Use of olaparib in pancreatic cancer: preliminary results of the multicentric real-world study in Spain

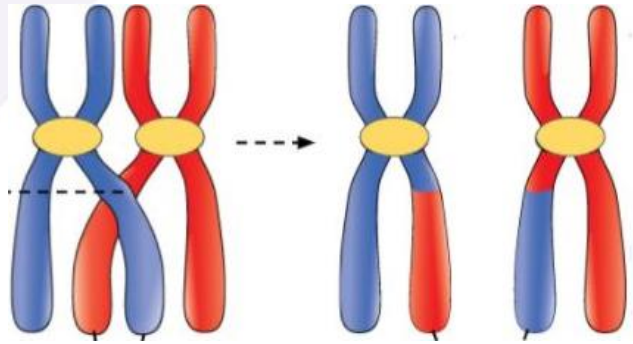
Learning objectives:

→To describe the use in Spanish hospitals of olaparib in a real-world setting in pancreatic cancer (PC) including **different homologous recombination deficiencies (HRD)**.

→To analyze the **PFS, OS and safety** of olaparib.

→To **identify** patients who benefit most from this therapy.

→To **compare** indirectly our results with POLO study.



The authors declare no conflicts of interests

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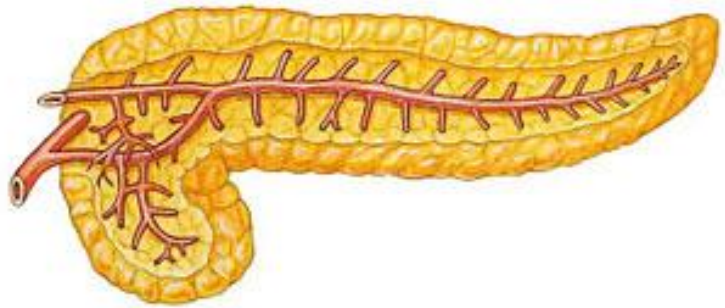
INTRODUCTION

Pancreatic cancer is an important disease because of its:



Lethality

Increasing incidence

INTRODUCTION

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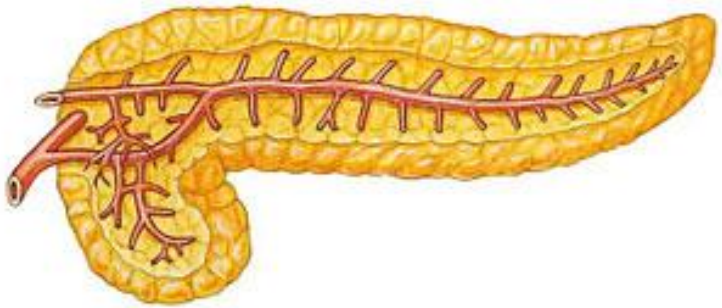


Lethality

Increasing incidence

Chemoresistance

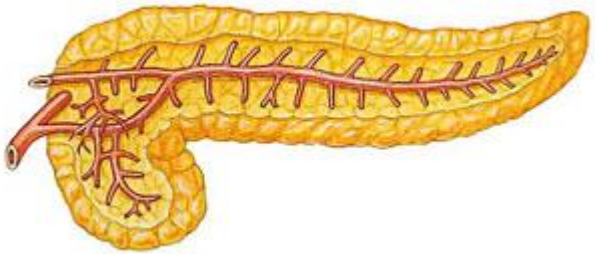
INTRODUCTION

2019 → **POLO**

Maintenance Olaparib for Germline BRCA-Mutated Metastatic Pancreatic Cancer

Talia Golan, M.D., Pascal Hammel, M.D., Ph.D., Michele Reni, M.D., Eric Van Cutsem, M.D., Ph.D., Teresa Macarulla, M.D., Ph.D., Michael J. Hall, M.D., Joon-

T Golan *et al*. Maintenance Olaparib for Germline BRCA-Mutated Metastatic Pancreatic Cancer. N Engl J Med. 2019



PFS olaparib/placebo: 7.4 vs 3.8 months; HR 0.53; 95% CI, (0.35 – 0.82); p=0.004.

