

## **6 - Title: Adherence to Check Mate 577 within a Community Healthcare System in the First 2 Years Post-Approval**

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**Background:** CheckMate 577 demonstrated a significant benefit with adjuvant nivolumab for those with residual disease after esophagectomy following chemoradiation, resulting in subsequent FDA approval and guideline inclusion. We analyzed adherence to this recommendation in a non-trial setting and assessed for factors associated with non-compliance within our healthcare system.

**Methods:** We performed a cross-sectional analysis of esophageal cancer patients within a multi-state community healthcare system between 2/2021-12/2022. Patients with resected residual disease following induction chemoradiation were included. Patients were categorized into those offered nivolumab and those not then assessed for demographic, socioeconomic, or clinical factors associated with non-adherence. Area Deprivation Index was used as surrogate for socioeconomic status. Patients completing year-long nivolumab were then compared to those discontinuing prematurely for factors associated with non-completion.

**Results:** Of the 73 patients eligible for nivolumab, 67 (92%) were offered therapy. Not being offered nivolumab was associated with receiving care from medical oncologists located in more disadvantaged communities. No further differences in demographic, socioeconomic, or clinical factors were identified. Of patients offered nivolumab, 57/67 (85%) initiated treatment. Year-long immunotherapy was completed by 25 (48%) patients while 27 (52%) discontinued prematurely. Patients with node-positive pathology were more likely to have completed year-long nivolumab.

**Conclusion:** In the first two years after CheckMate 577, results within our healthcare system suggest high clinician adherence and patient acceptance of adjuvant immunotherapy with decreased adoption in more socioeconomically challenged oncology offices. Additionally, compliance with the year-long adjuvant regime mirrored clinical trial results. These results warrant further validation in a broader patient population to assess for factors associated with non-adherence.