

## C-20

# Randomized Blinded Study Comparing Injection Site Pain From Octreotide Long-acting-release (LAR) Versus Lanreotide During the Treatment of Well-differentiated Neuroendocrine Tumors (WDNETs)

*Nitya Raj, Elizabeth Cruz, Joanne Chou, Marinela Capanu, April DeMore, Haley Hauser, Olivia Heffernan, Tiffany Le, Leonard Saltz, Diane Reidy-Lagunes*  
*Memorial Sloan Kettering Cancer Center, New York, NY*

**BACKGROUND:** The somatostatin analogs (SSAs) octreotide LAR (OCT) and lanreotide (LAN) are equally acceptable per NCCN to treat WDNETs. Average Sales Price for 1 year of LAN (120mg) is \$106,802 versus \$53,471 for 1 year of OCT (20mg) and \$80,206 for 1 year of 30mg. LAN is given “deep subq” while OCT is given intramuscularly. We conducted a randomized, blinded trial evaluating patient (pt) experience, measured by injection site pain, with OCT and LAN, during nonfunctional WDNET treatment.

**METHODS:** Pts received q4w injections for 6 months; Arm 1: OCT (3 injections) then LAN (3 injections); Arm 2: LAN (3 injections) then OCT (3 injections). Self-reported injection site pain scores were obtained after first 3 injections (0-10 scale). Primary endpoint was mean pain score comparison over first 3 injections. Secondary endpoints included pt-reported SSA preference, willingness to pay for preferred therapy, assessed by questionnaire.

**RESULTS:** 51 pts were enrolled (Arm 1: N=26, Arm 2: N=25), all evaluable for primary endpoint. All pts received LAN 120mg monthly; among those (N=49) receiving OCT, 30 (61%) 20mg, 18 (37%) 30mg, 1 (2%) 10mg. No significant difference was identified in mean pain scores; Arm 1: mean 2.4, standard deviation (SD) 1.9; Arm 2: mean 1.9, SD 1.5 (p=0.5). 34/51 pts (15 Arm 1; 19 Arm 2) completed questionnaires. 7 (47%) Arm 1 and 8 (42%) Arm 2 indicated no drug

preference. There was a trend towards OCT preference in both arms, with more pts indicating mild or strong preference. In Arms 1 and 2, 7 (50%) and 10 (56%) pts, respectively, were unwilling to pay more for preferred SSA; the other pts were willing to experience increased financial toxicity for preferred SSA.

**CONCLUSION:** This randomized, blinded study evaluating pt comfort found minimal pain with OCT and LAN and no significant differences in pain scores.

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