

#### 2455P

Prevalence and severity of hot flashes and their association with prostate-specific antigen (PSA) response: results from the initial treatment phase of LIBERTAS, a phase 3 study in metastatic hormone-sensitive prostate cancer (mHSPC)

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## Background

Apalutamide (APA) with continuous androgen deprivation therapy (cADT) showed rapid and deep PSA decline in TITAN (Chowdhury *Ann Oncol* 2023). Hot flashes, an ADT-related side effect, pose a high burden for pts, negatively impacting their quality of life. LIBERTAS, an ongoing ADT de-escalation study, is evaluating APA + intermittent ADT (iADT) vs APA + cADT in mHSPC pts with deep PSA response after initial tx (APA + cADT). Primary end points are radiographic progression-free survival and hot flash burden reduction after 18 mo of APA + iADT. Here we report PSA and hot flash data for the initial 6 mo tx phase.

### Methods

LIBERTAS, a prospective, open-label, randomized study, enrolled pts with mHSPC (metastasis by conventional imaging and/or regional lymph node metastases by next-generation imaging,  $\leq$ 3 mo ADT pre-enrolment, and ECOG PS 0 or 1 [2 or 3 if only related to stable physical disabilities]). Pts received 6 mo of APA (240 mg/d) + cADT; pts with confirmed PSA <0.2 ng/mL were randomized 1:1 to APA + iADT or APA + cADT in the main tx phase.

#### Results

For the initial tx phase, 420 pts (73 sites, 9 countries) were enrolled (full analysis set). Baseline (BL; last record before/on Day 1 of tx) median PSA was 7.3 ng/mL. Of the 383 pts who completed initial tx, 271 (71%) achieved PSA <0.2 ng/mL and were randomized (deep PSA data set, ITT). Hot flash diary compliance (collected per protocol across all sites/visits) was >93%/>95% within the initial tx for the full analysis/deep PSA data sets. Rate of hot flash increased by >23% from BL to 6 mo in both data sets; median average daily severity-adjusted hot flash score also increased (Table). Safety was consistent with prior experience. Table: 2455P

	Pts with hot flash/completed diaries <sup>a</sup> , n/n (%) Median (IQR) average daily severity adjusted hot flash score <sup>b</sup>			
	Full analysis n=420	Deep PSA (ITT) n=271	Full analysis n=420	Deep PSA (ITT) n=271
BL	248/404 (61)	161/261 (62)	2.5 (0.8-7.4)	2.3 (0.8-7.1)
C7 D1 <sup>c</sup> (6 mos	s) 295/343 (86)	223/262 (85)	6.6 (2.9-12.5)	5.8 (2.4-12.3)

aHot flash diaries completed: ≥7 d consecutive pre-C1D1 and C7D1. bTotal severity score: each hot flash event multiplied by severity factor (1-mild, 2-moderate, 3-severe, 4-very severe) and summed across collection days. Average daily: total severity score divided by number of collection days. cTx Cs were 28 days each. C, cycle; D, day; ITT, intent to treat; IQR, interquartile range

### **Conclusions**

During tx with APA + cADT in the initial tx phase of LIBERTAS prior to randomization, hot flash burden was high and increased from BL to 6 mo. Notably, hot flash burden was independent of PSA response.

## Clinical trial identification

NCT05884398.

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# Legal entity responsible for the study

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