

# Baseline characteristics as parameters of choice of first-line therapy in metastatic renal cell carcinoma (mRCC) patients (pts): the Meet-URO 33 study

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## Background

Despite the different first-line therapeutic options in mRCC, no formal comparisons and no standard prognostic/predictive parameters are available to guide the treatment choice in clinical practice. The ongoing Meet-URO 33 study will recruit up to 80 Italian centres to answer many clinical questions.

## Methods

The Meet-URO 33 study is a multicenter prospective/retrospective registry of a real-world mRCC population treated with first-line therapy from January 2021. As of April 2024, 421 pts from 25 Italian centers were assessed. We investigated which clinical/tumoral characteristics (age, ECOG PS, type/number of comorbidities, steroid use, surgery of primary tumor, histology, sarcomatoid features, type/number of metastases, IMDC and Meet-URO scores) influenced the choice among IO-IO, IO-TKI and TKI.

## Results

Overall, 263 pts (62.5%) received IO-TKI, 81 (19.2%) IO-IO and 77 (18.3%) TKI. At the univariate analysis, the IMDC score and Meet-URO scores, age, bone/pancreatic metastases, high dose steroids, renal / cardiac / hematological / metabolic / gastroenteric comorbidities and  $\geq 2$  comorbidities significantly correlated with the therapeutic choice ( $p < 0.05$ ). At the multivariate analyses, in the IO-IO vs IO-TKI comparison, a higher IMDC score and metabolic comorbidities correlated with IO-IO ( $p < 0.001$  and  $p = 0.005$ ), while the presence of bone metastases with IO-TKI ( $p = 0.024$ ) (Table 1). In the IO-IO vs TKI comparison, a higher IMDC score was associated with IO-IO ( $p < 0.001$ ) and a higher age with TKI ( $p = 0.09$ ) (Table 2). In the IO-TKI vs TKI comparison, a higher number of metastases correlated with IO-TKI ( $p = 0.037$ ) while a higher age, gastroenteric/renal comorbidities and  $\geq 2$  comorbidities with TKI ( $p < 0.001$ ,  $p = 0.024$ ,  $p = 0.024$  and  $p = 0.046$ ) (Table 3).

1.

IO-IO	vs	IO-TKI
IMDC score ( $p < 0.001$ )		Bone metastases ( $p = 0.024$ )
Metabolic comorbidities ( $p = 0.005$ )		

2.

IO-IO	vs	TKI
IMDC score ( $p < 0.001$ )		Higher Age ( $p = 0.09$ )

3.

IO-TKI	vs	TKI
Higher number of metastases ( $p < 0.001$ )		Higher age ( $p < 0.001$ )
		Gastroenteric comorbidities ( $p = 0.024$ )
		Renal comorbidities ( $p = 0.024$ )
		$\geq 2$ Comorbidities ( $p = 0.046$ )

## Conclusions

The results this preliminary analysis of the ongoing Meet-URO 33 study showed a real-world scenario of the current first-line setting in mRCC pts. Despite some well-known prognostic factors (e.g. ECOG PS, sarcomatoid features, lung/liver metastases) seems not be relevant parameters of therapeutic choice, others were confirmed to direct our therapeutic choices (IMDC score, bone metastases, number of metastases, age and comorbidities). These findings are food for thought for further analyses with a larger sample size.

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