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# DEFINING “PLATINUM-INELIGIBLE” PATIENTS WITH METASTATIC UROTHELIAL CANCER

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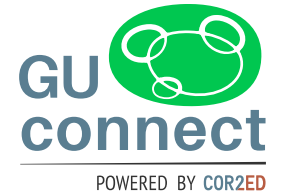
Masonic Cancer Center, University of Minnesota, Minneapolis, USA

*On behalf of the*

**Platinum-Ineligibility in Bladder Cancer Working Group**

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# DISCLAIMER



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# **DEFINING “PLATINUM-INELIGIBLE” PATIENTS WITH METASTATIC UROTHELIAL CANCER**

**Gupta, S et al. ASCO GU 2019, Abstract No. 451**

# BACKGROUND AND HYPOTHESIS

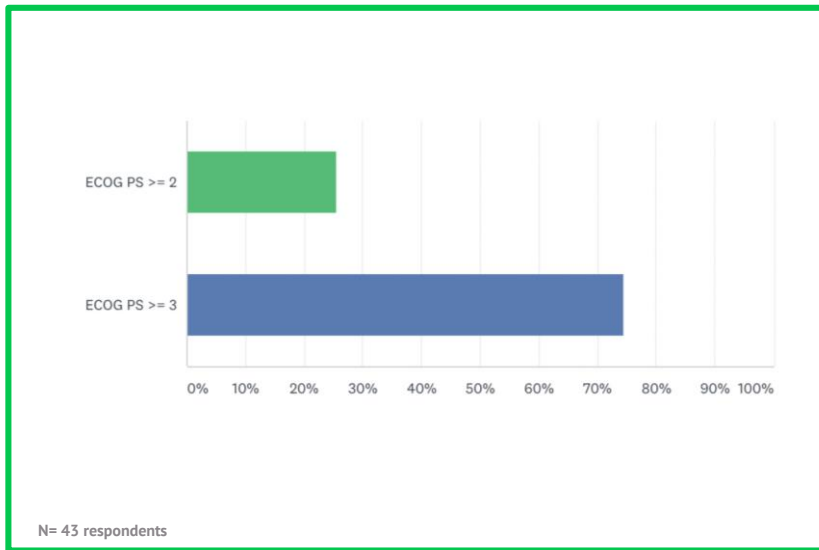
- Patients with metastatic urothelial cancer (mUC) who are ineligible to receive cisplatin have limited treatment options
- Pembrolizumab and atezolizumab were approved as 1<sup>st</sup>-line therapy in these patients, but their use is now restricted to those with tumours with high PD-L1 expression, or platinum-ineligible
- “Platinum-ineligible” mUC (cisplatin and carboplatin ineligible), remains undefined, and a clear definition is needed for determining treatment and clinical trial eligibility

# METHODS

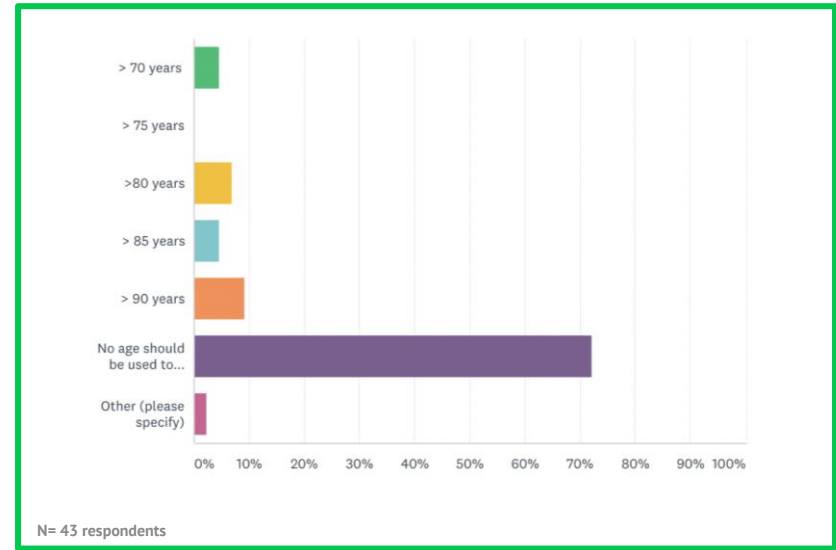
- 56 genitourinary medical oncologists in the US (from academic and community settings) were surveyed using the online tool (Survey Monkey) regarding definition of “platinum- ineligible” based on several clinical parameters (Round 1)
- Responders had the opportunity to add other factors they considered for “platinum- ineligibility”. Based on the responses, the survey was further refined (Round 2) and responses were compiled to generate a consensus definition
- Responses were received from 43/56 (77%) of those surveyed in Round 1 and 47/56 (83.9%) in Round 2

# RESULTS FROM ROUND 1

What threshold ECOG PS should be used to define “platinum-ineligibility”?

