# Cases from the Community Clinical Investigators Provide Their Perspectives on Emerging Research and Actual Patients with Ovarian Cancer

### **CME Information**

#### TARGET AUDIENCE

This activity is intended for gynecologic oncologists, medical oncologists, gynecologists and other healthcare providers involved in the treatment of gynecologic cancers.

#### **OVERVIEW OF ACTIVITY**

The American Cancer Society estimates that in 2018, approximately 22,240 new cases of ovarian cancer (OC) will be diagnosed in the United States and more than 14,000 individuals will die of the disease, making it the most lethal of the various gynecologic cancers. As with many other tumors, patient outcomes are critically dependent upon effective multidisciplinary care, which often includes contributions from gynecologic, medical and radiation oncologists as well as pathologists, diagnostic radiologists, oncology nurses and psychosocial services. In addition to the disease- and treatment-related morbidity and mortality associated with OC, pain, fatigue, lymphedema, depression/anxiety, infertility/childbearing and sexual dysfunction are commonly occurring issues that must also be addressed in the care of these patients.

These video proceedings from a CME symposium held during the Society of Gynecologic Oncology's 2018 Annual Meeting on Women's Cancer explore significant therapeutic advances in the field of OC treatment by using the perspectives of leading experts on challenging cases and questions submitted by gynecologic and medical oncologists in the community to frame a relevant discussion of how this information has aided in the refinement of current routine clinical practice and ongoing research. This CME activity will help gynecologic oncologists, medical oncologists, gynecologists and other healthcare providers find answers to the individualized questions and concerns that they frequently encounter and in turn provide high-quality cancer care.

#### **LEARNING OBJECTIVES**

- Review available efficacy and safety data with the use of neoadjuvant chemotherapy followed by surgical cytoreduction for patients with Stage IIIC or IV OC, and identify patients who may be suitable for this approach.
- Summarize existing research data and ongoing clinical trials documenting the risks and benefits of angiogenesis inhibition in the management of newly diagnosed advanced

OC, and identify individuals who may benefit from this treatment strategy.

- Develop a treatment algorithm for the management of progressive epithelial OC, considering the response to prior therapy, genomic profile, goals of treatment and the relative efficacy and safety of evidence-based therapeutic strategies.
- Recognize the toxicities associated with therapeutic agents and regimens commonly used in the care of patients with OC, and offer supportive management strategies to minimize and/or ameliorate these side effects.
- Develop an understanding of the mechanisms of action, available data and potential clinical roles of compounds under investigation for patients with advanced OC in preparation for their potential introduction into clinical practice.

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Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 2 Medical Knowledge MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

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**FACULTY** — The following faculty (and their spouses/partners) reported relevant conflicts of interest, which have been resolved through a conflict of interest resolution process:

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#### Consulting Agreement: Fujibio.

#### Lainie P Martin, MD

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Advisory Committee: ImmunoGen Inc, Tesaro Inc; Contracted Research: Novartis.

#### Bradley J Monk, MD

Professor Division of Gynecologic Oncology Arizona Oncology (US Oncology Network) University of Arizona College of Medicine - Phoenix Creighton University School of Medicine at St Joseph's Hospital Phoenix, Arizona **Consulting Agreements:** Amgen Inc, AstraZeneca Pharmaceuticals LP, Genentech, Incyte Corporation, Merck, Pfizer Inc, Pharmacyclics LLC, an AbbVie Company, Roche Laboratories Inc; **Speakers Bureau:** AstraZeneca Pharmaceuticals LP, Genentech, Janssen Biotech Inc, Roche Laboratories Inc.

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#### Hardware/Software Requirements:

A high-speed Internet connection A monitor set to 1280 x 1024 pixels or more Internet Explorer 11 or later, Firefox 56 or later, Chrome 61 or later, Safari 11 or later, Opera 48 or later Adobe Flash Player 27 plug-in or later Adobe Acrobat Reader (Optional) Sound card and speakers for audio

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# **Select Publications**

#### Angeles Alvarez Secord, MD, MHSc

Burger RA et al; Gynecologic Oncology Group. Incorporation of bevacizumab in the primary treatment of ovarian cancer. *N Engl J Med* 2011;365(26):2473-83.

Chan JK et al. Weekly vs every-3-week paclitaxel and carboplatin for ovarian cancer. N Engl J Med 2016;374(8):738-48.

