Association of progression-free survival & overall survival in follicular lymphoma trials

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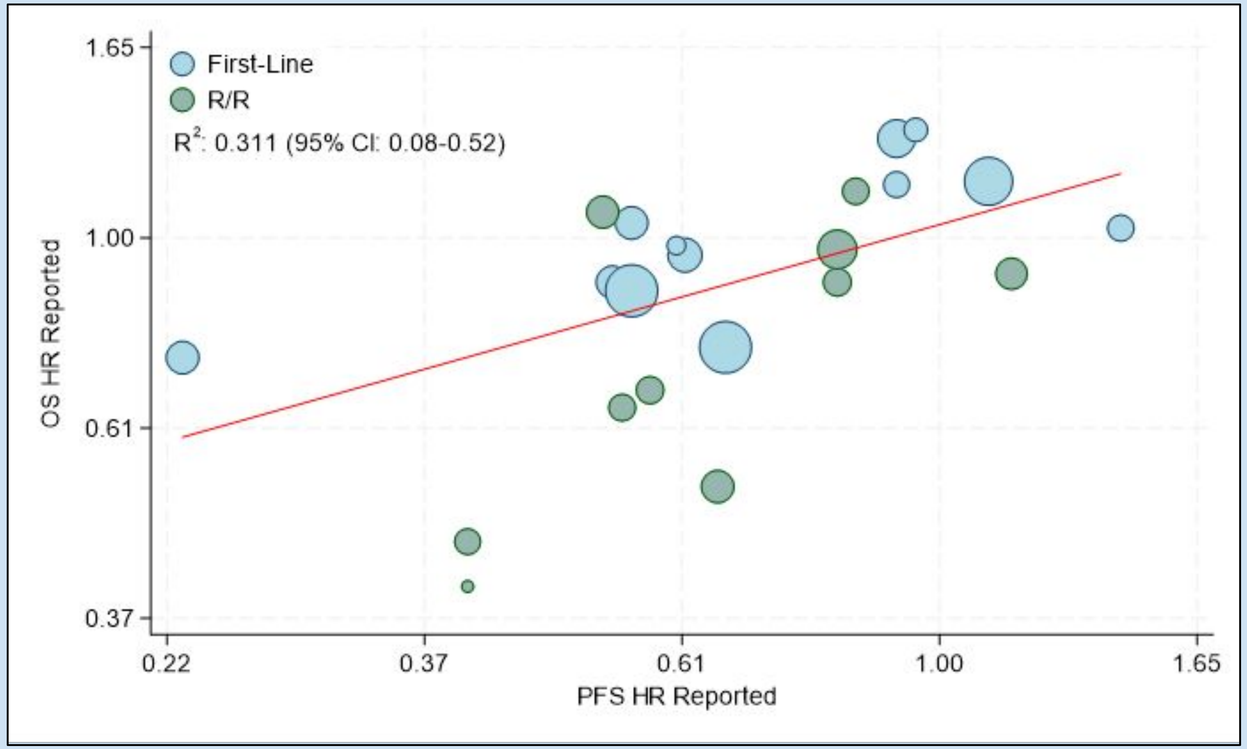
Progression-free survival is *weakly* associated with overall survival in clinical trials of follicular lymphoma

Background

- Follicular lymphoma (FL) accounts for 70% of indolent lymphomas
- Despite its generally indolent nature, individuals with FL experience excess mortality
- Assessing treatment efficacy in FL clinical trials requires the appropriate endpoint

Methods

- Systematic search of Clinicaltrials.gov for randomized phase 2 and phase 3 trials
- Trials from before database inception were manually added
- Trials that reported hazard ratios were included in analysis
- Unadjusted linear regression analysis was performed to establish the coefficient of determination between PFS and OS



Results

- 169 trials screened
- 22 interventional arms with 10,729 participants met inclusion criteria
- PFS and OS benefit were observed in 64% and 18% of trials, respectively
- In the final analysis, the correlation coefficient was 0.558

Conclusions

- There is a weak association between PFS and OS in FL
- Several factors may contribute to this discrepancy, including:
  - Patient heterogeneity
  - Post-protocol therapies
  - Long-term toxicities
- Future clinical trials in FL could prioritize other endpoints
  - POD24
  - CR30
  - OS