SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

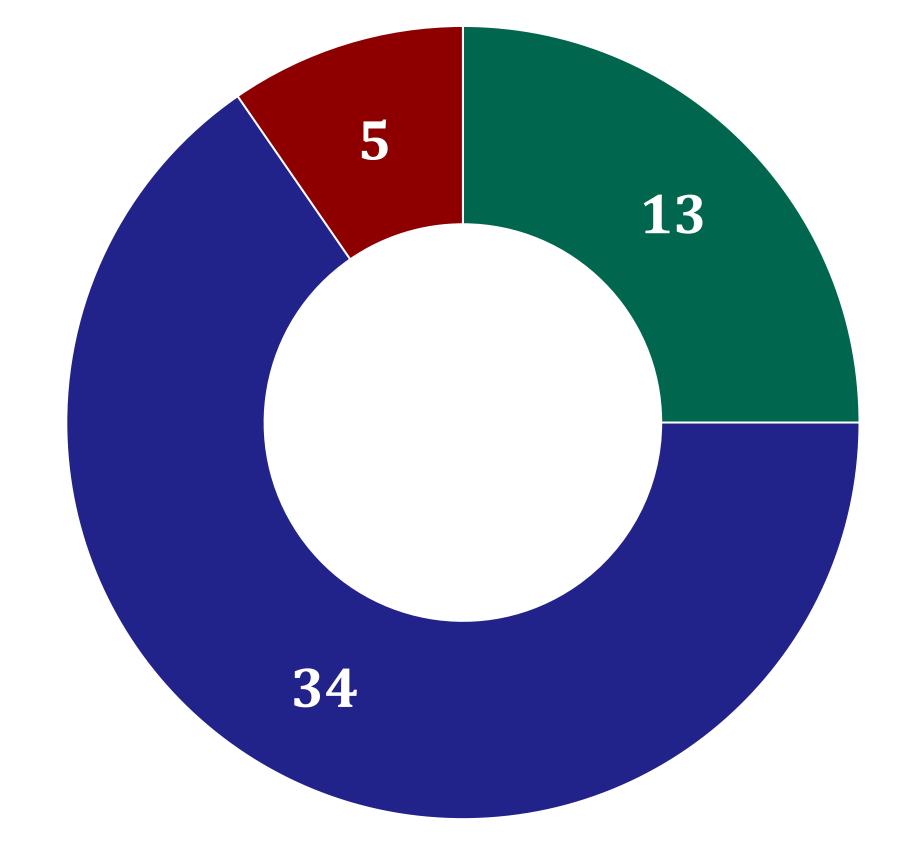
BACKGROUND

- Ibrutinib, acalabrutinib, and zanubrutinib are the current FDA-approved Bruton's **Tyrosine Kinase (BTK) inhibitors used in** chronic lymphocytic leukemia (CLL)
- All agents pose risks for hypertension, bleeding, atrial fibrillation, and opportunistic infections
- The objective of this study is to assess the safety outcomes of BTK inhibitors prescribed in CLL at a community teaching hospital

METHODS

- This project was granted exempt status from the institution's investigational review board
- Data collected as a retrospective chart review using the institution's electronic health record, EPIC
- Inclusion Criteria: ≥ 18 years diagnosed with CLL and have been prescribed acalabrutinib, ibrutinib, or zanubrutinib between 2022-2023
- **Primary Objective: Describe the incidence** of treatment-related adverse events in patients receiving BTK inhibitors for the treatment of CLL
- **Secondary Objectives: Assess patient** bleed risk via HAS-BLED scoring scale and evaluate patient comorbidities and concurrent medications that may affect outcomes

Figure 1: Eligible Patients in Study (n = 52)



Acalabrutinib
Ibrutinib
Zanubrutinib

Figure 2: Incidence of Treatment-Related Adverse Events

	70% 60%		
	50%		
Incidence	40%		
ncid	20%		
	10% 0%		
		Arrhythmia Diagnosis	Bleedi
Acalabrutinib		0	7.7%
Ibrutinib		17.6%	11.8%
Zanubrutinib		0	0

