

Observational Study > J Oncol Pharm Pract. 2023 Dec;29(8):1806-1815.
doi: 10.1177/10781552221117135. Epub 2022 Jul 29.

A multicentre study with real-world data of the use of palbociclib in the treatment of breast cancer: Treatment duration correlates with dose reductions

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Persistenza al trattamento

	Palbociclib–aromatase inhibitor (P + ia)	Palbociclib–fulvestrant (P + f)
Number of patients (N)	159	216
TTD (months, 95% CI)	13.7 [8.9–17.5]	8.9 [7.1–12.7]
Failed (%)	97 (61.0)	144 (66.7)
Ongoing (%)	62 (39.0)	72 (33.3)
At least one dose reduction (%)	47 (29.6)	66 (30.6)
TTD when at least one dose reduction (months, 95% CI)	17.7 [14.2–20.0]	16.6 [8.9–20.8]
TTD no dose reduction (months, 95% CI)	9.2 [7.5–13.9]	7.4[5.7–10.3]

Conclusioni

la gestione delle tossicità attraverso riduzioni della dose, si traduce in un risultato migliore in termini di durata della terapia e quindi tempo al fallimento dovuto a progressione o tossicità

Aderenza al trattamento

Table 4. Adherence and PDD reductions.

Cohorts	PDC	PDC < 0.8 (%)	Media days of treatment lost	> 1 reduction of PDD (%)	No reduction of PDD (PDC, lost days)	One reduction of PDD (PDC, lost days)	Two reductions of PDD (PDC, lost days)
Palbociclib–aromatase inhibitor (P + ia, n = 159)	0.87	35 (22)	44	47 (29.6)	112 (0.90–28)	38 (0.82–79)	9 (0.75–104)
Palbociclib–fulvestrant (P + f, n = 216)	0,9	30 (13.9)	35	66 (31)	150(0.92–23)	52(0.83–67)	14(0.87–47)

PDC, proportion of days covered; PDD, prescribed daily dose.

TTD a 3 anni

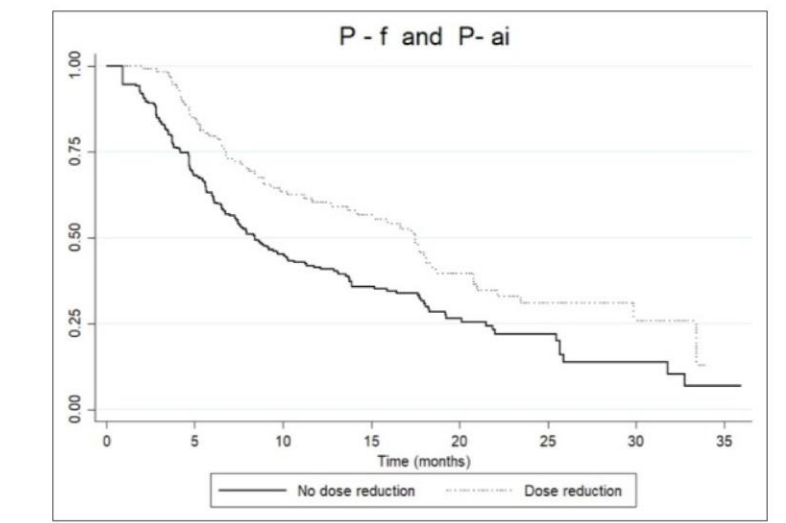


Figure 7. Time-to-treatment discontinuation (TTD) both cohorts – treatments with dose reduction versus no dose reduction.