

APALUTAMIDE AND ENZALUTAMIDE IN METASTATIC HORMONOSENSITIVE PROSTATE CANCER: COMPARISON OF ADVERSE EFFECTS INCIDENCE, TOLERABILITY AND EFFICACY.

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Introduction

Enzalutamide (ENZA) and apalutamide (APA) are new antiandrogens approved for de novo or recurrent metastatic hormone sensitive prostate cancer (mHSPC). Both agents have a high incidence of adverse effects (AEs), half of them grade 3-4 according to Common Terminology Criteria of Adverse Events (CTCAE) as described in clinical trials. To date, there is a lack of studies comparing the tolerability and efficacy between these two drugs. The purpose of this study is to compare the incidence of adverse effects (AEs) and efficacy between ENZA and APA in patients with mHSPC.

Material and method

Observational retrospective study carried out between the Pharmacy Services of two different hospitals. The following data of patients diagnosed with mHSPC and in treatment with APA or ENZA until the 15th of September 2022 were collected from medical history records were:

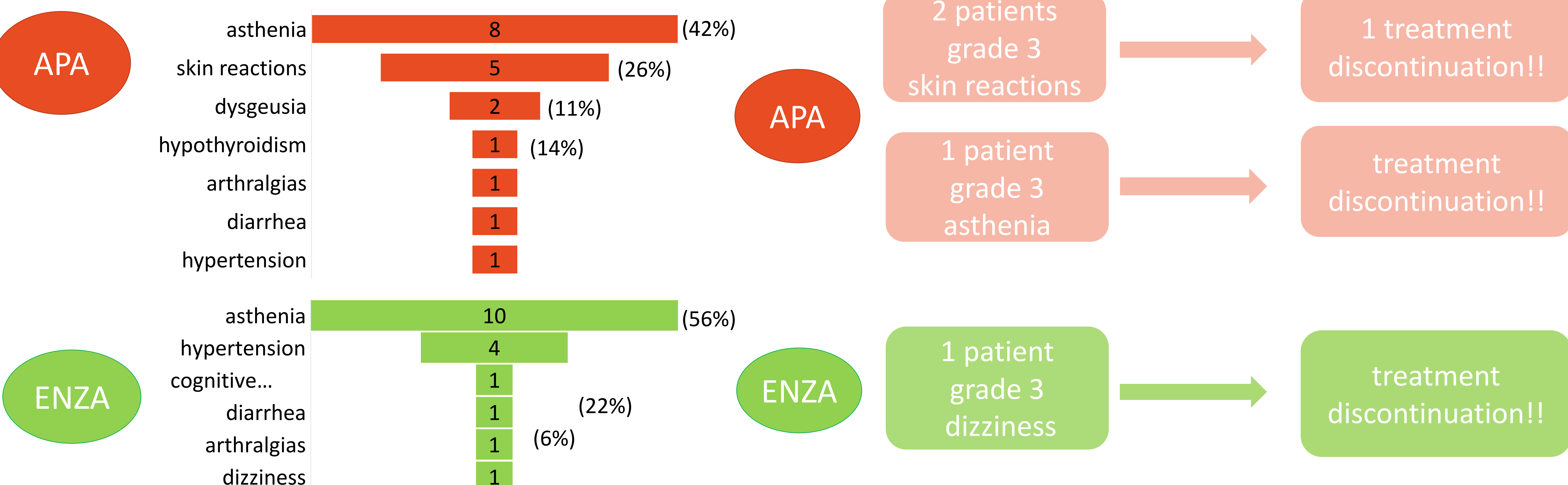
- Age
- Basal renal and hepatic function
- Incidence of AEs (yes/no)
- type and grade of AEs according to CTCAE version 5
- treatment duration

Results and discussion

	50 patients in treatment	Median age at diagnosis	Incidence of any AE	Number of AE experienced by patient	Most frequent AEs	Most serious AEs
APA	28 (56%)	75 (41-89)	16 patients (57,1%)	1,5 (1-3)	asthenia skin reactions dysgeusia	grade 3 skin reactions
ENZA	22 (44%)	75 (53-81)	27 patients (77,3%)	1 (1-3)	asthenia hypertension	grade 3 dizziness

Most frequent AEs

Most serious AEs



Median treatment duration was 20 (5-74) weeks with APA and 9 (4-53) weeks with ENZA. Two patients, one with APA and one with ENZA, progressed during treatment.

Conclusion

The incidence of AE was similar in both groups and at least half of the patients experienced an AE, some of them severe which led to treatment discontinuation. For this reason, the profile of AE of new antiandrogens should be considered when selecting the best treatment option for each patient. The knowledge of the Hospital Pharmacist is essential to prevent, detect and manage these AEs.