OUTCOMES IN PATIENTS WITH MYELOFIBROSIS AND RBC-TRANSFUSION DEPENDENCE IN THE PHASE III PERSIST-1 VS. BEST AVAILABLE THERAPY

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INTRODUCTION

- As a myeloproliferative neoplasm characterized by clonal hematopoiesis, dysregulation of kinase signaling, and release of aberrant cytokines.
- Characteristics of HMF may include debilitating constitutional symptoms, anemia, thrombocytopenia, progressive loss of marrow function, and risk of transformation to acute leukemia.
- Anemia and transfusion dependence (RBC-TD) are each associated with impaired quality of life and increased risk of bleeding and cardiovascular events.

METHODS

- Key inclusion criteria: patients with intermediate-2 or high-risk disease (IPSS-R); symptom score (SS) ≥50%; platelet count, ≥100,000/μL; without baseline RBC-TD (by Gale criteria).
- No exclusion for baseline platelet levels.
- Intermediate- or high-risk disease determined by the IPSS-R.
- Interim survival results, bleeding and cardiovascular events (discussed in Mesa et al. 2011; Blood 2011).
- On February 8, 2016, the U.S. Food and Drug Administration notified the sponsor that pacritinib was not collected beyond Week 48.

RESULTS

Characteristics of Patients With and Without RBC-TD at Baseline

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>RBC-TI (n=156)</th>
<th>RBC-TD (n=17)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median age (range), years</td>
<td>62 (49-75)</td>
<td>6 (5-75)</td>
</tr>
<tr>
<td>Male, n (%), n (%)</td>
<td>124 (80)</td>
<td>17 (100)</td>
</tr>
<tr>
<td>Female, n (%), n (%)</td>
<td>32 (20)</td>
<td>0 (0)</td>
</tr>
<tr>
<td>ECOG PS, n (%), n (%)</td>
<td>0 (0)</td>
<td>17 (100)</td>
</tr>
<tr>
<td>Baseline total symptom score (TSS), n (%)</td>
<td>71 (62-75)</td>
<td>81 (52)</td>
</tr>
</tbody>
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Patient Disposition (Patients With Baseline RBC-TD)

- 1 of 3 (33%) RBC-TI patients and 3 of 7 (43%) RBC-TD patients achieved ≥50% reduction in TSS.

Changes in Hemoglobin

- Mean hemoglobin levels changed from 9.2 g/dL at baseline to 11.7 g/dL at Week 24 in pacritinib-treated patients achieving RBC-TI at Week 24.
- Patients did not receive erythropoiesis stimulating agents during the trial.

CONCLUSIONS

- PERSIST-1, only pacritinib treatment resulted in achievement of RBC-TI.
- Pacritinib-treated patients who became RBC-TI at Week 24 at least had starting platelet count of ≥100,000/μL.
- Patients who remained RBC-TD and those who achieved RBC-TI demonstrated clinically meaningful reductions in platelet count independent of RBC-TD status.
- Pacritinib-treated patients who remained RBC-TD and those who achieved RBC-TI demonstrated clinically meaningful reductions in symptom burden.
- Hemoglobin levels improved in pacritinib-treated patients who achieved RBC-TI compared with those who remained RBC-TD.
- Pacritinib was associated with improved patient outcomes for those with baseline RBC-TD.

References


Disclosure

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