OS: preliminary results not significant

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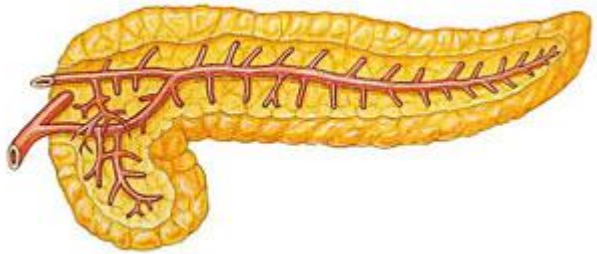

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July 2022

Overall Survival Results From the POLO Trial: A Phase III Study of Active Maintenance Olaparib Versus Placebo for Germline BRCA–Mutated Metastatic Pancreatic Cancer

Hedy L Kindler [1], Pascal Hammel [2], Michele Reni [3], Eric Van Cutsem [4], Teresa Macarulla [5],

OS olaparib/placebo: 19.0 vs 19.2 months; HR 0.83; 95% CI (0.56-1.22); p= 0.3487.

HL Kindler *et al*. Overall Survival Results From the POLO Trial: A Phase III Study of Active Maintenance Olaparib Versus Placebo for Germline BRCA-Mutated Metastatic Pancreatic Cancer. J Clin Oncol. 2022

METHODS

Design and patients:

-Multi-center (8 hospitals), observational, retrospective study.

-Patients diagnosed with PC with HRD who initiated treatment with olaparib (maintenance or not) from December 2018 to December 2022.

-Patients who had previously received iPARP were excluded.

Data: Obtained from the clinical history, the outpatient dispensing program and collected through the REDCAP® platform provided by Spanish Society of Hospital Pharmacy (SEFH).

REDCap Research Electronic Data Capture

RESULTS

27 patients screened → 1 exclusion

↓

26 patients (Overall population) → Patients characteristics, conditions of use and safety

RESULTS

Patients	**26**
Median age (range)	57 (37-84)
Female	73%
ECOG 0 / 1	27% / 73%
Metastasic disease	96.2%
Platin as 1st Line	77%
Median duration of platin therapy (range)	16 (4-156) weeks
Response after platin therapy	88.5%