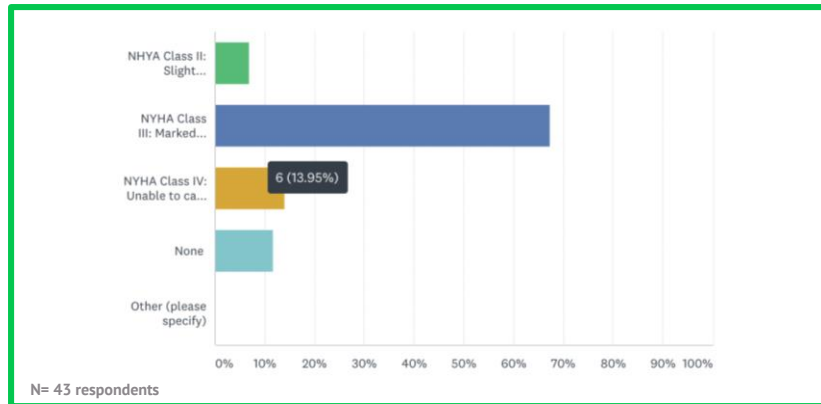


What threshold age should be used to define “platinum-ineligibility”?

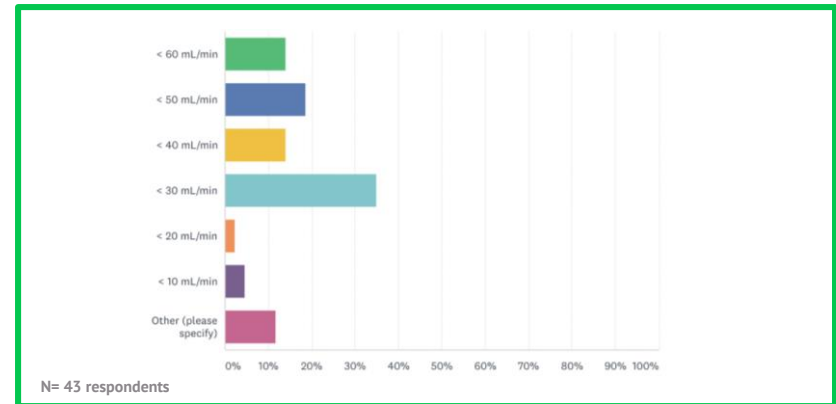


# RESULTS FROM ROUND 1

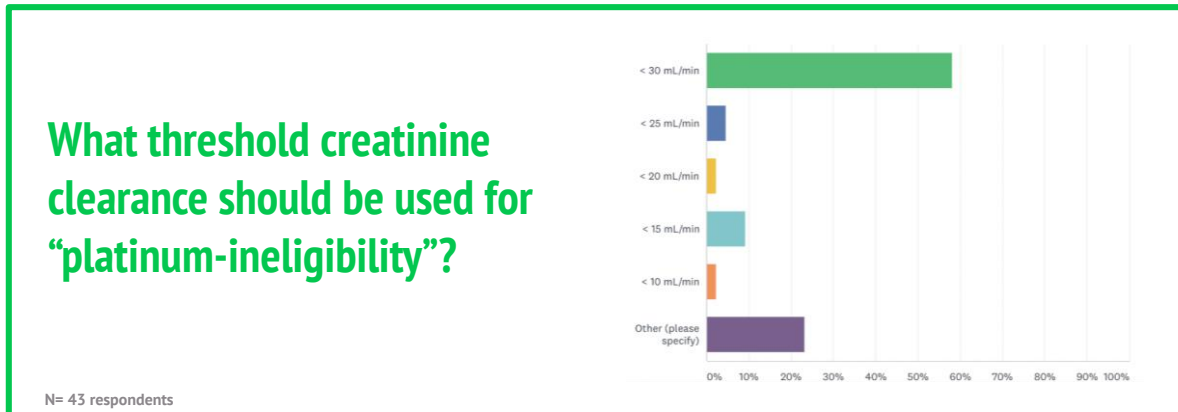
What class of heart failure do you consider to define “platinum-ineligibility”?



In a patient with ECOG PS 2, what creatinine clearance cut-off you use to define “platinum-ineligibility”?



What threshold creatinine clearance should be used for “platinum-ineligibility”?

