C-18

[177Lu]Lu-edotreotide Effectiveness in Patients with Functional and Non-functional Gastrointestinal Neuroendocrine Tumors: A SwissNET Registry Analysis

Guillaume Nicolas[1], Alexander R. Siebenhüner[2], Reto M. Kaderli[3], Julie C. Refardt[4], Niklaus Schaefer[5], Roman Trepp[3], Julia G. Fricke[1], Stefan Pilz[6], Berna Degirmenci Polack[7], Simon Spiegl[6], Aurel Perren[8], Emanuel Christ[1]

[1]University Hospital Basel; [2]Clinic for Hematology and Oncology Hirslanden Zürich; [3]University Hospital Bern; [4]Erasmus University Rotterdam; [5]Lausanne University Hospital; [6]ITM Oncologics GmbH; [7]ITM USA, Inc; [8]Institute of Tissue Medicine and Pathology, University of Bern

BACKGROUND

The SwissNET registry, launched in 2008, has prospectively collected data from patients with neuroendocrine tumors (NETs) in Switzerland who consent to participate. Recent clinical trials have demonstrated efficacy of [^{177}Lu]Lu-edotreotide in participants with gastroenteropancreatic NETs; however, real-world evidence (RWE) of [^{177}Lu]Lu-edotreotide effectiveness in clinical practice is limited. The objective of this analysis was to summarize [^{177}Lu]Lu-edotreotide effectiveness in patients with functional and nonfunctional gastrointestinal (GI)-NETs using data from the SwissNET registry.

METHODS

SwissNET participants with functional and nonfunctional GI-NETs were included in the efficacy analysis if they had received at least 2 cycles of [^{177}Lu]Lu-edotreotide in any line of therapy (on-site magistral preparation according to national Swiss laws). Baseline and tumor characteristics were summarized using descriptive statistics. Real-world median progression-free survival (rwPFS), median overall survival (OS), overall response rate (rwORR), and disease control rate (rwDCR) were calculated, and between-group comparisons for rwPFS and OS were carried out using a log-rank test.

RESULTS

102 patients with GI-NETs were analyzed; 49 had functional tumors (mean age: 62.2±13.1 years, female: 38.8%), 51 nonfunctional tumors (mean age: 63.1±12.4; female: 56.9%) and 2 unknown tumor functional status. Most participants had grade 1 or 2 GI-NETs; prior surgery was recorded in 59.2% and 76.5% of participants with functional and nonfunctional GI-NETs, respectively.

Participants received a median number of 4 (range: 2-8) cycles of [^{177}Lu]Lu-edotreotide.

Median rwPFS was 21.3 (95% confidence interval [CI]: 11.8-38.9) vs 21.7 (95%CI: 14.1-32.0) months in participants with functional and nonfunctional GI-NETs, respectively, and median OS was 50.8 (95%CI: 38.9-86.8) vs 63.6 (95%CI: 35.6-90.1) months (Table 1). rwORR was 17.4% vs 25.5% and rwDCR was 87.0% vs 80.9% in participants with functional and nonfunctional GI-NETs, respectively.

Table 1: RWE Outcomes in Patients with GI-NETs

Parameters	Functional GI-NETs (n=49)	Nonfunctional GI-NETs (n=51)	P-value
Median (95%CI) rwPFS, months	21.30 (11.80-38.90)	21.70 (14.10-32.00)	0.650
Median (95%CI) OS, months	50.80 (38.90-86.80)	63.60 (35.60-90.10)	0.387
Complete response, n (%)[a]	3 (6.5%)	3 (6.4%)	
Partial response, n (%)[a]	5 (10.9%)	9 (19.1%)	
Stable disease, n (%)[a]	32 (69.6%)	26 (55.3%)	
rwORR (95%CI), %	17.4% (7.8%-31.4%)	25.5% (13.9%-40.3%)	
rwDCR (95%CI)	87.0% (73.7%-95.1%)	80.9% (66.7%-90.9%)	

[a]percentages are based on number of participants with response assessment

CONCLUSIONS

[^{177}Lu]Lu-edotreotide showed similar rwPFS in participants with functional and nonfunctional GI-NETs, suggesting that treatment response is not influenced by tumor functional status.

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