O'NEAL COMPREHENSIVE CANCER CENTER

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TIME TO TREATMENT INITIATION IN 17P-DELETED CLL HAS **NO INFLUENCE ON OVERALL SURVIVAL**

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INTRODUCTION

- Chronic lymphocytic leukemia (CLL) is the most common newly diagnosed leukemia in the US
- Chromosome 17 p deletion (del17p) is associated with an inferior median overall survival (OS) of 2 to 3 years from time of firstline treatment versus 7 - 8 years in those without del17p
- In our study we explored the influence of time to treatment initiation in patients with del17p on overall survival

OBJECTIVES

- Evaluate the testing patterns for del17 by Fluorescence in situ hybridization (FISH)
- Determine the influence of time to treatment initiation (TTTI) in patients (pts) with untreated CLL and del17p on overall survival

METHODS

- was collected from the nationwide Data Flatiron Health (EHR)-derived de-identified database
 - a longitudinal database, comprising deidentified patient-level structured and data, curated via unstructured technology-enabled abstraction

- clinic visits
- Primary endpoint was real-world overall survival (rwOS) measured from diagnosis to death or censored if alive
- Time to Treatment Initiation (TTTI) was defined as time from diagnosis to time of first treatment initiation and censored if death prior to treatment
- The Kaplan and Meier method was used to describe the effect of del17p status (del17p v non-del17p) on rwOS and compared using the log rank test from the date of diagnosis to the date of death
- To evaluate the influence of del17p status on rwOS adjusted for TTTI, we used the index date as the date of diagnosis with the date of treatment initiation as a time-varying covariate and compared using cox regression model
- Lastly, we evaluated the influence of TTTI on rwOS in del17p CLL measured from the time of diagnosis to the time of death with the date of treatment initiation as a time-varying covariate and compared using cox regression model
- All patients were followed up until the relevant event of interest (death) or censored at their last structured activity in the EHR, defined as a documented office visit, vital status measurement, or medication administration

Pts diagnosed with CLL between 1/1991- 10/2021 with follow up of atleast 90 days over at least two

Del17p status was the predictor variable





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RESULTS

Median age at diagnosis was 67 years (IQR

Median follow up time by reverse Kaplan Meier method was 6 years (IQR 3.5-9.4) The presence of del17p CLL had inferior rwOS despite adjusting for TTTI compared to nondel17p CLL with HR of 1.99 (95%CI 1.8 – 2.2) • In patients with del17p CLL, TTTI had no influence on rwOS (HR of 1.1 (95%Cl of 0.58 –

CONCLUSIONS

One-third of CLL patients do not have FISH Del17p confers an inferior rwOS and have a shorter TTTI compared to non-del17p • rwOS is similar for even for shorter TTTI in

Future studies like the EVOLVE study (S1925) will determine if early identification and intervention for high risk CLL is beneficial