

Ci sono novità nelle terapie?

MATTEO DELLA PORTA



Trattamenti per l'anemia: Luspatercept

- Esperienze real-life
- Luspatercept nelle MDS senza sideroblasti ad anello
- Luspatercept nel trattamento dell'anemia NON severa

Table 1: Endpoints in FISIM real-life multicenter study (Italian compassionate program) and data from the MEDALIST trial

| | FISIM Multicenter Study (n=184) | MEDALIST Trial ^a (n=153) |
|---|------------------------------------|--|
| RBC-TI ≥ 8 weeks during weeks 1–24, n (%) | 59 (32.0) | 58 (37.9) |
| RBC-TI ≥ 8 weeks during weeks 1–48, n (%) | 71 (38.6) | 69 (45.1) |
| Longest transfusion independence duration (weeks), median | 27.9 | 30.6 |
| RBC-TI ≥ 12 weeks during weeks 1–24, n (%) | 36 (19.6) | 43 (28.1) |
| RBC-TI ≥ 12 weeks during weeks 1–48, n (%) | 52 (28.3) | 51 (33.3) |
| Reduction of ≥ 4 RBC units/8 weeks during weeks 1-24 ^b , n (%) | 66/164 (40.2) | 52/107 (48.6) |
| AML evolution, n (%) | 4 (2.2) | 3 (1.9) |
| Patients with ≥ 1 SAEs, n (%) | 28 (15.2) | 48 (31.3) |

^a Fenaux P, Platzbecker U, Mufti GJ, et al. Luspatercept in Patients with Lower-Risk Myelodysplastic Syndromes. N Engl J Med. 2020;382(2):140-151

^b analysis was based on patients with base transfusion burden ≥ 4/8 weeks

RBC-TI: red blood cells transfusion independence

AML: acute myeloid leukemia

SAEs: serious adverse events

Table 2: response rate and dose at first response, stratified by baseline transfusion burden in FISIM multicenter study

| | Baseline Transfusion Burden (RBC units/8 weeks) | | | p-value ^a |
|--|--|-------------------|-----------------|----------------------|
| | ≤ 4 (n = 52) | 5 – 7 (n = 54) | ≥ 8 (n = 78) | |
| RBC-TI ≥ 8 weeks during weeks 1–24 | 27 (51.9) | 19 (35.2) | 13 (16.7) | < 0.01 |
| RBC-TI ≥ 8 weeks during weeks 1–48 | 29 (55.8) | 22 (40.7) | 20 (25.6) | < 0.01 |
| RBC-TI ≥ 12 weeks during weeks 1–24 | 16 (30.8) | 13 (24.1) | 7 (9.0) | < 0.01 |
| RBC-TI ≥ 12 weeks during weeks 1–48 | 22 (42.3) | 18 (33.3) | 12 (15.4) | < 0.01 |
| Reduction ≥70% in total RBC units transfused during weeks 1-24 | 16 (30.8) | 18 (33.3) | 16 (20.5) | 0.19 |
| Dose at first RBC-TI ≥ 8 weeks during weeks 1–48 | | | | |
| 1.00 mg/kg | 17/30 (56.7) | 10/21 (47.6) | 5/20 (25.0) | NA |
| 1.33 mg/kg | 7/30 (23.3) | 5/21 (23.8) | 7/20 (35.0) | |
| 1.75 mg/kg | 6/30 (20.0) | 6/21 (28.6) | 8/20 (40.0) | |

^a Fisher's exact test

RBC-TI: red blood cells transfusions independence

NA: not applicable

Bristol Myers Squibb Announces Positive Topline Results of Phase 3 COMMANDS Trial

10/31/2022

- ***Luspatercept, the first erythroid maturation agent, met primary and key secondary endpoints in the first-line treatment of patients with very low/low/intermediate-risk myelodysplastic syndromes***
- PRINCETON, N.J.

BMS today announced the COMMANDS study, a Phase 3, open-label, randomized trial evaluating luspatercept, met its primary endpoint, demonstrating a highly statistically significant and clinically meaningful improvement in red blood cell transfusion independence (RBC-TI) with concurrent hemoglobin (Hb) increase in the first-line treatment of adult patients with very low-, low- or intermediate-risk myelodysplastic syndromes (MDS) who require RBC transfusions

Trattamenti per i pazienti ad alto rischio

COMBINAZIONI CON AZACITIDINA:

- anti BCL2
- immunoterapia
- farmaci mirati (TP53)
- nuove molecole