Addressing Current Questions and Emerging Considerations with the Use of PARP Inhibitors in the Management of 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 2019, 22,530 new cases of ovarian cancer (OC) will be diagnosed in the United States and 13,980 deaths from the disease will occur. For this reason, significant financial and intellectual resources have been invested over the past few decades in attempts to better understand the natural history of the disease, identify genetic and other factors responsible for its proliferation and develop novel therapies with the potential to significantly improve outcomes for patients. Perhaps the largest recent advance in OC has been the introduction of PARP inhibitors into the therapeutic milieu. However, the paradigm shift brought forth by the availability of PARP inhibitors has significant ramifications for practicing clinicians who must now confront a variety of practical issues, and uncertainties with regard to the safe and efficacious use of these agents persist.

This CME program developed from the proceedings of a satellite symposium held during the Society of Gynecologic Oncology's 2019 Annual Meeting on Women's Cancer features video slide presentations given by leading researchers with an expertise in gynecologic cancers on the emerging considerations that drive clinical decision-making about the use of PARP inhibitors in the management of OC. By providing information on the latest research developments and their potential application to routine practice, this activity is designed to assist medical oncologists, gynecologic oncologists and other healthcare providers with the formulation of up-to-date clinical management strategies.

LEARNING OBJECTIVES

- Recognize the recent FDA approval of olaparib as maintenance therapy after first-line platinum-based chemotherapy for patients with advanced OC and a deleterious or suspected deleterious BRCA germline or somatic mutation, and consider how the availability of this strategy affects current therapeutic algorithms.
- Assess available clinical trial data with and FDA indications for the various PARP inhibitors when used as maintenance therapy for recurrent, platinum-sensitive OC, and develop strategies to identify patients for whom this approach might be appropriate.
- Identify patients with multiregimen-refractory OC who may be appropriate candidates for a PARP inhibitor, and safely integrate these agents into nonresearch therapy.
- Recognize the toxicities associated with PARP inhibitors 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 of, available data with and possible clinical roles of other investigational PARP inhibitors in preparation for their potential introduction into clinical practice.
- Recall the biologic rationale for and ongoing research efforts evaluating the role of PARP inhibitors in combination with chemotherapy, targeted therapy or immunotherapy, and refer appropriate patients for clinical trial participation.

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Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 1 Medical Knowledge MOC point 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.

Please note, this program has been specifically designed for the following ABIM specialty: **medical oncology**.

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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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No relevant conflicts of interest to disclose.

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Advisory Committee: Aravive Inc, AstraZeneca Pharmaceuticals LP, Clovis Oncology, Genentech, ImmunoGen Inc, Janssen Biotech Inc, Merck, OncoMed Pharmaceuticals Inc, Pfizer Inc, Roche Laboratories Inc, Samumed, Tesaro, VBL Therapeutics; **Contracted Research:** Clovis Oncology, Genentech, Merck, PTC Therapeutics, 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

Last review date: June 2019

Expiration date: June 2020

Select Publications

Kathleen Moore, MD

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

Gonzalez-Martin A et al. **A randomized, double-blind phase 3 trial of niraparib maintenance treatment in patients with HRD+ advanced ovarian cancer after response to front-line platinum-based chemotherapy.** *Proc ASCO* 2016;**Abstract TPS5606**.

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Professor Jonathan A Ledermann

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Robert L Coleman, MD

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