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du Bois A et al; AGO Study Group led Gynecologic Cancer Intergroup/European Network of Gynaecologic Oncology Trials Groups Intergroup Consortium. Standard first-line chemotherapy with or without nintedanib for advanced ovarian cancer (AGO-OVAR 12): A randomised, double-blind, placebo-controlled phase 3 trial. *Lancet Oncol* 2016;17(1):78-89.

du Bois A et al. Incorporation of pazopanib in maintenance therapy of ovarian cancer. J Clin Oncol 2014;32(30):3374-82.

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Kehoe S et al. Primary chemotherapy versus primary surgery for newly diagnosed advanced ovarian cancer (CHORUS): An open-label, randomised, controlled, non-inferiority trial. *Lancet* 2015;386(9990):249-57.

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Onda T et al; Japan Clinical Oncology Group. Comparison of treatment invasiveness between upfront debulking surgery versus interval debulking surgery following neoadjuvant chemotherapy for stage III/IV ovarian, tubal, and peritoneal cancers in a phase III randomised trial: Japan Clinical Oncology Group Study JCOG0602. *Eur J Cancer* 2016;64:22-31.

Oza AM et al. Olaparib combined with chemotherapy for recurrent platinum-sensitive ovarian cancer: A randomised phase 2 trial. *Lancet Oncol* 2015;16(1):87-97.

Perren TJ et al; ICON7 Investigators. A phase 3 trial of bevacizumab in ovarian cancer. *N Engl J Med* 2011;365(26):2484-96. Pignata S et al. Carboplatin plus paclitaxel once a week versus every 3 weeks in patients with advanced ovarian cancer (MITO-7): A randomised, multicentre, open-label, phase 3 trial. *Lancet Oncol* 2014;15(4):396-405.

Trial on radical upfront surgery in advanced ovarian cancer. NCT02828618

van Driel WJ et al. Hyperthermic intraperitoneal chemotherapy in ovarian cancer. N Engl J Med 2018;378(3):230-40.

Vergote I et al; European Organization for Research and Treatment of Cancer-Gynaecological Cancer Group; NCIC Clinical Trials Group. **Neoadjuvant chemotherapy or primary surgery in stage IIIC or IV ovarian cancer.** *N Engl J Med* 2010;363(10):943-53.

Wright AA et al. Neoadjuvant chemotherapy for newly diagnosed, advanced ovarian cancer: Society of Gynecologic Oncology and American Society of Clinical Oncology Clinical Practice Guideline. *J Clin Oncol* 2016;34(28):3460-73.

#### Bradley J Monk, MD

Aghajanian C et al. **OCEANS: A randomized, double-blind, placebo-controlled phase III trial of chemotherapy with or without bevacizumab in patients with platinum-sensitive recurrent epithelial ovarian, primary peritoneal, or fallopian tube cancer.** *J Clin Oncol* 2012;30(17):2039-45.

Alvarez RD et al. Moving beyond the platinum sensitive/resistant paradigm for patients with recurrent ovarian cancer. *Gynecol Oncol* 2016;141(3):405-9.

Coleman RL et al; ARIEL3 Investigators. Rucaparib maintenance treatment for recurrent ovarian carcinoma after response to platinum therapy (ARIEL3): A randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet* 2017;390(10106):1949-61.

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# **Select Publications**

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Pujade-Lauraine E et al. Olaparib tablets as maintenance therapy in patients with platinum-sensitive, relapsed ovarian cancer and a BRCA1/2 mutation (SOLO2/ENGOT-Ov21): A double-blind, randomised, placebo-controlled, phase 3 trial. *Lancet Oncol* 2017;18(9):1274-84.

Pujade-Lauraine E et al. Pegylated liposomal doxorubicin and carboplatin compared with paclitaxel and carboplatin for patients with platinum-sensitive ovarian cancer in late relapse. *J Clin Oncol* 2010;28(20):3323-9.

Raja FA et al. Platinum versus platinum-combination chemotherapy in platinum-sensitive recurrent ovarian cancer: A metaanalysis using individual patient data. *Ann Oncol* 2013;24(12):3028-34.