Acalabrutinib

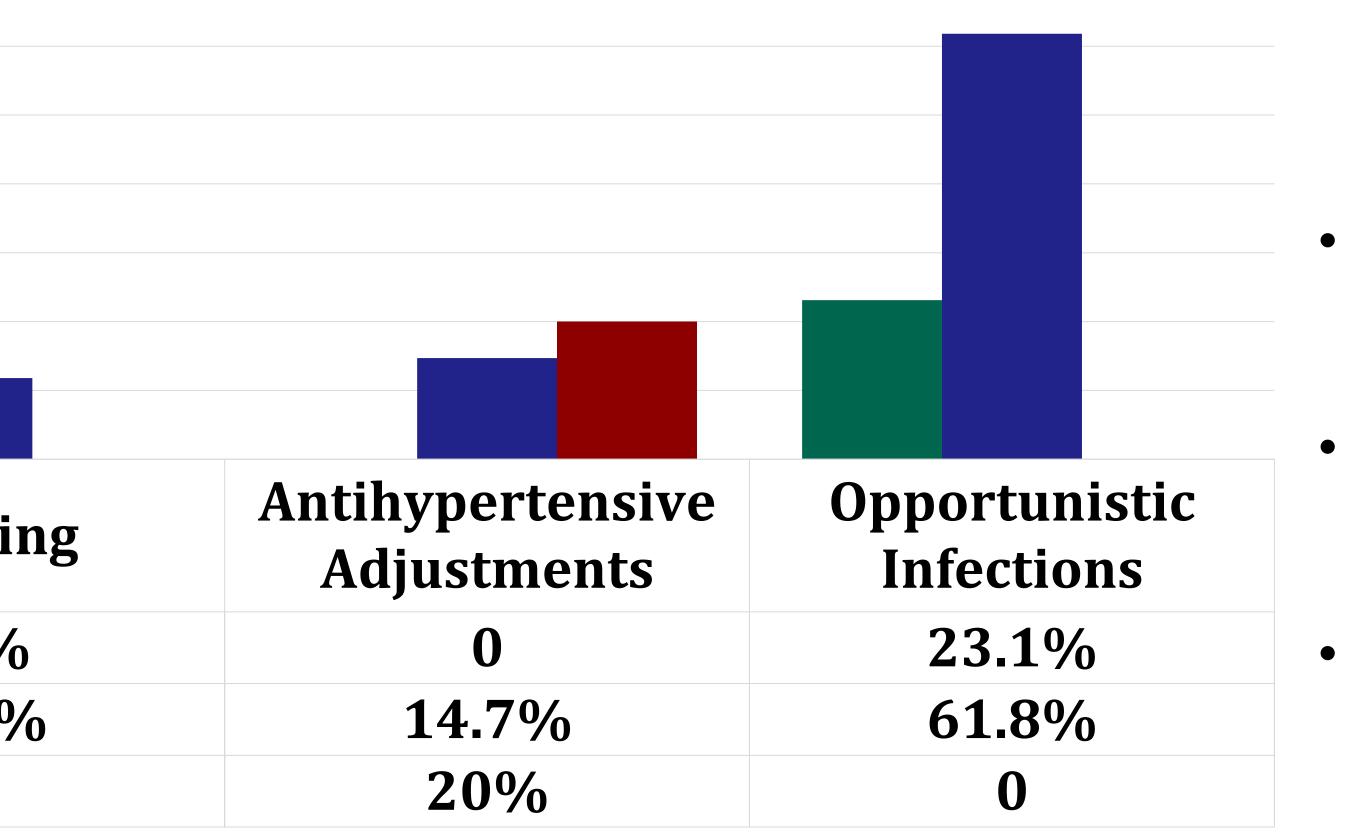
Evaluation of Bruton's Tyrosine Kinase Inhibitors in Chronic Lymphocytic Leukemia Patients at a Community Teaching Hospital Anthony Bissey, PharmD Candidate and Keith Hecht, PharmD, BCOP

RESULTS

Table 1: Baseline Characteristics at BTK Inhibitor Initiation

	Average (Range)		Average (Range)
Age in Years		HAS-BLED Score (0-9)	
Acalabrutinib	72 (53-89+)	Acalabrutinib	1 (0-3)
Ibrutinib	68 (43-86)	Ibrutinib	2 (0-4)
Zanubrutinib	69 (63-89+)	Zanubrutinib	2 (0-3)
Stage (0-4)		Platelets (per mcL)	
Acalabrutinib	3 (1-4)	Acalabrutinib	148 (34-355)
Ibrutinib	2 (0-4)	Ibrutinib	175 (39-291)
Zanubrutinib	2 (0-4)	Zanubrutinib	173 (97-328)





Zanubrutinib Ibrutinib

School of Pharmacy

CONCLUSION

- Ibrutinib yielded the greatest reports of adverse events and the only intervention to report incidence of arrhythmias postinitiation
- **Adverse events were moderately reported for** acalabrutinib while no patients required antihypertensive therapy adjustments Zanubrutinib yielded the lowest adverse events with no reports of bleeding or opportunistic infections Longer duration of treatment in patients taking ibrutinib compared to acalabrutinib and zanubrutinib may reflect greater incidence of adverse events