

Comparison of Real-World Outcomes between Patients with *BRCA1/2* Positive and Homologous Recombination Repair Negative Metastatic Castration-Sensitive Prostate Cancer

Mehmet A. Bilen, MD^a, Sabree Burbage, PharmD^b, Carmine Rossi, PhD^c, Ibrahim Khilfeh, PharmD^b, Lilian Diaz, MSc^c, Yuxi Wang, MSc^c, Dominic Pilon, MSc^c, Gordon Brown, DO^d, Neal Shore, MD, FACS^e, Benjamin Lowentritt, MD^f, Daniel W. Lin, MD^g

^aEmory University School of Medicine, Atlanta, GA, USA

^bJohnson & Johnson, Horsham, PA, USA

^cAnalysis Group, Inc., Montréal, QC, Canada

^dNew Jersey Urology, Sewell, NJ, USA

^eCarolina Urologic Research Center, Myrtle Beach, SC, USA

^fChesapeake Urology, Baltimore, MD, USA

^gUniversity of Washington and Fred Hutchinson Cancer Center, Seattle, WA, USA

Corresponding author

Dr. Daniel W. Lin, MD

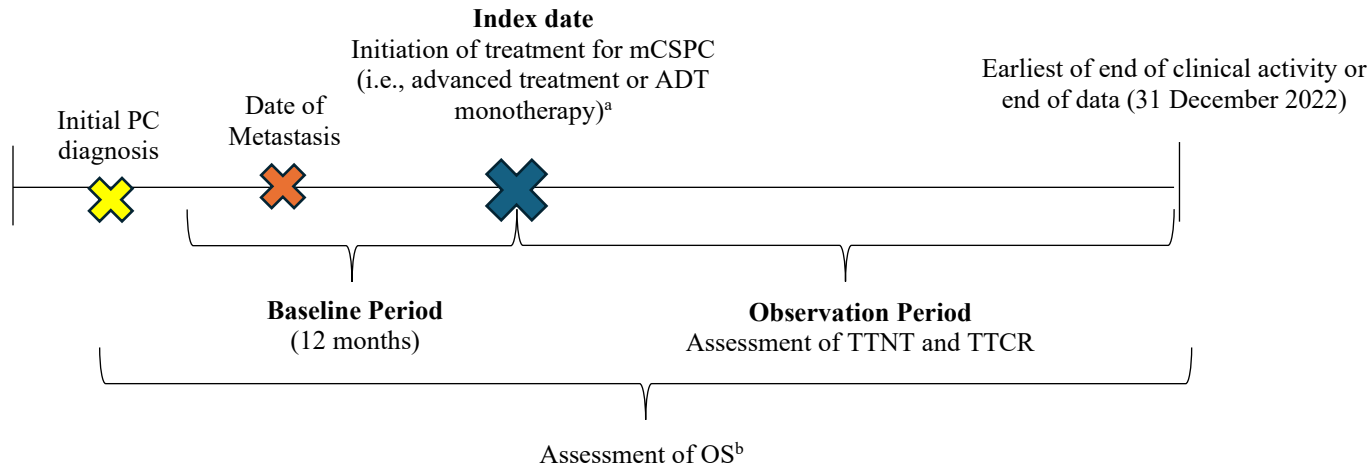
Fred Hutchinson Cancer Center

1100 Fairview Ave N, Seattle, WA 98109, USA

Phone: 206-543-4740

Email: dlin@uw.edu

Supplemental Figure S1. Study design



Abbreviations: ADT: androgen deprivation therapy; mCSPC: metastatic castration-sensitive prostate cancer; PC: prostate cancer; OS: overall survival; TTCR: time-to-castration resistance; TTNT: time-to-next-treatment.

Notes:

- For patients who started ADT monotherapy before the date of metastasis (i.e., for the treatment of localized prostate cancer), the index date was changed to the date of metastasis.
- For the analyses of OS, analytical time zero was set to the initial PC diagnosis date. By design, all patients survived until initiation of mCSPC treatment and, therefore, no deaths were observed before the start of the observation period. The analytical time zero was changed to the initial PC diagnosis date for the OS outcome to account for potential differences in time between diagnosis and initial treatment between the two cohorts which can impact survival.