Assessment of the Impact of Proton Pump Inhibitor (PPI) Exposure on Survival Outcomes in Patients With Gastric or Gastroesophageal Junction Adenocarcinoma Treated With Zolbetuximab Plus Chemotherapy

Akihiro Yamada, Jianning Yang, Maria Matsangou, Georgia Gourgioti, Peter L. Bonate

AIM

To investigate whether PPI exposure had an impact on efficacy outcomes for patients with la/m G/GEJ adenocarcinoma who received first-line zolbetuximab in combination with chemotherapy

STUDY DESIGN

Patients in the FAST, SPOTLIGHT, and GLOW studies for whom PPI exposure was recorded (any exposure or no exposure) were included

Patients received zolbetuximab + chemotherapy (EOX in FAST, mFOLFOX6 in SPOTLIGHT, CAPOX in GLOW) or chemotherapy ± placebo

PFS and OS were compared between patients with no PPI exposure and:

- Patients with PPI:zolbetuximab treatment duration ratio <median OR ≥median
- Patients with number of PPI doses as premedication <median OR ≥median

KEY TAKEAWAYS

Zolbetuximab exposure was similar between patients with no PPI exposure (29.7%) and patients with any PPI exposure (70.3%) in SPOTLIGHT and GLOW

PPI exposure did not have a clinically meaningful impact on PFS or OS with zolbetuximab + chemotherapy

These results suggest that PPI use does not have a negative effect on zolbetuximab efficacy in la/m G/GEJ adenocarcinoma

CAPOX, capecitabine plus oxaliplatin; EOX, epirubicin, oxaliplatin, and capecitabine; G/GEJ, gastric or gastroesophageal junction; la/m, locally advanced unresectable or metastatic; mFOLFOX6, modified folinic acid, fluorouracil, and oxaliplatin; OS, overall survival; PFS, progression-free survival; PPI, proton pump inhibitor.