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Real world clinical data of sorafenib for treatment of progressive radioiodine refractory differentiated thyroid carcinoma: Korean multicenter study

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Sorafenib has been approved for treatment of patients with radioactive iodine (RAI)-refractory differentiated thyroid cancer (DTC). Real-world studies determine how new drugs perform beyond the scope of clinical trial. In this study, we aimed to evaluate the efficacy and safety of sorafenib in real clinical practice. This multicenter, retrospective cohort study evaluated 98 patients with progressive RAI-refractory DTC who treated with sorafenib in 6 tertiary hospitals in Korea. The primary objective was the progression-free survival (PFS) according to RECIST version 1.1. The overall survival (OS), response rate, and safety were also evaluated.
The median PFS was 9.7 months and median OS has not been reached during the follow-up. Partial responses and stable disease (SD) were achieved in 25 patients (25%) and 64 patients (65%), respectively. SD more than 6 months were in 41 patients (42%). In subgroup analysis, we identified several prognostic indicators of better PFS: absence of disease-related symptom (HR=0.5, P=0.041), lung-only metastasis (HR=0.4, P=0.048); thyroglobulin reduction ≥60% (HR=0.4, P=0.012); and daily maintenance dose ≥600 mg (HR=0.3, P=0.005). The mean daily dose of sorafenib was 666 ± 114 mg. AEs and serious AEs were reported in 93 (95%) and 40 (41%) patients, respectively. The most frequent AE was hand-foot skin reaction (76%). Sorafenib improved PFS in real clinical setting, consistent with the results of DECISION trial. AEs were mostly mild and manageable. These results suggest that sorafenib is an effective treatment option for patients with progressive RAI-refractory DTC.