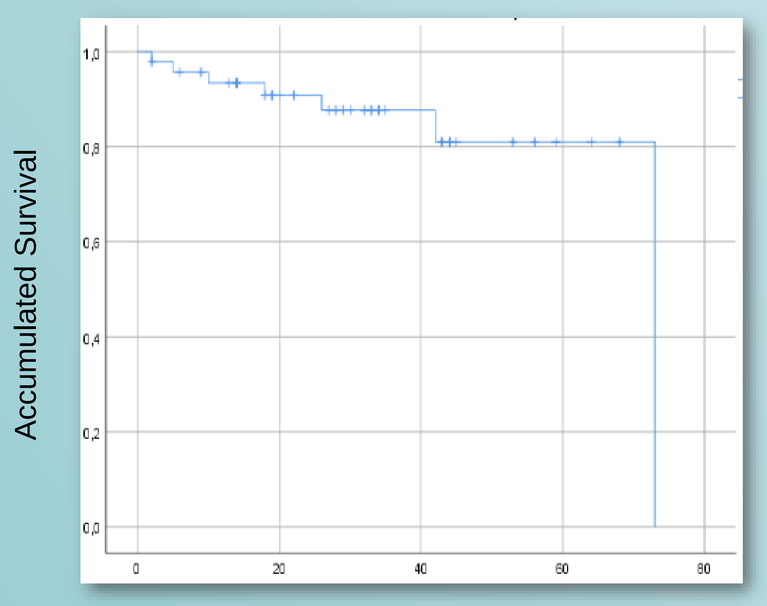


Sustained improvement in hematological parameters was observed in 63.16% for platelets, 80% for hemoglobin and 100% for neutrophils

Median PFS: not reatched



Median OS: 73 months (IC95% NA-NA)



▪Median follow-up until progression was 55.8±3.8 months, where 17% of patients progressed

▪Median follow-up until death was 63.6±3.6 months, where 14.9% died

CONCLUSION

Ibrutinib presents effectiveness data in CLL in line with those presented in RESONATE-2. The calculated overall survival is highly influenced by the number of patients censored over 36months. The improvement of the hematological parameters in patients who presented cytopenias at the beginning of treatment is high.

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