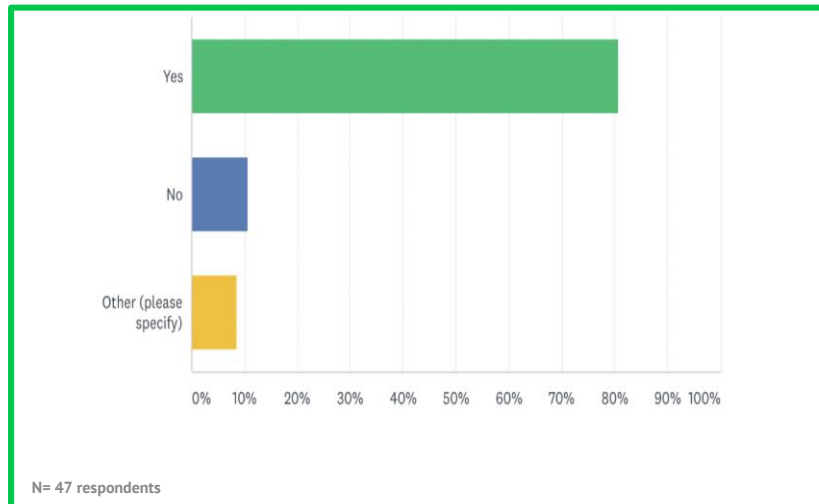




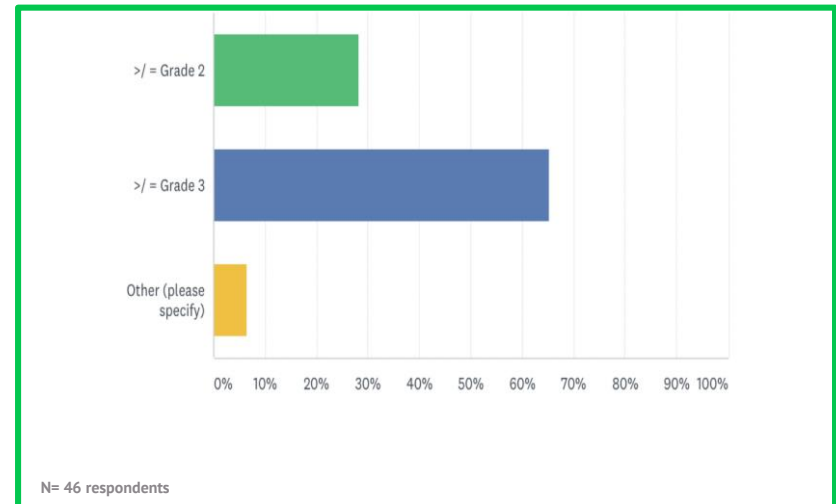
# RESULTS FROM ROUND 2

- The group were specifically asked if they would give carboplatin to patients with Cr Cl between 30-60ml/min (as based on the EORTC study 30986, mUC patients with ECOG PS2 and GFR >30 and < 60 ml/min had poor survival outcomes with carboplatin-based therapies <sup>1)</sup>)
- We also incorporated peripheral neuropathy based on feedback from Round 1

**In a patient with ECOG PS 2, would you give carboplatin to patients with creatinine clearance >30 but <60 ml/min**



**What grade of peripheral neuropathy would you consider for “carboplatin-ineligibility”?**



Cr Cl, creatinine clearance; ECOG PS, eastern cooperative oncology group performance status; EORTC, european organisation for research and treatment of cancer; GFR, glomerular filtration rate ; mUC, metastatic urothelial cancer

1. De Santis, M et al. J Clin Oncol 2012; 30(2):191-9; 2. Gupta, S et al. ASCO GU 2019, Abstract No. 451

# PROPOSED CONSENSUS DEFINITION

- Based on the compiled results from Round 1 and 2, the Bladder Cancer Working Group recommend 1 of the following parameters be used to define “platinum-ineligible” mUC:
  - ECOG PS  $\geq 3$
  - Cr Cl  $< 30$  ml/min
  - Peripheral neuropathy  $\geq 3$
  - NYHA Heart Failure Class  $\geq 3$
  - ECOG PS 2 and Cr Cl  $< 30$  ml/min
- The consensus definition would help provide guidance at the point of care and for determining clinical trial eligibility for “platinum-ineligible” mUC patients

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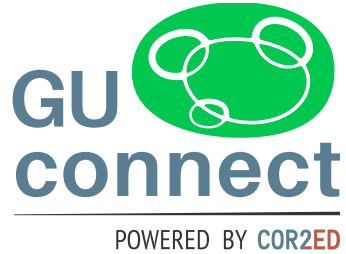
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