# Results

From February 3, 2015 to March 31, 2020, a total of 2888 postmenopausal women or men with HR+/HER2‒ MBC started palbociclib plus AI (n=1324) or AI alone (n=1564) as first-line therapy. After sIPTW adjustment, the median age was 70 years in both treatment groups, and the majority of patients (~68%) were white in each group. The median duration of follow-up was 23.9 months in the palbociclib plus AI group and 24.5 months in the AI alone group. In terms of overall survival, the median OS was significantly longer in the palbociclib group compared to the AI group, with OS rates at 24, 36, and 48 months of 76.6%, 62.9%, and 52.4% in the palbociclib plus AI group, and 65.6%, 54.4%, and 46.8% in the AI alone group. The hazard ratio for OS was 0.76 (95% CI, 0.65–0.87) in favor of the palbociclib group. In terms of real-world progression-free survival, the median rwPFS was significantly longer in the palbociclib group compared to the AI group, with rwPFS rates at 24, 36, and 48 months of 19.3 months (17.5–20.7), 13.9 months (12.5–15.2) in the AI group. The hazard ratio for rwPFS was 0.70 (95% CI, 0.62–0.78) in favor of the palbociclib group. These results were consistent across most subgroups examined.