ABSTRACT CODE
IUC26509-87

Real-World Effectiveness and Safety of Enfortumab Vedotin Plus Pembrolizumab in Metastatic Urothelial Carcinoma

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IUCS 2026
International Urothelial Cancer Summit

1. BACKGROUND

- Enfortumab vedotin plus pembrolizumab (EV+P) is the preferred first-line treatment for locally advanced or metastatic urothelial carcinoma following the phase III EV-302/KEYNOTE-A39 trial.
- Real-world evidence is important to assess whether trial outcomes are reproduced in broader, more heterogeneous patient populations.

2. OBJECTIVE

- To systematically review the real-world effectiveness and safety of EV+P in metastatic urothelial carcinoma.

3. METHODS

- Systematic review conducted according to PRISMA guidelines.
- Databases searched: PubMed, Embase, Scopus, and Web of Science.
- Included studies reporting real-world outcomes in patients treated with EV+P.
- Primary outcomes: objective response rate (ORR), progression-free survival (PFS), overall survival (OS), and treatment-related adverse events (TRAEs).
- Included evidence: 12 eligible studies involving approximately 2,400 patients.

4. RESULTS

In the pivotal EV-302 trial, EV+P achieved an ORR of **67.7%**

median PFS of **12.5 months** and median OS of **31.5 months.**

Real-world cohorts demonstrated effectiveness broadly consistent with trial findings across diverse clinical settings.

A network meta-analysis demonstrated improved OS **(HR 0.47)** and **PFS (HR 0.45)** versus alternative treatment strategies.

Clinical benefit was maintained in patients aged 75 years or older, with median PFS of **12.3 months** and median OS of **24.4 months.**

Pivotal Trial (EV-302)
Key Outcomes

- ORR **67.7%**
- Median PFS **12.5 months**
- Median OS **31.5 months**

Network Meta-Analysis
EV+P vs Alternative Strategies

- Overall Survival (OS) **HR 0.47** — Improved OS
- Progression-Free Survival (PFS) **HR 0.45** — Improved PFS

HR < 1 favors EV+P

Older Patients (≥75 years)
Real-World Outcomes

Median PFS **12.3 months**

Median OS **24.4 months**

Clinical benefit maintained in patients aged ≥75 years.

STUDY OVERVIEW

Systematic Review (PRISMA) → Literature Search → 12 Eligible Studies (~2,400 Patients) → Real-World Outcomes Evaluation

5. SAFETY

Grade 3 or higher TRAEs occurred in **55.9%** of patients.

Treatment discontinuation occurred in **35.0%** of patients.

Real-world discontinuation rates among frail and older populations were comparable to those reported in clinical trials.

6. CONCLUSIONS / KEY TAKE-HOME MESSAGE

- Current real-world evidence supports the effectiveness and manageable safety profile of EV+P in metastatic urothelial carcinoma.
- Outcomes observed in routine clinical practice closely mirror those reported in EV-302.
- EV+P is supported as a standard first-line treatment across diverse patient populations.