

# TISLELIZUMAB VERSUS CHEMOTHERAPY AS SECOND-LINE TREATMENT FOR ADVANCED OR METASTATIC ESOPHAGEAL SQUAMOUS CELL CARCINOMA (ESCC, RATIONALE 302): IMPACT ON HEALTH-RELATED QUALITY OF LIFE (HRQOL)

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## ABSTRACT

**Introduction:** The global phase 3 study RATIONALE 302 (NCT03430843) compared tislelizumab (tis) with investigator-chosen chemotherapy (ICC) as second-line (2L) treatment for advanced or metastatic ESCC. Tis had a significant and clinically meaningful improvement in overall survival (HR=0.70 [95% CI 0.57–0.85],  $P=.0001$ ), and a favorable safety profile compared with ICC. This ESCC pt population typically experiences HRQoL deterioration; thus, this study assessed HRQoL in RATIONALE 302 pts.

**Methods:** Adults with advanced or metastatic ESCC whose disease progressed after systemic therapy were randomized 1:1 to tis 200 mg intravenously every 3 weeks or ICC (paclitaxel, docetaxel, or irinotecan). HRQoL was measured using EORTC QLQ-C30 global health status/quality of life (GHS/QoL), physical functioning, and fatigue scores and EORTC QLQ-OES18 dysphagia, reflux, eating, and pain scores from screening to Cycle 6 or treatment discontinuation. Least-squares mean HRQoL score change from baseline to Cycles 4 and 6 was assessed using a mixed model for repeated measurements. Time to deterioration (TTD) for GHS/QoL score and QLQ-OES18 symptom scales was examined with the Kaplan-Meier method.

**Results:** Overall, 512 pts (median age 62 y) received tis (n=256) or ICC (n=256). Compared with ICC, the tis arm maintained GHS/QoL and fatigue scores and less decline in physical functioning at Cycles 4 and 6 (table). Except for pain, the tis arm had less OES18 symptoms relative to baseline than the ICC arm. TTD analysis showed the tis arm had a lower risk of worsening dysphagia (HR=0.76 [95% CI 0.53, 1.07],  $P=.0562$ ) relative to ICC.

**Conclusions:** Pts with ESCC treated with 2L tis had longer maintenance of HRQoL compared with ICC. These results, along with improved survival and a favorable safety profile, suggest tis represents a potential new 2L treatment option for advanced or metastatic ESCC.

Least-square change from baseline, mean (95% CI)		Tis (N=256)		ICC (N=256)	
		Cycle 4	Cycle 6	Cycle 4	Cycle 6
QLQ-C30	GHS/QoL	0.0 (-2.5, 2.4)	-0.8 (-3.5, 2.0)	-5.8 (-8.8, -2.8)	-8.9 (-12.8, -4.9)
	Physical functioning	-4.0 (-6.3, -1.8)	-4.6 (-7.1, -2.1)	-6.6 (-9.3, -4.0)	-8.9 (-12.1, -5.6)
	Fatigue	3.5 (0.4, 6.6)	1.0 (-2.1, 4.2)	11.3 (7.5, 15.1)	6.4 (2.0, 10.9)
QLQ-OES18	Dysphagia	2.7 (-1.7, 7.1)	1.6 (-3.5, 6.6)	7.7 (2.2, 13.2)	1.9 (-5.5, 9.2)
	Reflux	-2.3 (-4.6, -0.1)	-1.8 (-4.7, 1.2)	1.8 (-1.1, 4.7)	-1.1 (-5.4, 3.2)
	Eating	0.0 (-2.8, 2.8)	-0.5 (-3.6, 2.6)	2.7 (-0.8, 6.2)	4.7 (0.3, 9.1)
	Pain	-1.6 (-3.4, 0.2)	-1.4 (-3.9, 1.0)	-1.1 (-3.6, 1.3)	0.2 (-3.6, 4.1)