

# Erythropoiesis Stimulating Factors (ESAs) for the treatment of chemotherapy induced anemia in patients with Hb<11g/dl. A systematic review (SR) and meta-analysis (MA).

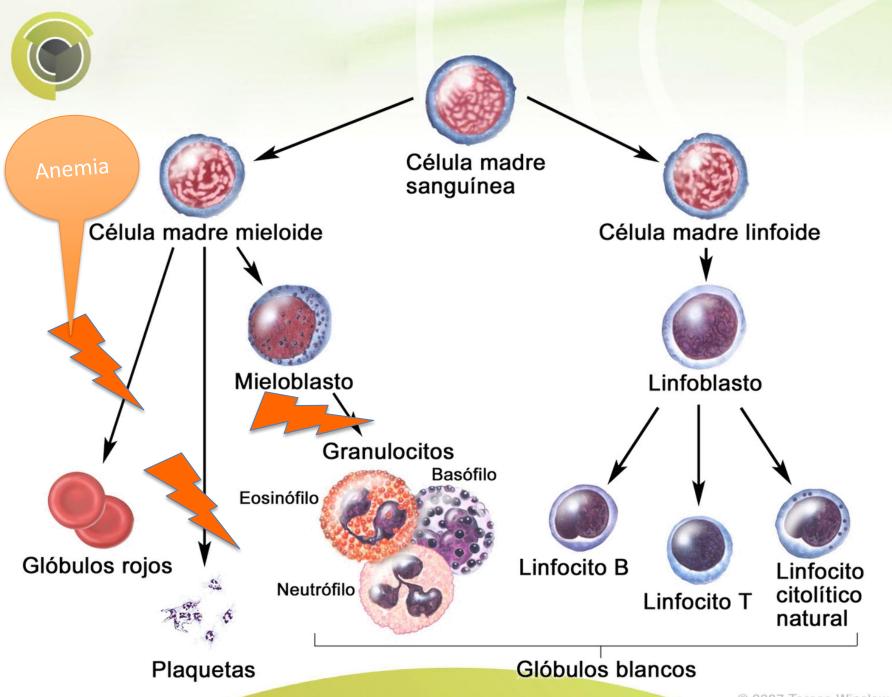
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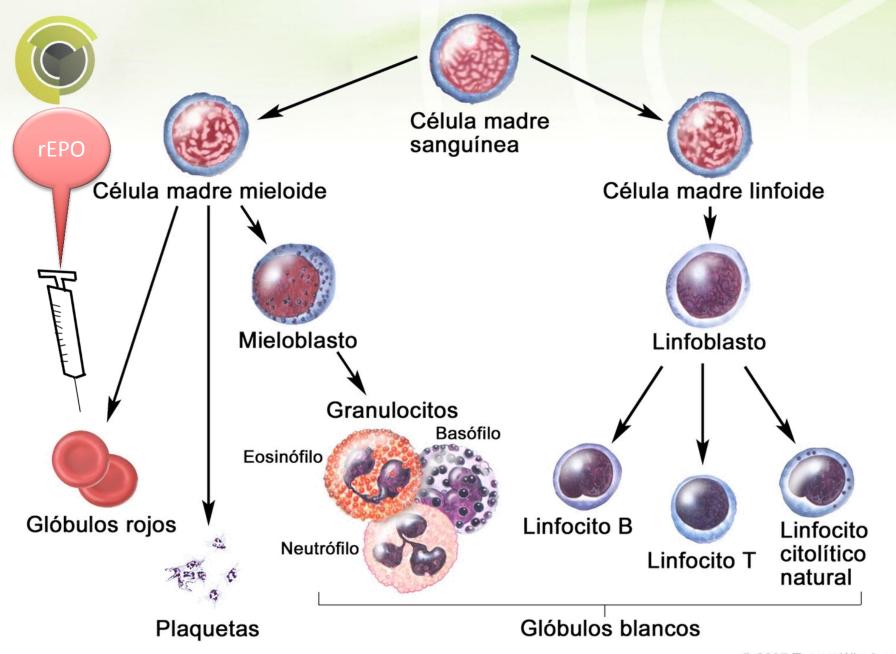
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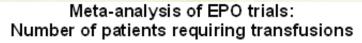


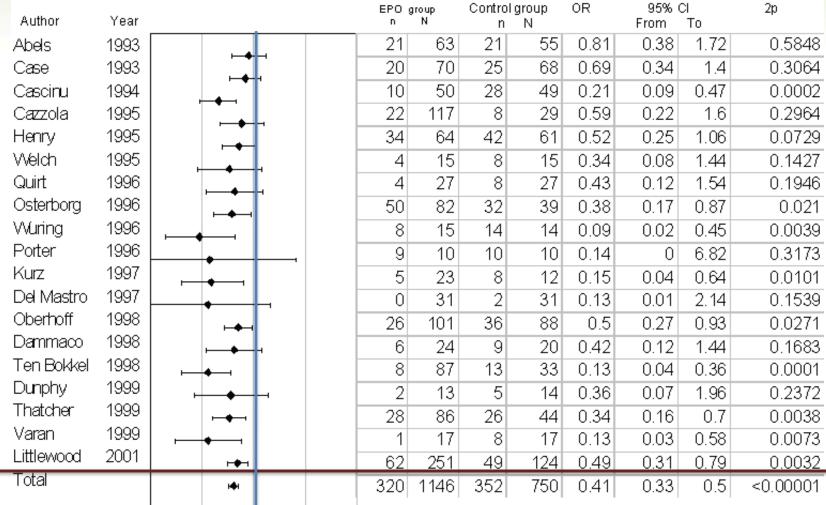
Instituto de Conhecimento, Ensino e Pesquisa - **ICEP-HS** 











