# Patient-Reported Outcome Measures in Systemic Mastocytosis: A Systematic Review

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Several SM PROMs have been developed to assess symptomology and quality of life (QoL).

The attributes, utility, and interpretability of existing SM PROMs vary widely and should be carefully considered prior to implementation in clinical trials.

### INTRODUCTION

- Systemic mastocytosis (SM), driven by the KIT
   D816V mutation, leads to debilitating and
   unpredictable symptoms and impaired patient quality
   of life (QoL)<sup>1,2</sup>
- Assessing patient symptomology and impact of SM symptoms on QoL with valid SM-specific patientreported outcome measures (PROMs) is critical for the evaluation of SM disease burden and treatment benefit
- The development and validation of generic and disease-specific PROMs is a multi-year process requiring several clearly established steps<sup>3,4,5</sup>

# OBJECTIVES

 This review summarizes available SM PROMs, and profile the development, content, and application of these tools to aid in the selection of appropriate SM PROMs for use in clinical research and practice

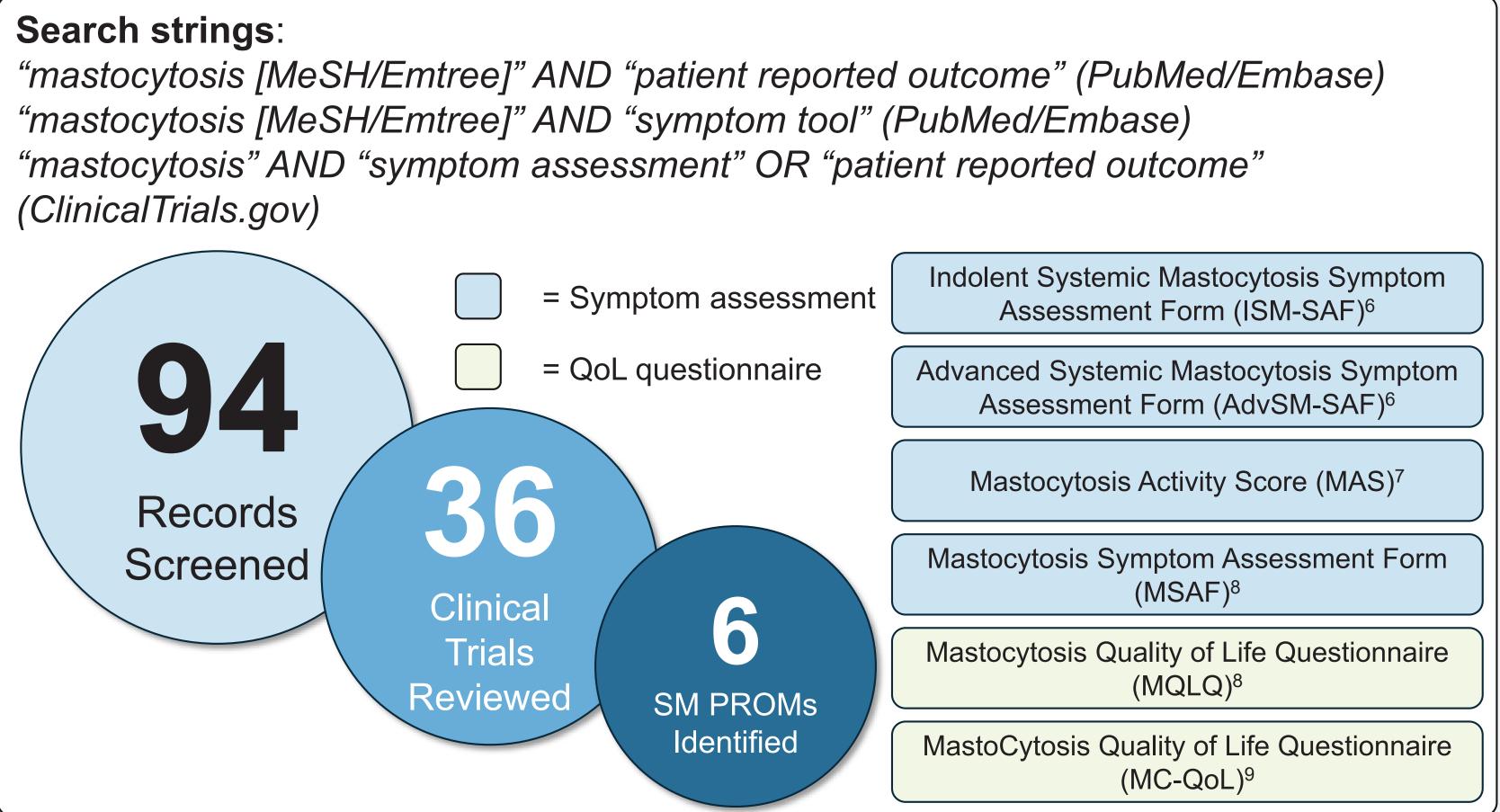
### METHODS

- We conducted a structured review of the peerreviewed literature to identify SM-specific PROMs.
   PubMed, Ovid EMBASE, and clinicaltrials.gov were searched up to July 2023 to identify articles on the development and use of SM PROMs
- For each PROM, we summarize the content, development and validation history, and use in clinical trials

# RESULTS

- We identified six SM PROMs: four SM symptom assessment tools and two SM QoL questionnaires. Two of the symptom assessment tools were SM subtype-specific (i.e., ISM, AdvSM); the other symptom measures and two QoL questionnaires were designed for all SM patients (Figure 1) <sup>6,7,8,9</sup>
