Background

Myelosuppression events were identified using laboratory values based on Odds ratios (ORs) were estimated using a frequentist approach. A logistic regression model with random effect was conducted to assess the

Objectives

The current study aims to compare patient-related outcomes and healthcare resource utilisation between patients with ES-SCLC who received trilaciclib vs. those who did not in real-world settings.

Methods

This is a retrospective observational study of two matched cohorts (• This is a retrospective observational study of two matched cohorts (1) • The National Comprehensive Cancer Network guidelines for hematopoietic growth factors and stem cell mobilization before chemotherapy in ES-SCLC as of March 20212,3 • At the index date, the mean age was around 70 years for both cohorts; almost all patients had trilaciclib in the trilaciclib cohort and no trilaciclib in the comparison cohort (2) • Descriptive analyses were performed for patient baseline characteristics and outcomes (3) • Grade ≥3 anemia: hemoglobin <8.0 g/dL (4) • Grade ≥3 neutropenia: absolute neutrophil count <1,000/µL (5) • Grade ≥3 thrombocytopenia: platelet count <100,000/µL

Study Design and Data Source

- This is a retrospective observational study of two matched cohorts (1) - Data were de-identified and used for research purposes only - 11 million patients were selected from >500 community oncology sites in the United States

Descriptive statistics were used to summarize demographic and clinical characteristics of the two matched cohorts.

Statistical Analysis

- Description analyses were performed for patient baseline characteristics and outcomes between the two matched cohorts. The assumption that the distributions of continuous variables and the test for equality of proportions for categorical variables were met, and all three groups, as well as all chemotherapy regimens, were assessed (2) - All chemotherapy regimens used were assessed for patients with ES-SCLC who received trilaciclib and those who did not

Baseline Characteristics

- Patients who received trilaciclib were matched to 77 comparison patients who did not receive trilaciclib. Baseline demographic and clinical characteristics are presented in Table 1. (3) • The main analysis was conducted using time up to four cycles of chemotherapy for patients with ES-SCLC who received trilaciclib and those who did not receive trilaciclib

Results

The main analysis was conducted using time up to four cycles of chemotherapy for patients with ES-SCLC who received trilaciclib and those who did not receive trilaciclib for patients with ES-SCLC who received trilaciclib

Conclusion

This study suggests that trilaciclib use is associated with fewer myelosuppressive events and hospitalizations among patients with chemotherapy-treated extensive-stage small cell lung cancer (ES-SCLC) with and without trilaciclib from community oncology practices.