Real-world Ibrutinib dose reductions, holds, and discontinuations in chronic lymphocytic leukemia

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Study design

Patients with CLL

Received prior ibrutinib



n = 180



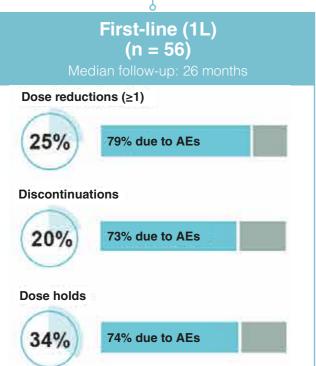
2 community networks and 1 academic practice

Pooled de-identified data



Multicenter, retrospective chart review

Findings



Relapsed/refractory (R/R) (n = 124)

Median follow-up: 28.5 months



88% due to AEs

Discontinuations

27%



GI disorders, atrial fibrillation, and infections

GI disorders, fatigue, and arthralgia/myalgia

Dose holds



76% due to AEs

Conclusion



Dose reductions, holds, and discontinuations were frequent in patients with CLL receiving ibrutinib in routine clinical practice.

Glossary: 1L: First-line; AE: Adverse event; CLL: Chronic lymphocytic leukemia; GI: Gastrointestinal; R/R: Relapsed/refractory.