0.01 0.1 1 10 100 Favor EPO Favor controls Odds Rato (OR) 95% Confidence Interval



#### r-EPO

- Increases Hb Level
- Diminishes transfusion needs



#### 2009

- Cochrane meta-analysis
- Increase in mortality associated to EPO use

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	Treatment-Related Anemia	0.000.00	4.007.040			_	
	Throuvalas et al,55 2000	0/28 (0)	1/27 (4)	0.01	0.13 (0-332.66)		
	Dunphy et al.35 1999	0/15 (0)	1/15 (7)	0.05	0.14 (0-6.88)		
	Vadhan-Raj et al, <sup>56</sup> 2004	0/28 (0)	1/31 (3)	0.01	0.15 (0-415.90)		
	Dammacco et al,33 2001	3/69 (4)	11/76 (14)	0.59	0.32 (0.11-0.95)		
	Del Mastro et al,34 1997	1/31 (3)	3/31 (10)	0.19	0.36 (0.05-2.56)		
1	Cazzola et al,31 1995	2/117 (2)	1/29 (3)	0.22	0.37 (0.06-2.27)		
	P-174, <sup>11</sup> 2004	1/33 (3)	1/12 (8)	0.11	0.41 (0.03-5.76)	•	
	Thatcher et al,54 1999	1/42 (2)	1/22 (5)	0.09	0.49 (0.03-8.71)	•	
	Kotasek et al,30 2003	7/198 (4)	3/51 (6)	0.29	0.55 (0.11-2.71)	-	*
	Oberhoff et al,44 1998	4/114 (4)	12/104 (12)	0.80	0.61 (0.24-1.55)		
	Blohmer et al,24 2003 (AGO/NOGG)	16/33 (48)	23/116 (20)	1.43	0.67 (0.34-1.33)	<del></del>	
	Henry and Abels,38 1994	8/67 (12)	10/65 (15)	0.72	0.75 (0.28-2.01)		
	Vansteenkiste et al,2 2002	100/155 (65)	119/159 (75)	6.01	0.78 (0.60-1.01)		
	Littlewood et al,41 2001	155/251 (62)	82/124 (66)	5.82	0.81 (0.62-1.06)		
	Taylor et al,21 2005 (DA 232)	NR	NR	1.64	0.85 (0.45-1.60)		
	EPO-CAN-17,12 2007	24/176 (14)	27/178 (15)	1.85	0.88 (0.49-1.59)	— <b>=</b>	
	Amgen DA 145,13 2007	NR	NR	10.44	0.93 (0.82-1.05)	•	
	Razzouk et al.49 2004	2/112 (2)	2/110 (2)	0.19	0.98 (0.14-6.90)		
	Savonije et al,51 2004	12/211 (6)	6/104 (6)	0.70	0.98 (0.36-2.67)		
	ten Bokkel Huinink et al,53 1998	4/87 (5)	2/33 (6)	0.26	1.01 (0.19-5.31)		
	Osterborg et al, 48 1996	15/47 (32)	12/49 (24)	1.38	1.02 (0.51-2.04)	_	
	Coiffier et al, 32 2001	8/133 (6)	8/129 (6)	0.73	1.02 (0.38-2.73)		
	Debus et al, 16 2007 (EPO-GER-22)	NR	NR	2.17	1.02 (0.60-1.74)		
	Osterborg et al, <sup>47</sup> 2005	110/170 (65)	119/173 (69)	5.91	1.04 (0.80-1.74)		
	EPO-GBR-7,12 2007	52/151 (34)	50/149 (34)	3.67	1.07 (0.73-1.57)		
	Case et al,30 1993	10/81 (12)	9/76 (12)	0.86	1.08 (0.44-2.66)	<u></u> -	
	Witzig et al, 57 2005	105/166 (63)	103/164 (63)	5.74	1.09 (0.83-1.43)	<u>I</u>	
	Moebus et al, 18 2007	NR	NR	3.50		<u>II</u>	
	Strauss et al, 23 2007	NR	NR	2.28	1.14 (0.77-1.69)	_ <u>T_</u>	
	Thomas et al, 35 2007 (GOG-191)	8/58 (14)	9/55 (16)		1.16 (0.69-1.95)	<u> </u>	
	Thatcher et al,54 1999			1.54	1.25 (0.65-2.41)		
		5/44 (11) NR	2/22 (9) NR	0.27	1.26 (0.24-6.60)	<b>:</b>	
	Overgaard et al, 14 2007 (DAHANCA 10) Hertenus et al 37 2003	74/175 (42)	61/169 /36)	5.59	1.28 (0.97-1.69)	<b>=</b>	
	Leyland-Jones et al, 40 2005 (INT-76)	148/469 (32)	115/470 (24)	6.39	1.37 (1.07-1.75)		
	Henke et al. 5 2003	109/180 (61)	89/17/1 (52)	5.53	1.39 (1.05-1.84)	+=-	
	Machtay et al,42 2007 (RTOG 99-03)	27/71 (38)	21/70 (30)	1.97	1.41 (0.80-2.49)		
	PREPARE, 48 2007	50/356 (14)	37/377 (10)	2.92	1.50 (0.96-2.34)	4-	
	Grote et al, 43 2005 (N93-004)	100/109 (92)	101/115 (88)	0.94	1.53 (0.65-3.61)		_
	INT-3,11 2004	9/135 (7)	3/65 (5)	0.42	1.56 (0.42-5.79)		
	INT-1,11 2004	6/164 (4)	2/80 (3)	0.28	1.58 (0.32-7.82)		
	Rose et al, 50 1994	16/142 (11)	6/79 (8)	0.80	1.68 (0.66-4.29)		
	Bamias et al, 29 2003	7/72 (10)	4/72 (6)	0.48	1.80 (0.53-6.12)		
	Wright et al, 58 2007 (EPO-CAN-20)	32/33 (97)	34/37 (92)	1.79	1.84 (1.01-3.35)		_
	EPO-CAN-15,11 2004	21/53 (40)	10/53 (19)	0.99	2.70 (1.17-6.23)		
	Wilkinson et al, 20 2006	NR	NR	0.99	4.54 (0.40-51.20)		_
	O'Shaughnessy et al,45 2005	1/47 (2)					-
	O orland messy et al., ~ 2005	1/4/ (2)	0/47 (0)	0.05	7.39 (0.15-366.10)		
	Subtotal			92.28	1.09 (0.99-1.19)	\$	
	I <sup>2</sup> =21.1%; P=.11						
	Heterogeneity between aroung Re-118						

