



## 1\_ First line treatment in metastatic renal-cell carcinoma: A TKI experience of a reference centre

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**Background:** Target agents have changed the treatment of metastatic renal-cell carcinoma (mRCC). For untreated mRCC Sunitinib and Pazopanib are considered established first line options with similar efficacy. We aim to assess the real world effectiveness of these agents in the setting of the largest Oncologic Centre in Portugal.

**Patients and Methods:** Retrospective cohort of clear cell mRCC patients treated at Instituto Português de Oncologia do Porto, Portugal with first line VEGFR inhibitors, Sunitinib or Pazopanib, since January 2007. Main effectiveness parameters were overall survival (OS) and progression-free survival (PFS). Cumulative incidence of adverse events (AE) and AE grade  $\geq 3$  was also collected.

**Results:** Of 144 mRCC patients treated on our centre since 2007, 98 were eligible for this study (59 with Sunitinib, 39 with Pazopanib). No differences in demographics, extent of metastatic disease or prognostic factors existed between these subgroups. As of May 2016, 30 patients (31%) are still on first line treatment, with a median follow up time of 50 months (longer for patients treated with Sunitinib) and a mean treatment duration of 14 months for Sunitinib (CI95%: 10-20) and 7 months for Pazopanib (CI95%: 5-10). Response to Sunitinib and Pazopanib was similar with 7% complete responses, 20% partial responses and 17% with progressive disease on first assessment. Overall median progression free survival was 7 months (CI 95%: 4-9). Patients in the favorable prognostic group had OS of 43 months while patients in the intermediate prognostic group had OS of 16 months, with no difference attributable to either strategy. AEs were registered in 80% of patients (80% in Sunitinib and 80% in Pazopanib) and 55% presented AEs grade  $\geq 3$  (64% in Sunitinib and 41% in Pazopanib, difference statistically significant). Overall 24 patients had treatment suspended due to AEs (14 in Sunitinib and 10 in Pazopanib).

**Conclusions:** Based on our experience real world effectiveness of Sunitinib and Pazopanib are overlapping and concordant with published phase III trials. Pazopanib treated patients tend to have less adverse events.