ANNA
AMERICAN NEPHROLOGY NURSES' ASSOCIATION
ANNA'S 44TH NATIONAL SYMPOSIUM
APRIL 21-24, 2013
RIO ALL-SUITE HOTEL, LAS VEGAS, NEVADA

Updated Safety Fesults from EXIST-2

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EXIST-2 (NCT00790400), a randomized, double-blind, phase 3 trial, assessed the efficacy and safety of everolimus, an oral mTOR inhibitor, for treating renal angiomyolipoma (AML) in patients with tuberous sclerosis complex (TSC) or sporadic lymphangioleiomyomatosis. Patients were randomized 2:1 to receive everolimus 10 mg daily (n=79) or placebo (n=39). Everolimus was superior to placebo for the primary endpoint, renal AML response rate (P<.0001) with a safety profile consistent with that previously reported in TSC patients. Presented here is a 90-day safety update for patients receiving ≥1 dose of double-blind study drug with a valid post-baseline assessment. As of Oct 14, 2011, median treatment duration was 48 and 45 weeks for everolimus and placebo arms, respectively. Discontinuations in the double-blind period were the same in the everolimus arm, but had increased by 4 patients in the placebo arm since the initial analysis (n=3 disease progression, n=1 withdrawal of consent). The majority of adverse events (AEs) continued to be grade 1 or 2; however, the incidence of serious AEs was slightly higher than initially reported, particularly in the placebo arm (everolimus 20%, placebo 23%). In the updated analysis, 3 additional everolimus patients required dose interruption or reduction due to AEs; dose reduction/interruption remained more common in the everolimus arm (52% vs 21%). Overall, the 90-day safety update from EXIST-2 has not revealed any additional concerns. No everolimus patients withdrew for any reason, whereas 3 more placebo patients withdrew due to disease progression.

Abstract selected for presentation at ANNA's 44th National Symposium, Las Vegas, NV, 2013