- Each SM PROM underwent rigorous development and validation (i.e., reliability, validity, responsiveness). Robust interpretation guidelines and respondent burden varies by tool (**Table 1**) <sup>6,7,8,9</sup>
- The ISM-SAF is the only SM PROM that has been included in a registrational trial as a primary endpoint and is included in an approved product label. 14 It is also a primary endpoint in an ongoing trial 13
- The AdvSM-SAF was included as an exploratory endpoint in two AdvSM clinical trials<sup>15,14</sup>; the MAS is an exploratory endpoint in an ongoing AdvSM trial<sup>10</sup>
- SM PROM content, scoring, administration, adaptations and use in clinical trials varied by measure (Table 2)
- The MC-QoL had fewer questions (n=27) and was used more commonly in randomized controlled trials (RCTs) than the MQLQ (n=49) (Table 2) 11,12,13,14

## Figure 1. Identification of SM PROMs in Scientific Literature Table 1. SM PROM Development, Validation & Utility



		SM Sy	SM Quality of Life			
PROM Attribute	General Mastocytosis	ISM-Specific		AdvSM- Specific		
	MAS <sup>7</sup>	MSAF <sup>8</sup>	ISM-SAF <sup>6</sup>	AdvSM-SAF <sup>6</sup>	MC-QoL <sup>9</sup>	MQLQ <sup>8</sup>
Rigorous Development (e.g., conceptual framework, patient and provider input)						
Demonstrated Reliability, Validity & Responsiveness	$\overline{\checkmark}$		V	V	$\overline{\checkmark}$	
Robust Interpretation Guidelines (i.e., Severity Thresholds, Clinically Important Difference)	V		V		V	
Primary endpoint in registrational study			<b></b> ✓ 14		<b>√</b> 11,**	
Inclusion in approved drug label			<b>☑</b> 19			
Respondent Burden*	Low	Medium	Low	Low	Medium	High

\*Respondent burden: low (≤20 items), medium (20-39 items, high (≥40 items); \*\*Study ongoing for ISM indication

