Clinical Outcomes in Bevacizumab (BV)-Treated Patients (pts) with Metastatic Colorectal Cancer (mCRC): Results from ARIES Observational Cohort Study (OCS) and Confirmation of BRITe Data on BV Beyond Progression (BBP)

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INTRODUCTION
• Bevacizumab (BV) is a monoclonal antibody directed against human vascular endothelial growth factor (VEGF). BV has been approved for treatment of metastatic colorectal cancer (mCRC) in combination with chemotherapy (CT) and has demonstrated improved overall survival (OS) and progression-free survival (PFS) compared to chemotherapy alone. However, there is limited evidence on outcomes in 
  pts who continue BV use after first progression (PD).

METHODS
Study Design and Treatment
• The ARIES OCS is a noninterventional, observational cohort study in pts who received BV in the first-line setting. The primary objective is to evaluate the safety profile of BV use beyond first PD.
• Eligible pts were enrolled before or at the time of PD, and data were collected through 12 months after PD. All pts received BV for ≥2 months (full course or >2 months after PD).

Participants
• A total of 1,621 pts (67.2% pts with mCRC) were enrolled from 172 sites in 18 countries between February 2009 and June 2010. Among these pts, 963 (59.4%) pts had mCRC.

Patient Characteristics
• Median age at PD was 62 years. Most pts had Eastern Cooperative Oncology Group (ECOG) 0-1 performance status (70.2%); 45.6% had prior CT/BV use, and 69.2% had prior biologics use.

Outcomes
• A total of 520 pts (53.9%) continued BV use after PD. Median duration of BV use was 10 months (range, 2 months to 49 months).
• Median OS and progression-free survival (PFS) from PD were 16.0 months (95% CI, 12.9–19.0 months) and 4.2 months (95% CI, 3.4–5.2 months), respectively.

RESULTS
• Sensitivity analyses were conducted to test the robustness of the primary BBP analysis. The most recent ECOG status was used to control for potential selection bias resulting from unknown ECOG status.

CONCLUSIONS
• The ARIES OCS is the largest noninterventional study of pts with mCRC treated with BV beyond PD. The study provides valuable insights into the safety and efficacy of BV use beyond PD, which can inform clinical practice and patient management.