

Fosnetupitant more effective than fosaprepitant in preventing chemotherapy-induced nausea and vomiting for an extended duration: An exploratory analysis

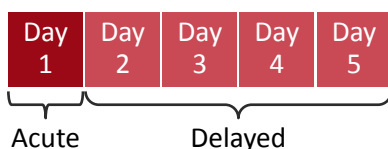
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CINV can be detrimental to patients' quality of life

And it can even disrupt their chemotherapy regimens

Platinum-based therapies are known to cause CINV in **two phases**



But a substantial proportion of patients experience nausea beyond 5 days

Exploratory analysis of the CONSOLE study

CONSOLE Study

Fosnetupitant
or
Fosaprepitant



The first study to compare two NK₁ RA prophylactic antiemetic (i.e., antiemetic) regimens beyond 5 days

Patients

≥ 20 years old with solid tumors

New to chemotherapy or previously received chemotherapy with low emetic risk

Scheduled for **highly emetogenic cisplatin-based therapy** (≥70 mg/m²)



Test regimens

Fosnetupitant
235 mg
N=392

Fosaprepitant
150 mg
N=393

1

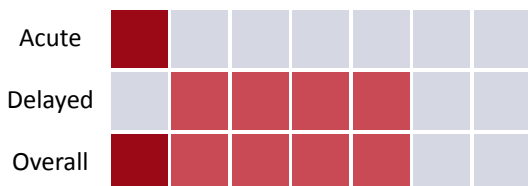
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Day 1 0.75 mg Palonosetron
9.9 mg Dexamethasone
Days 2-4 6.6 mg Dexamethasone

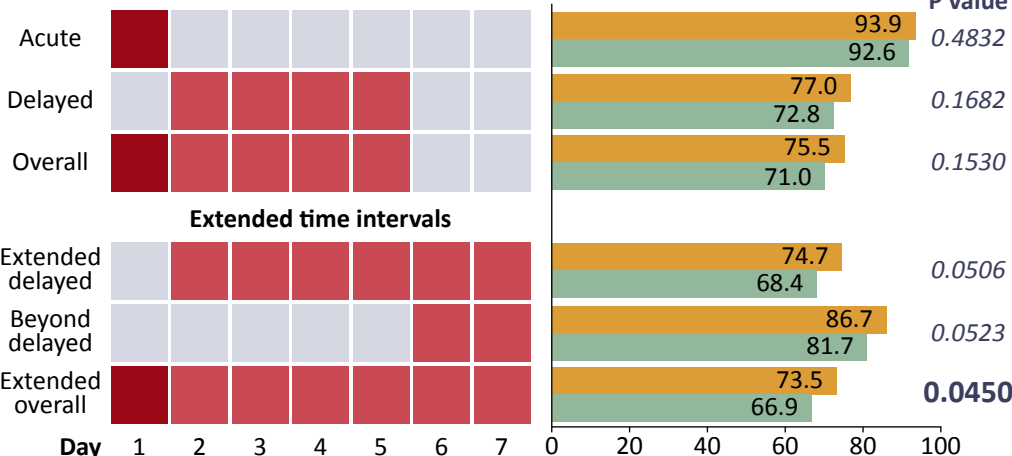
The analysis examined **six distinct phases** post-chemotherapy and utilized a **LOCF** approach for missing values to evaluate **complete response** (no emetic event and no rescue medication)

Traditional time intervals



Complete response rate (%)

P value



In this exploratory analysis, **fosnetupitant was significantly more effective** than fosaprepitant in preventing CINV during the extended 7-day period following cisplatin-based therapy

CINV chemotherapy-induced nausea and vomiting; NK₁ neurokinin-1; LOCF last observation carried forward; RA receptor antagonist