Table 2. SM PROM Content and Use

	Target Population	Items (#)	Symptom Domains	Individual Symptoms	Scoring	Administration/ Recall	Cultural/Language Adaptations
ISM-SAF <sup>6</sup>	ISM	12	Gastrointestinal, Skin, Neurocognitive	Spots, Itching, Flushing, Brain Fog, Headache, Dizziness, Nausea, Abdominal Pain, Diarrhea (frequency and severity), Bone Pain, Fatigue	Individual symptoms: 0 (None [symptom]) to 10 (Worst Imaginable); Diarrhea frequency Domain scores: 0-30 Total Symptom Score: 0-110	Trial: Daily with 24-hour recall Other studies: Once with 2-week recall <sup>2, 14, 15</sup>	Danish, Dutch,^ English,^ French,^ German,^ Italian,^ Norwegian, Polish, Spanish,^ Swedish
AdvSM-SAF <sup>6</sup>	AdvSM	10	Gastrointestinal and Skin	Abdominal Pain, Nausea, Spots, Itching, Flushing, Fatigue, Vomiting (frequency and severity), Diarrhea (frequency and severity)	Individual symptoms: 0 (None [symptom]) to 10 (Worst Imaginable) Domain scores: 0-30 Total Symptom Score: 0 - 80	Trial: Daily with 24-hour recall	Danish, Dutch,^ English,^ French,^ German, Italian, Spanish^
MAS <sup>7</sup>	Cutaneous Mastocytosis and ISM	9	Skin, Gastrointestinal, and Other	Itching, Skin redness/swelling, Flushing, Diarrhea, Abdominal Cramps, Muscle or Joint Pain, Fatigue, Headache, Difficulty Concentrating	Individual symptoms: 0 (Not at all Severe) to 4 (Very Severe) Total Score: Summed 7-day Total Score of 0-252, normalized to 0-100	Daily with 24-hour recall for 7 days	Arabic, Czech, Dutch,^ English,^ French,^ German,^ Greek, Hebrew, Italian,^ Norwegian, Polish, Portuguese,^ Russian, Slovenian, Spanish,^ Swedish, Turkish
MSAF <sup>8</sup>	ISM	22	None	Pruritus, dizziness, headache, fatigue, flushing, mediator-release attacks, dyspnoea, rhinorrhoea, palpitations, nausea and vomiting, abdominal pain, bone pain, concentration problems, and depression; Impact of fatigue on daily functioning	Individual symptoms: 0 (Absent/No Influence) to 10 (Very Severe/Maximum Influence) Frequency per month for "attacks" and "flushing" Total Score: Variable (additional "other" symptoms/impacts may be listed)	24-hour recall specific for fatigue, none specified for other questions; one-time administration	Dutch, English
MQLQ <sup>8</sup>	ISM	49	Fatigue and mental health, anaphylaxis, skin symptoms, bone symptoms, unfamiliarity, flushing, general symptoms, and triggers	Asks extent of being troubled by a number of symptoms	Individual symptoms: 0 (None/Not Applicable) to 6 (Worst Possible) Total Score: 0-294	No recall period specified; one-time administration	Dutch, English
MC-QoL <sup>9</sup>	Cutaneous Mastocytosis and ISM	27	Symptoms, Emotions, Social life/Functioning, and Skin	Diarrhea, Fatigue, Headache, Muscle/Joint Pain, Difficulty Concentrating, Sleep, Tired During the Day, Less Capable, Lacking in Motivation; Itching, Skin Redness, Flushing	Individual symptoms: 0 (None) to 4 (Very Much) Total Score: 0-108 normalized to 0-100	Once with 2-week recall	Arabic, Czech, Danish, Dutch,^ English,^ French,^ German,^ Greek, Hebrew, Hungarian, Italian,^ Norwegian, Polish, Portuguese,^ Romanian, Russian,^ Slovenian, Spanish,^ Swedish, Turkish

^Cultural language adaptations available

### CONCLUSIONS

- Many SM-specific PROMs have been developed, validated, and used in clinical trials in the last several years; four quantify the severity of SM-specific symptoms and two assess patient QoL.
- The ISM-SAF has undergone rigorous validation and extensive interpretability analyses over many years, with regulatory input, to support an approved product label.
- The intended patient population, content, respondent burden, and interpretability of SM PROM data varies by tool and should be considered by clinicians and researchers to use in clinical practice, research, or quality initiatives.

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### References:

1. Pardanani A. Am J Hematol 2021;96:508-525; 2. Mesa RA, et al. Cancer 2022;128(20):3691-3699. 3. US Department of Health and Human Services, Food and Drug Administration, Center for Drug Evaluation and Research, Center for Drug Evaluation and Research, Center for Devices and Radiological Health. Guidance for industry patient-reported outcome measures: use in medical product development to support labeling claims. 2009. 4. Patrick DL, et al. Value Health. 2011;14(8):978–88. 6. Taylor, et al. Orphanet J Rare Dis 2021;16:414 7. Siebenhaar F, et al. Allergy 2018;73(7):1489-1496 8. van Anrooij B, et al. Allergy 2016;71(11):1585-1593 9. Siebenhaar F, et al. Allergy 2016;71(6):869-877 10. APEX: ClinicalTrials.gov Identifier: NCT04996875 11. Sarilumab: ClinicalTrials.gov Identifier: NCT04910685 14. PIONEER: ClinicalTrials.gov Identifier: NCT03731260 15. EXPLORER: ClinicalTrials.gov Identifier: NCT02561988 16. PATHFINDER: ClinicalTrials.gov Identifier: NCT03580655 17. Triggiani M, et al. Presented at ISPOR Europe, Nov 2023 18. Veitch S, et al. Presented at ASH, Dec 2023. 19. AYVAKIT ® (avapritinib). USPI. Blueprint Medicines Corporation. 2023.