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#### Don S Dizon, MD

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Coleman RL et al. A phase II evaluation of nanoparticle, albumin-bound (*nab*) paclitaxel in the treatment of recurrent or persistent platinum-resistant ovarian, fallopian tube, or primary peritoneal cancer: A Gynecologic Oncology Group study. *Gynecol Oncol* 2011;122(1):111-5.

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Foote J et al. Predicting 6- and 12-month risk of mortality in patients with platinum-resistant advanced-stage ovarian cancer: Prognostic model to guide palliative care referrals. *Int J Gynecol Cancer* 2018;28(2):302-7.

Galluzzi L et al. Systems biology of cisplatin resistance: Past, present and future. Cell Death Dis 2014;5:e1257.

Gordon AN et al. Recurrent epithelial ovarian carcinoma: A randomized phase III study of pegylated liposomal doxorubicin versus topotecan. *J Clin Oncol* 2001;19(14):3312-22.

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Lortholary A et al; GINECO group France. Weekly paclitaxel as a single agent or in combination with carboplatin or weekly topotecan in patients with resistant ovarian cancer: The CARTAXHY randomized phase II trial from Groupe d'Investigateurs Nationaux pour l'Etude des Cancers Ovariens (GINECO). Ann Oncol 2012;23(2):346-52.

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Miller DS et al. Phase II evaluation of pemetrexed in the treatment of recurrent or persistent platinum-resistant ovarian or primary peritoneal carcinoma: A study of the Gynecologic Oncology Group. *J Clin Oncol* 2009;27(16):2686-91.

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Schouli J et al. Topotecan weekly versus conventional 5-day schedule in patients with platinum-resistant ovarian cancer: A randomized multicenter phase II trial of the North-Eastern German Society of Gynecological Oncology Ovarian Cancer Study Group. *J Clin Oncol* 2011;29(2):242-8.

Shoji T et al. A phase II study of irinotecan and pegylated liposomal doxorubicin in platinum-resistant recurrent ovarian cancer (Tohoku Gynecologic Cancer Unit 104 study). *Cancer Chemother Pharmacol* 2017;80(2):355-61.

Smolle E et al. Malignant ascites in ovarian cancer and the role of targeted therapeutics. Anticancer Res 2014;34(4):1553-61.

# Select Publications

Stuart GC et al; Participants of 4th Ovarian Cancer Consensus Conference (OCCC); Gynecologic Cancer Intergroup. **2010** Gynecologic Cancer InterGroup (GCIG) consensus statement on clinical trials in ovarian cancer: Report from the Fourth Ovarian Cancer Consensus Conference. *Int J Gynecol Cancer* 2011;21(4):750-5.

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#### Lainie P Martin, MD

Disis ML et al. Avelumab (MSB0010718C; anti-PD-L1) in patients with recurrent/refractory ovarian cancer from the JAVELIN Solid Tumor phase 1b trial: Safety and clinical activity. *Proc ASCO* 2017; Abstract 5533.

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Infante J et al. Safety, clinical activity and biomarkers of atezolizumab (atezo) in advanced ovarian cancer (OC). *Proc ESMO* 2016; Abstract 871P.

Matulonis UA et al. Initial safety and activity findings from a phase IB escalation study of mirvetuximab soravtansine, a folate receptor alpha (FRα)-targeting antibody-drug conjugate (ADC), with pembrolizumab in platinum-resistant epithelial ovarian cancer (EOC) patients. *Proc* SGO 2018;Abstract 74.

Martin LP et al. Characterization of folate receptor alpha (FR $\alpha$ ) expression in archival tumor and biopsy samples in a phase I study of mirvetuximab soravtansine, a FR $\alpha$ -targeting antibody-drug conjugate (ADC), in relapsed epithelial ovarian cancer patients. *Proc SGO* 2017; Abstract 61.

Moore KN et al. FORWARD I: A phase III study of mirvetuximab soravtansine versus chemotherapy in platinum-resistant ovarian cancer. *Future Oncol* 2018; [Epub ahead of print].

Ponte JF et al. Mirvetuximab soravtansine (IMGN853), a folate receptor alpha-targeting antibody-drug conjugate, potentiates the activity of standard of care therapeutics in ovarian cancer models. *Neoplasia* 2016;18(12):775-84.

Varga A et al. Pembrolizumab in patients (pts) with PD-L1–positive (PD-L1+) advanced ovarian cancer: Updated analysis of KEYNOTE-028. *Proc ASCO* 2017; Abstract 5513.