What do these results mean for individuals with mCSPC?

Prostate-specific antigen (PSA) is a critical biomarker for assessing prostate cancer progression. In this study, Black patients with metastatic castration-sensitive prostate cancer (mCSPC) treated with apalutamide were 42% more likely to achieve a PSA reduction of $\geq 90\%$ (PSA90) within six months compared with those treated with enzalutamide. These findings suggest that apalutamide may be a more effective therapeutic option than enzalutamide for achieving PSA reduction in this patient population.

What was the purpose of this study?

The purpose of the study was to compare the efficacy of two androgen receptor pathway inhibitors (ARPIs), apalutamide and enzalutamide, in treating Black patients with mCSPC by evaluating the proportion of patients achieving a ≥90% reduction in prostate-specific antigen PSA levels within six months. A significant decline in PSA serves as an indicator of therapeutic efficacy in reducing tumor burden

How was the study carried out?

- This was a retrospective analysis using pre-existing data from community urology practices across the United States, and insurance claims data collected between September 17, 2018, and December 31, 2023
- The focus was on Black patients diagnosed with mCSPC. Patients were stratified into two cohorts based on the initiation of either apalutamide or enzalutamide after December 16, 2019
- Statistical methods were applied to ensure baseline comparability of patient characteristics between the two groups prior to assessing the study outcomes

What were the limitations of the study?

- During patient selection, miscoding or misclassification may have introduced selection and information biases
- Unknown variables may be present

Real-world comparison of prostate-specific antigen response in Black patients with metastatic castration-sensitive prostate cancer treated with apalutamide or enzalutamide

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What were the results?

The results of the study were similar for both treatment groups, but more patients receiving apalutamide (63.1%) showed a response within 6 months and responded faster (3.3 months) compared with those receiving enzalutamide.

0 Who was in the study?



20,867 patients with mCSPC with ≥1 paid claim or filled dispensation for any ARPI on or after December 16, 2019 were identified

The number of patients were then narrowed down based on their drug claim status, mCSPC status, PSA measurements age (≥18 years), and whether patients had used radiopharmaceutical therapy (a form of cancer treatment) prior to starting treatment with apalutamide or enzalutamide.



221 (19.2%) Black patients with mCSPC who initiated enzalutamide

The average age was ~71 years. Other patient characteristics (such as starting PSA levels and previous treatments) were well-balanced between the two treatment groups.



6-month PSA90 response



By 6 months, patients treated with apalutamide had a 42% increased probability of achieving a PSA90 response compared with patients who were treated with enzalutamide

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Time to PSA90 response

3.3 months for patients receiving apalutamide

Glossary	of Term
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	Apalutamide	Apalutamide is a type of hormone therapy used to treat prostate cancer, and it works by blocking the effect of testosterone on prostate cancer cells.	Enzalutamide	Enzalutamide is a type of hormone therapy that blocks testosterone from reaching prostate cancer cells.	PSA
	ARPI	Androgen receptor pathway inhibitors are drugs used to treat prostate cancer by inhibiting the androgen receptor pathway, a key driver of prostate cancer cell growth.	mCSPC	A type of prostate cancer that has spread to other parts of the body but is still responsive to treatments that lower testosterone.	PSA90

How did patients respond to treatment with apalutamide or enzalutamide?

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63.1% of patients receiving apalutamide achieved a 90% reduction in PSA levels by 6 months

52.4% of patients receiving enzalutamide achieved a 90% reduction in PSA levels by 6 months



5.5 months

for patients receiving enzalutamide

A protein made by the prostate gland. Doctors use PSA as a marker to check for signs of prostate problems. PSA levels are also used to evaluate a patient's response to cancer treatment.

This refers to the point at which a person's PSA level has decreased by 90% after treatment. It is used to measure how well a treatment is working, especially in prostate cancer



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