Introduction

- The Phase IIIb, single-arm OPINION trial is the largest dataset to evaluate maintenance olaparib monotherapy in patients without a gBRCAm who had FSI ovarian cancer and had received ≥3 prior lines of platinum-based chemotherapy.

- At the OPINION primary analysis, maintenance olaparib demonstrated clinical benefit compared with historical placebo controls.1,2

- Median progression-free survival was 9.2 months (95% CI 7.6–10.9).3,4

- In the primary analysis, safety and tolerability were consistent with prior olaparib studies.1,2

- This secondary analysis reports additional prespecified and post hoc secondary safety analyses, to characterize more completely the safety profile of maintenance olaparib in this setting.

Results and interpretation

- At the primary data cut-off, 75% of patients had discontinued olaparib, mostly due to disease progression (80%).

- Median (range) total and actual treatment duration were similar (9.4 [0.0–31.9] and 9.2 [0.0–31.7] months, respectively).

- Dose interruptions did not have a big impact on duration of treatment.

- Of the 81 patients still receiving olaparib at 18 months, 68% remained on the starting dose of olaparib 300 mg bid.

Conclusion

- Maintenance olaparib was well tolerated and the safety profile was consistent with that observed in prior olaparib studies.1,2

Objective

- To further characterize the safety and tolerability profile of maintenance olaparib in the OPINION study (NCT03402931), which evaluated maintenance olaparib in patients without a deleterious or suspected deleterious germline BRCA1/BRCA2 mutation (non-gBRCAm) who had platinum-sensitive relapsed (PSR) ovarian cancer and had received ≥3 prior lines of platinum-based chemotherapy.

Conclusions

- Most adverse events (AEs) were low grade and only one grade ≥3 treatment-emergent AE (anemia) was reported in >10% of patients.

- AE-related dose reduction was required in ≥25% of patients and the discontinuation rate due to AEs was low (8%).

- The most common AEs generally occurred early.

- Maintenance olaparib was well tolerated and the safety profile was consistent with that observed in prior olaparib studies.1,2

Plain-language summary

Why did we perform this research?

Olaparib is a drug that is effective at preventing disease worsening in patients with ovarian cancer that has spread beyond their organs.1 In previous trials, olaparib was shown to be particularly effective in patients with an inherited (‘germline’) mutation in one of two genes collectively known as BRCA genes; however, the OPINION study showed that olaparib is also effective in patients without a germline BRCA mutation (non-gBRCAm) who had platinum-sensitive relapsed (PSR) ovarian cancer and had received ≥3 prior lines of platinum-based chemotherapy.

How did we perform this research?

Study participants (279 patients; aged 40–85 years) received olaparib tablets twice every day until their disease worsened or unacceptable side effects were experienced. Any medical problem (or side effect) was reported.

What were the findings of this research and what are the implications?

The five most common AEs were nausea, fatigue/asthenia, anemia, vomiting, and neutropenia; other common AEs have been reported previously and are shown in the Supplement (accessibility via QR code).

- One fatal AE (aspiration pneumonia; considered unrelated to study treatment)

- There were seven AESIs reported in six patients

- Over the first 18 months after initiating olaparib, among those still receiving olaparib at any time, the AE with the greatest impact was fatigue/asthenia

- Over the first 18 months after initiating olaparib, the median duration of treatment was 9.2 months

Where can I access more information?

OPINION ClinicalTrial.gov identifier - NCT03402931.


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References