

- **Duration of therapy** with abiraterone acetate or enzalutamide was assessed as time from index date until the last date of all abiraterone acetate or enzalutamide treatment; this period includes treatment with (switched) medications and gaps in therapy. In addition, **total days on therapy** were calculated as the sum of days supply from filled prescriptions for abiraterone acetate and enzalutamide.
- **Hospice use** was measured in medical claims based on procedure codes for hospice services and site of service codes; time from index date to evidence of hospice, and time from hospice to death were measured.
- **Mortality** was assessed using the Social Security Master Death Record, facility discharge status, and use of hospice services with subsequent Medicare plan disenrollment.
- Enrollment data were used to identify age, insurance type, and region of residence. Clinical characteristics were measured from medical and pharmacy claims, including Charlson Comorbidity Score², brain metastases, docetaxel, and pre- and post-index statin use.

Analytic Methods

- Descriptive analyses compared ABI and ENZ on characteristics and clinical outcomes; t-tests for means and chi-square tests for dichotomous outcomes.
- Cox proportional hazards compared ABI and ENZ on duration of therapy with models adjusted for demographic and clinical characteristics.
- Time to hospice and time from entering hospice until death were measured.

References

1. *Journal of Clinical Oncology*. 2014 May-Jun; 16(3): 426–431.
2. Quan H, Sundararajan V, Halfon P, Fong A, Burnand B, Luthi JC, Saunders LD, Beck CA, Bergeron N, WA, Coding algorithms for defining comorbidities in ICD-9-CM and ICD-10 administrative data. *Medical Care*. 2005;43:1130-39.