838P: Patterns of response/progressive disease and management following progressive disease with anti-PD-1 therapy in patients with advanced cutaneous Squamous Cell Carcinoma

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Background

- Cytotoxic chemotherapies have been poorly studied in advanced cutaneous Squamous Cell Carcinoma (cSCC) and have historically demonstrated poor efficacy.[1]
- Anti- Programmed Death -1 (PD-1) monoclonal antibodies such as Cemiplimab[2] and Pembrolizumab[3] have demonstrated durable response.
- Most patients develop either innate resistance (IR; upfront progression or progressive disease after <6 months of stable disease) or acquired resistance (AR; progression after complete/partial response or after >6 months of stable disease)[4].

Objectives

(1) Evaluate site-specific patterns of response to anti-PD-(L)1 therapy.
(2) Study the management following progression to anti- PD-(L)1 therapy.

Methods

- Retrospective observational study of patients who received anti-PD-1 therapy or anti-PD-L1 therapy for advanced cSCC.
- Patient data collected from 8 international centres.
- Data included demographics, baseline characteristics, outcomes and subsequent treatments.
- Descriptive Analyses were performed using standard methods and survival analyses using the Kaplan-Meier Method.

TABLE 1: PATIENT CHARACTERISTICS

Variable	Patients (N=115)
Sex	
Male	89 (77%)
Female	26 (23%)
Age	79 yrs (range 42-94)
History of malignancy, other than complex skin cancer	25 (22%)
Immunosuppression	10 (9%)
Sites	
Visceral metastases	33 (29%)
Nodal metastases	46 (40%)
Subcutaneous	87 (76%)

Results

FIGURE 1. Site-specific Response and Progression to anti-PD-(L)1 therapy

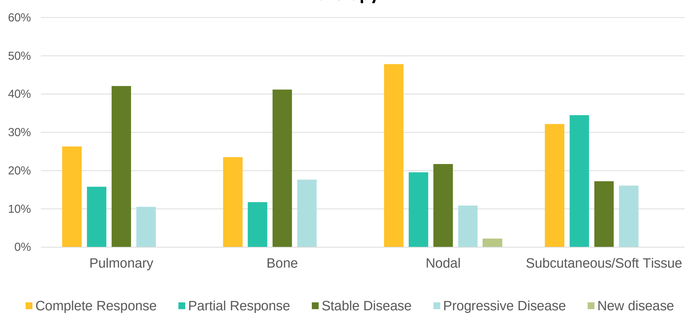


FIGURE 2. Best Objective Response to anti-PD-(L)1 therapy

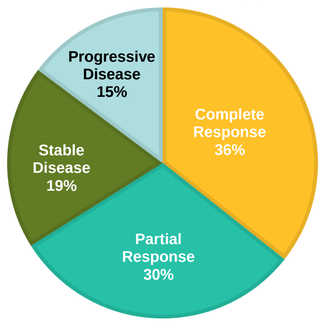
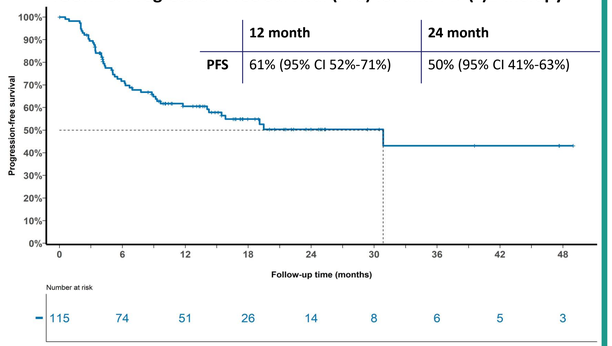
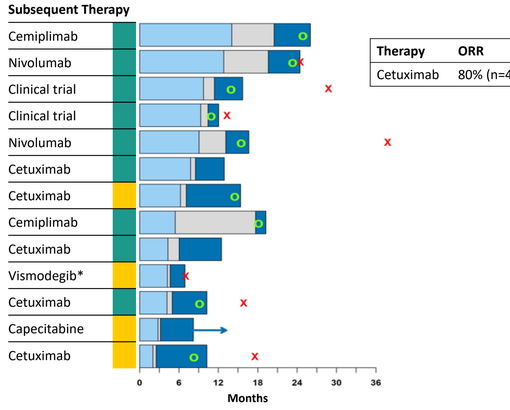


FIGURE 3. Progression-Free Survival (PFS) for anti-PD-(L)1 therapy

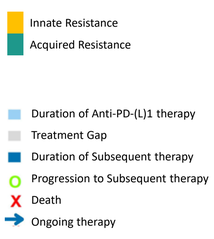


	12 month	24 month
PFS	61% (95% CI 52%-71%)	50% (95% CI 41%-63%)

FIGURE 4. Swimmer plot of duration of therapy for anti-PD-(L)1 therapy and subsequent therapy (n=13)

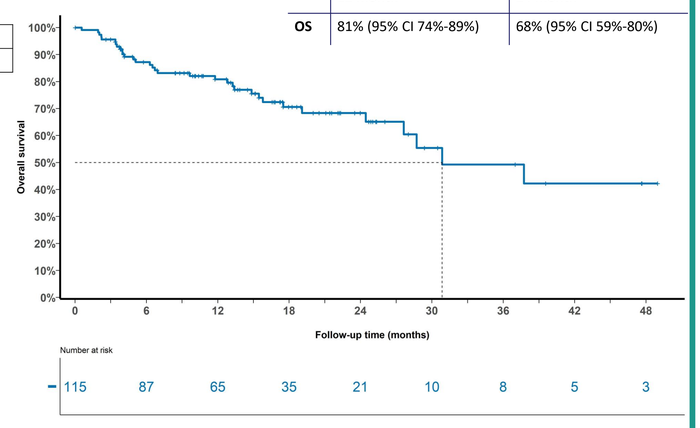


Therapy	ORR	Median Duration of Response
Cetuximab	80% (n=4/5)	7.7 months (range 6.88 – 19.51 months)



One patient excluded as response was not available.
*This patient received subsequent vismodegib for mixed basalosquamous pathology.

FIGURE 5. Overall Survival (OS) for anti-PD-(L)1 therapy



	12 month	24 month
OS	81% (95% CI 74%-89%)	68% (95% CI 59%-80%)

Conclusions

- Nodal and subcutaneous disease demonstrated a higher response rate to Anti-PD-(L)1 therapy compared to pulmonary and bone metastases.
- For patients who had progressed on Anti-PD-(L)1 therapy, cetuximab was the most common regimen with a signal for response.

References

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