Real-world (RW) clinical outcomes in patients (pts) with locally advanced (LA) or metastatic Merkel cell carcinoma (mMCC) treated in the United States (US) oncology clinical practices: results from SPEAR-Merkel

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BACKGROUND

- mMCC is a rare, aggressive cancer with considerable disease-associated mortality.
- Although immune checkpoint inhibitors (ICIs) are effective in LA/mMCC, treatment patterns and clinical outcomes remain to be described. 6
- The US Oncology Network (USON) is a community-based network of oncology practices comprising over 470 cancer practices or academic centers in all oncology practices, limiting generalizability to pts treated at other community oncology practices or academic centers.
- To our knowledge, this is the first study to analyze pts with LA or mMCC treated in US oncology practices and describe treatment patterns and clinical outcomes.

RESULTS

- Among the 94 pts included in the study (28 avelumab, 26 non-avelumab IO, and 40 chemotherapy), median OS was 11.2 months in avelumab pts, 9.8 months in non-avelumab IO pts, and 10.7 months in chemotherapy pts.
- Median OS was 9.5 months from chemotherapy initiation.4 In SPEAR-Merkel in the 1L chemotherapy cohort, median OS was 20.2 vs 10.0 months in KEYNOTE-017 (recurrent locoregional or distant mCRPC). In the SPEAR-Merkel 1L avelumab cohort vs JAVELIN Merkel 200 part B, median OS was 20.2 vs 15.5 months in the avelumab group.
- Using avelumab for disease progression after chemotherapy (avelumab post-L1) was associated with a median OS of 11.2 vs 5.6 months (HR: 0.54; 95% CI: 0.36-0.82; p = 0.0052). No data were available for avelumab post-L1 in KEYNOTE-017 or JAVELIN Merkel 200.

CONCLUSIONS

- The purpose of SPEAR-Merkel (Study informing treatment pathway decisions in Merkel cell carcinoma [MCC] patients) was to understand RW clinical outcomes in pts with LA and mMCC initiating first-line (1L) treatment with avelumab, non-avulumab immuno-oncology (IO) therapy, or chemotherapy in the US community oncology practice setting.
- The results of SPEAR-Merkel, a longitudinal retrospective study, indicate that pts with LA or mMCC treated with IO therapies targeting PD-1/PD-L1 showed improved clinical benefit vs chemotherapy in RW community-based oncology practices.
- Results from SPEAR-Merkel contribute to the current knowledge about RW effectiveness of innovative therapies beyond the pivotal clinical studies and therefore inform clinicians of further treatment options for LA and mMCC.
- To our knowledge, this is the first study to analyze pts with LA or mMCC treated with avelumab or non-avulumab IO alongside pts treated with chemotherapy in a RW setting. In addition, the study shows that 1L chemotherapy is still used in clinical practice in the US despite its limited durability, less favorable outcomes, and safety profile.