Hematologic Response in Patients With Myelofibrosis Treated With Pacritinib in Real-World Clinical Settings

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*At the time the study was conducted

CONCLUSIONS

- **Patients with myelofibrosis (MF) and anemia treated with pacritinib (PAC) in real-world clinical settings demonstrated improvements in hemoglobin (Hb) levels and platelet (PLT) counts**
- **These real-world findings align with the guideline recommendations for the use of PAC in patients with anemia**

BACKGROUND

- Anemia is a significant clinical burden in MF[1]
- PAC, a JAK1-sparing inhibitor of JAK2/IRAK1/ACV1, reduced anemia-related transfusion requirements among non–transfusion-independent patients in the PERSIST-2 study (NCT02055781)[2]
- PAC can be administered at full dose regardless of cytopenias and may offer clinical benefit for patients with MF and anemia[2,3]

AIM

To evaluate Hb response in patients with MF, including those with anemia, treated with PAC in real-world clinical settings

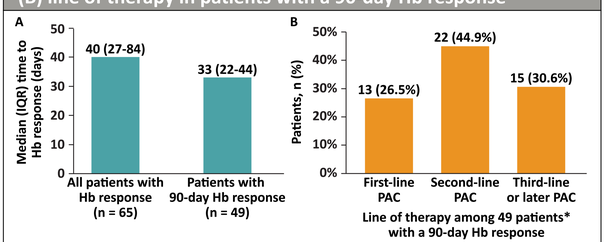
METHODS

- The Integra-PrecisionQ database, including electronic health and practice management data (80% community oncology practices) was used to identify patients with MF (based on *International Classification of Diseases, Tenth Revision [ICD-10]* diagnostic codes: D47.4, D75.81, and D47.1) who initiated treatment with PAC (index) between June 1, 2022, and June 30, 2024, in real-world clinical settings
- Patients with ≥90 days of follow-up from index and complete laboratory data were included
- Data were extracted from the index date to the end of data availability, death, or end of study (September 30, 2024), whichever occurred first
- Treatment patterns, including line of therapy with any MF-directed treatment, and outcomes were analyzed overall and by baseline Hb levels: Hb <8 g/dL (severe anemia), 8-10 g/dL (moderate anemia), and >10 g/dL (mild/no anemia)
- Treatment-related outcomes assessed included Hb response (absolute increase in Hb level ≥1.5 g/dL), PLT count, and Hb levels through the end of the study
- Continuous variables were summarized using median and interquartile range, and categorical variables were described using counts and percentages

RESULTS

- Of the 148 patients who had data for ≥90 days post-index, 44% (65 of 148) met the criteria for Hb response, and 75% (49 of 65) achieved a response within 90 days
- At index, 84% (41 of 49) of patients who experienced an Hb response by day 90 had moderate or severe anemia (**Table 1**)
- Of those with an Hb response by day 90 (n = 49),
  - Median time from MF diagnosis to index was 11 months (**Table 1**)
  - Median time to Hb response from index was 33 days (**Figure 1A**)
  - 44.9% (22 of 49) were treated with second-line PAC (**Figure 1B**)
  - Median duration of treatment with PAC was 5 months among those with ≥9 months follow-up (n = 27; **Table 1**)

Figure 1. (A) Time to Hb response from index, (B) line of therapy in patients with a 90-day Hb response



*The patient count exceeded 49 because some received PAC across multiple lines of therapy in addition to other MF-directed therapies.
Hb, hemoglobin; IQR, interquartile range; MF, myelofibrosis; PAC, pacritinib.

Table 1. Baseline demographics and clinical characteristics of patients with a 90-day Hb response (n = 49)

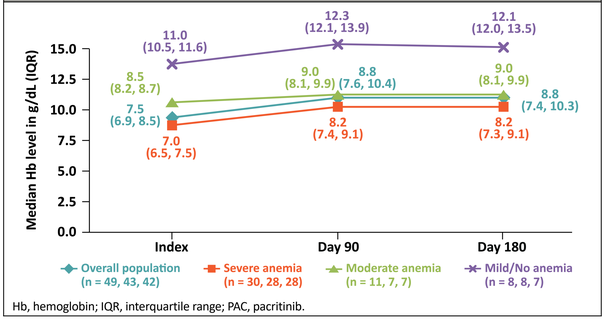
Age at index, years	
Median (IQR)	76 (67.0-82.0)
Sex, n (%)	
Male	27 (55.1)
Race, n (%)	
White	29 (59.1)
Black or African American	2 (4.2)
Asian	1 (2.0)
Other/unknown	17 (34.7)
PLT (× 10^9/L) at index	
Median (IQR)	72.0 (32.0-159.0)
Hb (g/dL) at index	
Median (IQR)	7.5 (6.9-8.5)
Anemia at index, n (%)	
Severe anemia (Hb <8 g/dL)	30 (61.2)
Moderate anemia (Hb 8-10 g/dL)	11 (22.4)
Mild/no anemia (Hb >10 g/dL)	8 (16.3)
Time from MF diagnosis to index, months	
Median (IQR)	11.4 (0.9-33.6)
Follow-up from index, months	
Median (IQR)	10.0 (5.0-15.0)
Duration of PAC treatment in patients with ≥9 months follow-up, months	
Median (IQR)	5.2 (3.3, 9.8)

Index, PAC initiation.
Hb, hemoglobin; IQR, interquartile range; MF, myelofibrosis; PAC, pacritinib; PLT, platelet.

Hb Response With PAC Treatment

- Hb levels increased with a 17% median change from index through day 90 and remained stable through day 180 (**Figure 2**)
- Similar improvements in Hb levels were observed in patients with severe, moderate, and mild/no anemia (**Figure 2**)

Figure 2. Impact of PAC on Hb levels in patients achieving a 90-day Hb response

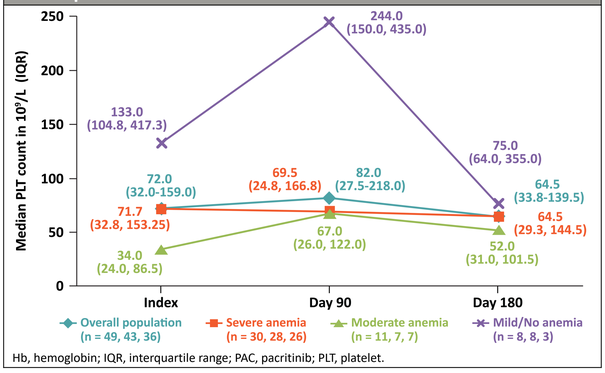


Hb, hemoglobin; IQR, interquartile range; PAC, pacritinib.

PLT Response With PAC Treatment

- Overall, PLT counts remained stable through day 180 (**Figure 3**)
- Improvements in PLT counts at day 90 were observed in patients with moderate and mild/no anemia whereas they remained stable in those with severe anemia up to day 180 (**Figure 3**)

Figure 3. Impact of PAC on PLT counts in patients with a 90-day Hb response



Hb, hemoglobin; IQR, interquartile range; PAC, pacritinib; PLT, platelet.

Limitations

- Given the limited sample size, results may not be generalizable beyond the study patients
- As with other retrospective studies, there is a risk of missing or incomplete information as data may not be uniformly available for all patients at standardized time intervals

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