

# **Perceptions and Experiences of Abemaciclib and Endocrine Therapy (PEATY)**

**ISRCTN 10597735**

## **PLAIN LANGUAGE SUMMARY**

This study looked at the expectations and experiences of women who are treated with abemaciclib (also called Verzenios®) and hormone (endocrine) therapy for early stage high risk breast cancer. Abemaciclib is known as a targeted therapy. These targeted treatments interrupt the growth and spread of cancer cells. They focus on specific faults within cancer cells that allow them to survive.

Abemaciclib together with endocrine therapy is a fairly new treatment for women with early stage breast cancer that is at high risk of recurrence. Little is known as to what patients expect, their experiences during treatment and how they manage any possible side effects. We know for example that diarrhoea is a common side effect of abemaciclib and can sometimes be severe. Diarrhoea usually starts during the first weeks of treatment. Finding out how well people deal with any problems and understanding their needs, is essential; this can aid the development of helpful information materials and help healthcare professionals offer the best forms of support for them.

In our study, we invited women to take part in a series of three in-depth interviews with researchers: - one before they started study treatment to find out what their treatment expectations were, and what they knew about the drugs they had been prescribed, then 2 follow-up interviews 4 and 8 weeks later to find out if their treatment experiences had met their expectations. We asked what side effects they had noticed, in particular diarrhoea, and asked what steps they had taken to reduce these (for example, diet changes or anti-diarrhoeal drugs), and how successful this had been. Any treatment breaks or dose reductions were also collected. In the last interview we asked participants for their advice for future patients.

Between December 2021 and June 2023, only five women (aged between 54 and 76 years) took part in the study. Unfortunately, we had to close the study early because recruitment to our study depended on the larger POETIC-A study, and then randomisation to treatment with abemaciclib and endocrine therapy for which only few women were eligible.

A short summary of the results showed that:

- All women showed a basic understanding of the treatment, mainly from the trial information given by the hospital staff;
- All women recalled discussions with the hospital staff about side effects of treatment, including diarrhoea;

- Women said that the main reason for taking part in the trial was that they felt the treatment was the best way to treat their disease;
- Before starting treatment, most women had concerns about side effects and about the taking a (large) number of different pills every day;
- Apart from one woman, all had diarrhoea during their treatment, which ranged from mild and manageable, to moderate-severe and interfering with everyday life;
- Often anti-diarrhoeal medication (loperamide) was used to control symptoms, or women changed their diets or reduced food intake;
- This was successful for most women but not all as one woman had to stop treatment due to the severe impact of diarrhoea on everyday life;
- Diarrhoea was reported as the most bothersome symptom of the treatment, together with fatigue and heartburn;
- Having strong treatment beliefs (for example believing that it would reduce the risk of the disease coming back) helped some women to manage the side effects;
- All women said that they took the required dose of medication daily (they adhered to the prescribed treatment);
- Women trusted and felt supported by hospital staff, and appreciated it that they were easily accessible;
- What women expected of the treatment and what they experienced was not always the same (it was better if they had very few side effects, and it was worse if they had side effects that interfered badly with everyday life);
- Women encouraged patients starting abemaciclib and endocrine therapy to 'give it a try' and not to hesitate contacting hospital staff for advice for side effects.

Despite the small size of the study group, these results give useful insight in what women know and expect of treatment with abemaciclib and endocrine therapy, and what their experiences are in the first 8 weeks of taking this breast cancer treatment. Further research in a larger group is needed to support the development of helpful information materials for these patients.