CONFERENCE ABSTRACT

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An overview of Pazopanib in metastatic renal cell carcinoma (mRCC) in Ministry of Health (MOH), Malaysia: A multicentre experience

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Abstract: Background: Pazopanib was listed in MOH, Malaysia’s drug formulary on July 2013 for the treatment of mRCC. Two landmark trials were used to support the listing i.e. VEG105192 and COMPARZ which showed a median progression free survival (PFS) of 9.2 and 8.4 months, respectively. The efficacy and tolerability of Pazopanib in patients with mRCC have been found to differ in Western and Asian populations. Due to the difference in tolerability, dose adjustment in Asian patients is required. In most MOH hospitals in Malaysia, we tend to start mRCC patients with a lower dose as most patients cannot tolerate 800 mg of Pazopanib. We aim to prognosticate and evaluate PFS in patients with mRCC treated in MOH, Malaysia. We also aim to correlate PFS of patients on different doses of Pazopanib. Methods: The largest referral centre in central and southern Malaysia was selected namely Hospital Kuala Lumpur and Hospital Sultan Ismail. A retrospective analysis was conducted for patients using hospital supply of Pazopanib from 2010 to 2016. PFS is defined as the time of Pazopanib initiation till 1st documented disease progression. Prognostic variables such as age, sex, race, histology, common sites of metastasis, number of organs involved, ECOG, modified MSKCC risk category, prior history of nephrectomy or systemic treatment and initial dose of Pazopanib was analysed. Results: There was a total of 87 patients with mRCC registered. Median time since diagnosis to initiation of Pazopanib was 5 months. PFS for the overall study population was 8.0 months (95%CI, 5.6 – 10.4 months). PFS based on dose showed 400 mg vs. 800 mg of Pazopanib was 9.0 months (95%CI 4.5 – 13.4 months) vs. 6.0 months (95%CI 1.9 – 10.1 months) respectively (p = 0.209). Modified MSKCC risk category was a significant prognostic variable (p = 0.045). Conclusion: This retrospective review shows no significant difference in PFS between 400 mg vs. 800 mg of Pazopanib. MOH hospitals in Malaysia have similar PFS compared to VEG105192 and COMPARZ although 70% of our patients were started at half the recommended dose. Therefore, starting Pazopanib at 400 mg is a much more cost-effective measure in treating metastatic renal cell carcinoma in MOH, Malaysia. NMRR-16-2666-33713-17-03-2017

Keywords: Pazopanib; metastatic renal cell carcinoma; dose


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