

MP55-06



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AUA VIRTUAL EXPERIENCE



OUTCOME OF NON-RESPONDERS TO NEOADJUVANT IMMUNOTHERAPY COMPARED TO CISPLATIN-BASED CHEMOTHERAPY BEFORE RADICAL CYSTECTOMY IN MUSCLE-INVASIVE BLADDER CANCER

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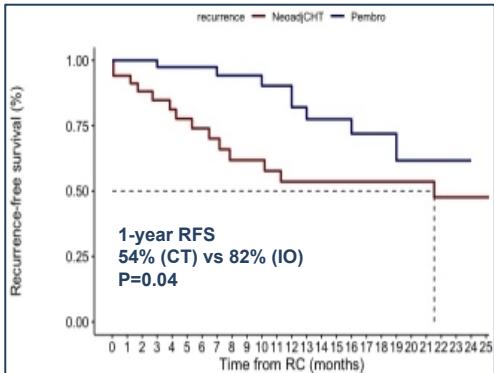
Materials and Methods

AIM: to compare the Relapse-Free Survival (RFS) after RC in ypT2-4 or yN+ pts after treatment with neoadjuvant IO vs. CT

Variables	Overall (88)	Neoadjuvant CHT (46)	Neoadjuvant Pembrolizumab (42)	p
Median Age	68.8 (62.4-73.4)	71.1 (63.3-73.8)	66.5 (62-72)	0.4
No aCHT	67 (76.1)	34 (73.9)	33 (78.6)	
aCHT	11 (12.5)	2 (4.3)	9 (21.4)	0.1
Female	8 (9.1)	4 (8.7)	4 (9.5)	
Male	80 (90.9)	42 (91.3)	38 (90.5)	1.0
T<2	6 (6.8)	6 (13)	0 (0)	
T2-4	82 (93.2)	40 (87)	42 (100)	0.05
pN0-X	45 (51.1)	23 (50)	22 (52.4)	
pN1	15 (17)	5 (10.9)	10 (23.8)	
pN2	14 (15.9)	8 (17.4)	6 (14.3)	0.2
pN3	14 (15.9)	10 (21.7)	4 (9.5)	

Results II and Conclusions

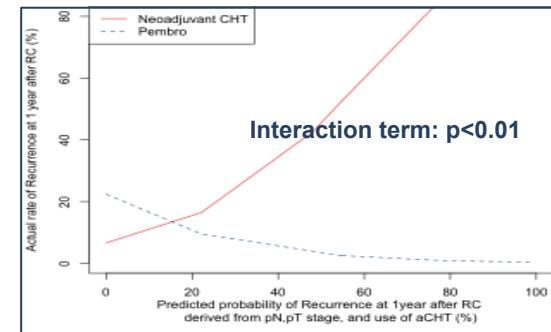
Kaplan-Meier analysis examining recurrence-free survival according to neoadjuvant treatment delivered



Cox-Regression analysis predicting the risk of recurrence after neoadjuvant therapy and RC

Cox regression	Univariate Table				Multivariate Table			
	HR	5%	95%	p	HR	5%	95%	p
Neoadjuvant pembrolizumab (Ref. CHT)	0.29	0.13	0.66	0.003	0.38	0.15	0.95	0.03
Age	1.06	1.01	1.11	0.02	1.11	1.04	1.18	<0.01
Male	3.37	0.46	24.89	0.2	1.75	0.22	13.64	0.5
Adjuvant chemotherapy	2.50	0.85	7.35	0.09	3.45	1.08	11.08	0.04

Incremental utility analysis showing the increasing benefit associated with neoadjuvant IO



CONCLUSIONS: The paradigm that non-responder ypT2-4 or ypN+ MIBC patients present adverse oncologic outcomes was confirmed after standard neoadjuvant chemotherapy, but not after neoadjuvant pembrolizumab. Neoadjuvant immunotherapy still shows an oncologic benefit even in patients with apparently unresponsive disease.