RE-MIND 研究:以倾向性评分为基础的 1:1 匹配比较 tafasitamab + 来那度胺（L-MIND)与来那度胺单药治疗(真实世界数据)在不符合移植条件的复发/难治性（R/R）弥漫性大 B 细胞淋巴瘤(DLBCL)患者中的应用

RE-MIND study: A propensity score-based 1:1 matched comparison of tafasitamab + lenalidomide (L-MIND) versus lenalidomide monotherapy (real-world data) in transplant-ineligible patients with relapsed/refractory (R/R) diffuse large B-cell lymphoma (DLBCL).

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背景：不符合自体干细胞移植（ASCT）条件的复发/难治性弥漫性大 B 细胞淋巴瘤（R / R DLBCL）患者的预后不良。在这些患者中，tafasitamab（抗 CD19 抗体）加来那度胺（LEN）在开放标签的单臂 II 期 L-MIND 研究（n = 81； NCT02399085）中显示出令人鼓舞的结果。为了评估 tafasitamab 对这种联用方案疗效的贡献，研究者对接受 LEN 单药治疗的患者进行了一项全球性真实世界研究（RE-MIND；

NCT04150328），以 1：1 患者水平匹配对 L-MIND 和 RE-MIND 两个队列进行比较分析。

方法：接受 LEN 单药治疗的 R / R DLBCL 患者纳入观察性、回顾性 RE-MIND 队列。与 L-MIND 一样，患者先前接受了 1-3 次全身治疗，包括≥1 次 CD20 靶向治疗方案；患者年龄≥18 岁；不符合 ASCT 条件。1：1 的估计倾向得分（ePS）匹配方法论确保了九个预先指定的基线协变量的均衡。主要分析集，即匹配分析集 25（MAS25），包括接受 LEN 起始剂量为 25mg/d 的患者。主要终点是研究者评估的最佳客观缓解率（ORR）。关键的次要终点包括总体生存率（OS）和完全缓解率（CR）。

结果：在美国和欧洲的 58 个医疗中心中，共有 490 名患者参加了 RE-MIND 治疗，其中 140 个满足 ePS 匹配标准。MAS25 包括来自两个队列的 76 位患者。队列之间的基线特征具有可比性。L-MIND 组的主要终点 ORR 为 67.1％（95％CI：55.4 – 77.5），显着优于 RE-MIND 组的 34.2％（95％CI：23.7 – 46.0）（比值比 OR 3.89 ; 95％CI：1.90-8.14; p <0.0001）。L-MIND 组的 CR 率为 39.5％（95％CI：28.4-51.4），而 RE-MIND 组为 13.2％（95％CI：6.5-22.9）。两组 OS 差异性显着，L-MIND 组获益更明显（HR = 0.499；95％CI：0.317 – 0.785）。RE-MIND 组中的 ORR 和 CR 结果与 R / R DLBCL 中 LEN 单药治疗的已发表文献接近。

结论：ORR，CR 和 OS 显着改善表明 tafasitamab + LEN 组合在不符合 ASCT 条件的 R / R DLBCL 患者中具有潜在的协同作用。基于 ePS 的 1：1 匹配可在 tafasitamab 联合 LEN 使用时可靠地评估其治疗效果。RE-MIND 展示了真实世界数据在解释非随机试验中的实用性。临床试验信息：NCT04150328

原文摘要：

Abstract

Background: Patients with R/R DLBCL ineligible for autologous stem cell transplant (ASCT) have a poor prognosis. In these patients, tafasitamab (anti-CD19 antibody) plus lenalidomide (LEN) has shown encouraging results in the open-label, single-arm, phase II L-MIND study (n = 81; NCT02399085). To evaluate the contribution of tafasitamab to the activity of this doublet, we conducted a global, real-world study of patients treated with LEN monotherapy (RE-MIND; NCT04150328). Here we present the primary analysis of a 1:1 patient-level matched comparison between the L-MIND and RE-MIND cohorts.

Methods: Patients treated with LEN monotherapy for R/R DLBCL were enrolled in the observational, retrospective RE-MIND cohort. As in L-MIND, patients had 1 – 3 prior systemic therapies, including ≥ 1 CD20-targeting regimen; were aged ≥ 18 years; and were not eligible for ASCT. A 1:1 estimated propensity score (ePS) matching methodology

ensured balancing of nine pre-specified baseline covariates. The primary analysis set, Matched Analysis Set 25 (MAS25), included patients who received a LEN starting dose of 25 mg/day. The primary endpoint was investigator-assessed best objective response rate (ORR). Key secondary endpoints included overall survival (OS) and complete response (CR) rate.

Results: 490 patients were enrolled in RE-MIND across 58 centers in the US and Europe, of which 140 fulfilled the ePS matching criteria. The MAS25 included 76 patients each from the two cohorts. Baseline characteristics between cohorts were comparable. The primary endpoint was met with a significantly better ORR of 67.1% (95% CI: 55.4 – 77.5) for the L-MIND cohort versus 34.2% (95% CI: 23.7 – 46.0) for the RE-MIND cohort (odds ratio 3.89; 95% CI: 1.90 – 8.14; $p < 0.0001$). The CR rate was 39.5% (95% CI: 28.4 – 51.4) in the L-MIND cohort and 13.2% (95% CI: 6.5 – 22.9) in the RE-MIND cohort. A significant difference in OS favored the L-MIND cohort (HR = 0.499; 95% CI: 0.317 – 0.785). ORR and CR outcomes in the RE-MIND cohort were similar to the published literature for LEN monotherapy in R/R DLBCL.

Conclusions: Significantly better ORR, CR and OS indicate potential synergistic effects of the tafasitamab + LEN combination in ASCT-ineligible R/R DLBCL. ePS-based 1:1 matching allows robust estimation of the treatment effect of tafasitamab when added to LEN.

RE-MIND demonstrates the utility of real-world data in interpreting non-randomized trials. Clinical trial information: NCT04150328

参考文献：

Nowakowski GS, Rodgers TD, Marino D, Frezzato M, Barbui AM, Castellino C, Meli E, Fowler NH, Feinberg BA and Tillmanns S, et al: RE-MIND study: A propensity score-based 1:1 matched comparison of tafasitamab + lenalidomide (L-MIND) versus lenalidomide monotherapy (real-world data) in transplant-ineligible patients with relapsed/refractory (R/R) diffuse large B-cell lymphoma (DLBCL). J CLIN ONCOL 38: 8020, 2020.