Matching-Adjusted Indirect Comparison (MAIC) of Zanubrutinib versus Ibrutinib in Relapsed/Refractory Marginal Zone Lymphoma (R/R MZL)

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Abstract P1093

RESULTS

Patient Demographics and Disease Characteristics

- MAIC convergence was achieved using the full set of base-case covariates, and baseline characteristics were balanced between the 2 treatment groups after matching (Table 1).
- 2 factors, bone marrow involvement and ECOCG performance status, were removed to achieve convergence in the sensitivity analysis model
- Table 1, Baseline Characteristics in Zanubrutinib Treatment Group Before and After Matching to Ibrutinib Treatment Group

<table>
<thead>
<tr>
<th>Baseline Characteristics</th>
<th>Zanubrutinib</th>
<th>Ibrutinib</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender, %</td>
<td>55%</td>
<td>57%</td>
</tr>
<tr>
<td>Age, years</td>
<td>73</td>
<td>73</td>
</tr>
<tr>
<td>ECOG 0-1, %</td>
<td>69</td>
<td>67</td>
</tr>
<tr>
<td>Histology</td>
<td>93</td>
<td>93</td>
</tr>
<tr>
<td>Lactate dehydrogenase</td>
<td>53</td>
<td>53</td>
</tr>
<tr>
<td>Bone marrow involvement</td>
<td>23</td>
<td>23</td>
</tr>
<tr>
<td>Time since last therapy</td>
<td>14</td>
<td>14</td>
</tr>
</tbody>
</table>

Sensitivity Analysis

- Baseline (excluding number of prior lines)
- Base-case (excluding B symptoms)
- Base-case (excluding time since last therapy)
- Base-case (excluding prior LDH), adjusted (95% CI)

Statistical Analysis

- Propensity score models were used to match baseline characteristics in MAGNOLIA and BGB-3111-AU-003 to those observed in PCYC-1211.
- Prognostic factors were ranked by clinical experts (presented in order of importance in Table 1).

Matching-Adjusted Indirect Comparison Results

- Results from the MAIC are reported in Table 2, with unadjusted comparisons presented for informative purposes only.
- Compared withibrutinib, zanubrutinib significantly reduced the risk of progression (Figure 1) and was associated with a significantly higher ORR.
- OS was comparable for zanubrutinib and ibrutinib, which is consistent with expectations for indolent lymphomas, although point estimates were in favor of ibrutinib.
- A leave-one-out analysis showed significantly improved PFS for zanubrutinib when excluding B symptoms, time since last therapy, or bulky disease from the expanded model.

CONCLUSIONS

- This MAIC demonstrated ORR and PFS benefits for zanubrutinib in comparison to ibrutinib in R/R MZL

Table 2. Treatment Effect Estimates of Zanubrutinib vs Ibrutinib

<table>
<thead>
<tr>
<th>Treatment</th>
<th>OS (HR)</th>
<th>P =&lt; 0.01</th>
<th>ORR (OR)</th>
<th>P =&lt; 0.01</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zanubrutinib</td>
<td>0.68 (0.34-1.39)</td>
<td>0.26</td>
<td>0.41 (0.23-0.71)</td>
<td>0.16</td>
</tr>
<tr>
<td>Ibrutinib</td>
<td>1.00 (1.00-1.00)</td>
<td>1.00</td>
<td>1.00 (1.00-1.00)</td>
<td>1.00</td>
</tr>
</tbody>
</table>

REFERENCES


DISCLOSURES

- All authors disclose participation in the development or conduct of the study and in the review and approval of the manuscript. The sponsor had no role in the design, conduct, or reporting of the study.

CORRESPONDENCE

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Presented at EAHA 2022 Hybrid Congress, June 8-13, 2022, Frankfurt, Germany