Maintenance Therapy With PARP Inhibitor Olaparib Extends Survival By Over 1 Year in Patients With Relapsed Ovarian Cancer and BRCA Mutation

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ASCO Perspective

“This study confirms that the PARP inhibitor olaparib should be the standard maintenance therapy for patients with BRCA-related relapsed ovarian cancer responding to platinum-based chemotherapy – a significant advance for women with a cancer that has a historically poor prognosis,” said ASCO Chief Medical Officer and Executive Vice President Richard L. Schilsky, MD, FASP, FSCT, FASCO.

ALEXANDRIA, Va. — Maintenance therapy with olaparib (Lynparza) extended overall survival by nearly 13 months (12.9) compared with placebo in women with platinum-sensitive relapsed ovarian cancer with BRCA 1 or 2 mutations, in a randomized phase III trial.

Study at a Glance

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<th>Focus</th>
<th>Maintenance olaparib and overall survival in women with platinum-sensitive relapsed ovarian cancer with BRCA 1/2 mutations</th>
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<td>Population</td>
<td>196 patients with relapsed BRCA-related ovarian cancer responding to platinum-based chemotherapy</td>
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<td>Findings</td>
<td>Olaparib extended overall survival by nearly 12.9 months compared with placebo</td>
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**Significance**
Establishes olaparib as standard for maintenance treatment for these patients

**Key Findings**
At 5 years follow up, 42.1% of women on the poly ADP-ribose polymerase (PARP) inhibitor olaparib were alive vs. 33.2% on placebo. The findings come from the randomized phase III SOLO-2 trial and represent the first overall survival data for a PARP inhibitor in this group of patients. The results will be presented during the virtual scientific program of the 2020 American Society of Clinical Oncology (ASCO) Annual Meeting.

“A median overall survival improvement of nearly 13 months is impressive in ovarian cancer and brings a substantial benefit to our patients,” said lead author Andres Poveda, MD, of Initia Oncology, Hospital Quironsalud, in Valencia, Spain. “With the addition of overall survival data, this study helps usher in a new era of personalized medicine for women with this difficult-to-treat cancer.”

**About the Study**
In this double-blind, multicenter trial, 196 patients with relapsed BRCA-related ovarian cancer responding to platinum-based chemotherapy were randomized to receive olaparib tablets, while 99 received placebo. The patients had also previously received at least two lines of chemotherapy and had cancer that was responding to recent platinum-based chemotherapy.

After median follow-up of 65 months, 28.3% of patients who received olaparib were alive and had not received subsequent treatment, compared with 12.8% of patients who received a placebo. Patients receiving olaparib in the time between disease response and progression had a 26% reduced risk of death. In addition, 38.4% of patients in the placebo group crossed over to treatment with olaparib.

The unique mechanism of PARP inhibitors highlights the role of targeted therapies for specific gene mutations. BRCA mutations are well-established targets for treatment with PARP inhibitors.
Funding
This study was funded by AstraZeneca and Merck Sharp & Dohme Corp, a subsidiary of Merck & Co, Inc.

View the abstract.

View the press briefing presentation.

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ATTRIBUTION TO THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY ANNUAL MEETING IS REQUESTED IN ALL COVERAGE.

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to conquer cancer and create a world where cancer is prevented or cured, and every survivor is healthy. Conquer Cancer, the ASCO Foundation, supports the Society by funding groundbreaking research and education across cancer's full continuum. Learn more at www.ASCO.org, explore patient education resources at www.Cancer.Net, and follow us on Facebook, Twitter, LinkedIn, Instagram, and YouTube.