Heterogeneity between groups P = .13

Bohlius, Lancet 2009



## Does EPO increase mortality?

- Cochrane meta-analysis
- Included patients with anemia <u>and</u> patients with normal Hb levels
- Different profile of patients



## Objectives

- Systematic review and meta-analysis
  - Is rEPO linked to an increase in mortality when given to patients, <u>according to the label</u> <u>indication?</u>
    - HB<11g/DI
    - On chemotherapy

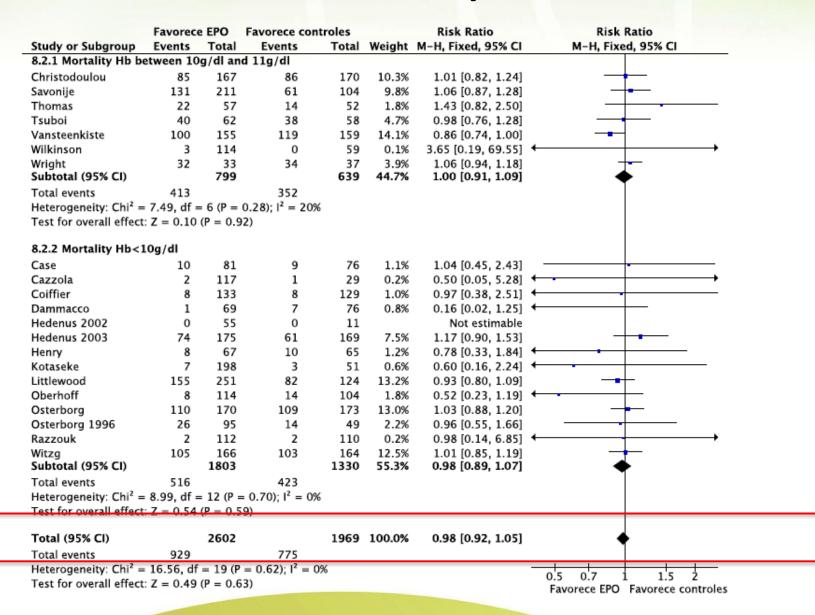


#### rEPO

- Included studies:
  - Randomized controlled trials
  - Patients with cancer
  - In use of chemotherapy
  - With anemia
    - HB<11g/dl
- 21 studies were included



## Meta-analysis





#### Results

- r-EPO, when used according to the label indications does not increase mortality
- RR= 0.98 (0.92-1.05)
- No statistical heterogeneity



#### Discussion

- This meta-analysis highlights the importance of evaluating the heterogeneity of patients
- Not only statistical heterogeneity
- Danger of mixing "apples and oranges"



#### Conclusion

r-EPO when administered according to the label indication <u>does not</u> increase mortality





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