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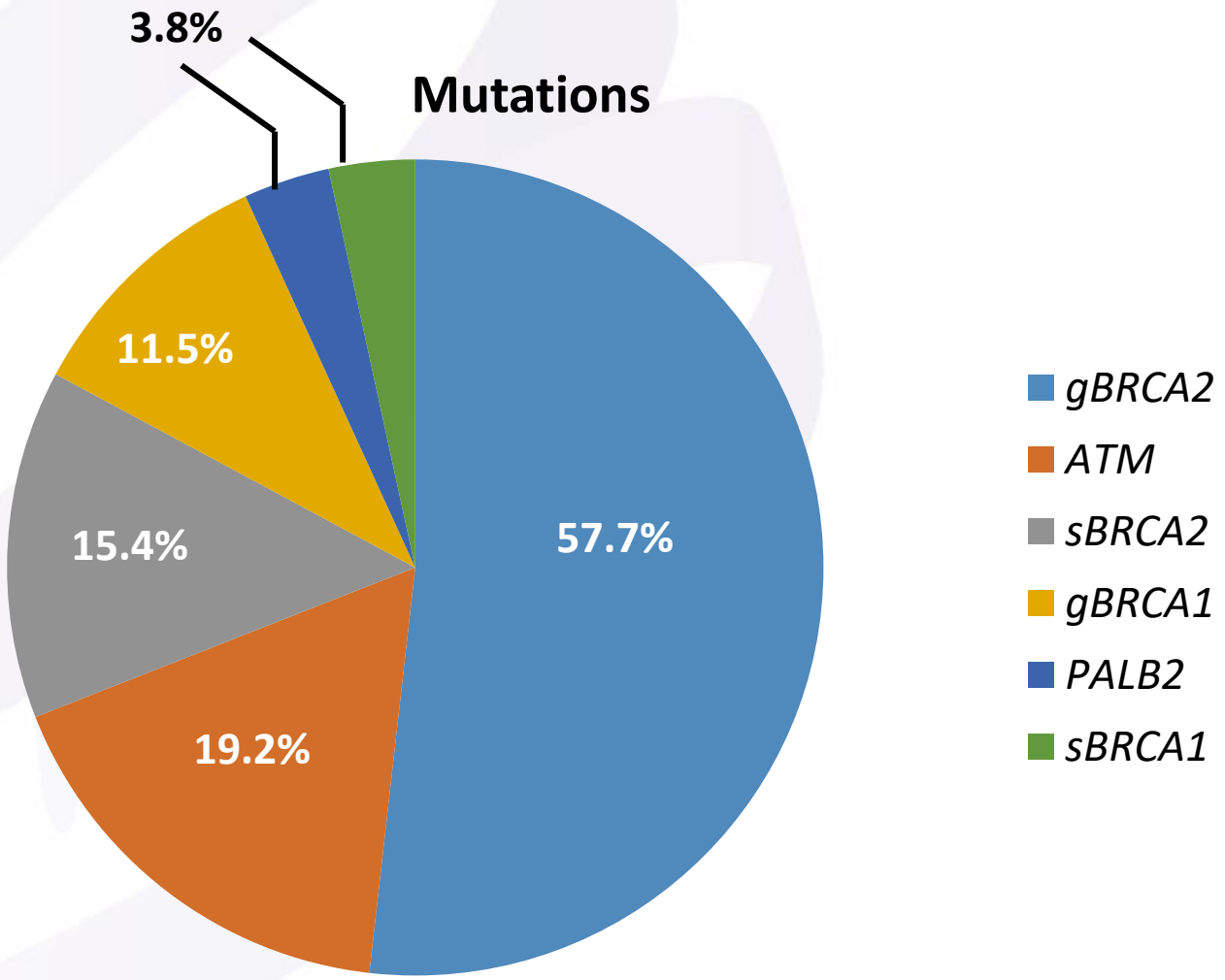

RESULTS

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↓

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↓

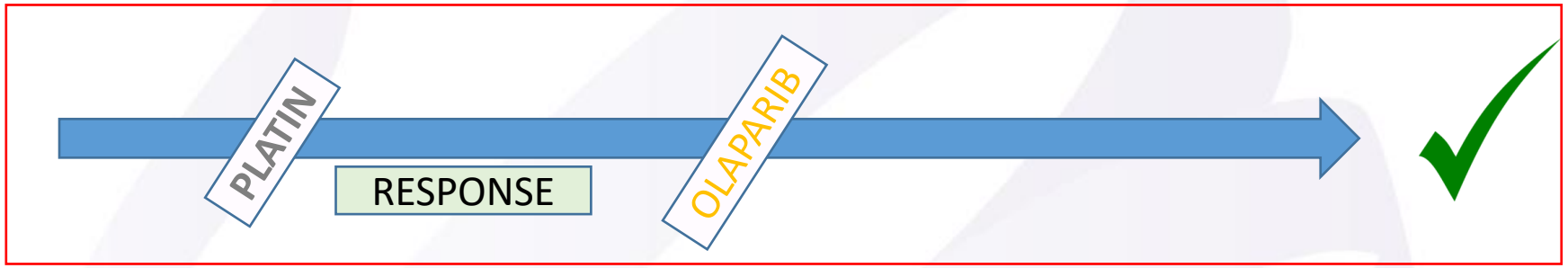
21 patients (Maintenance population) → Effectiveness analysis

5 patients (Non-manteinance) → PFS/OS

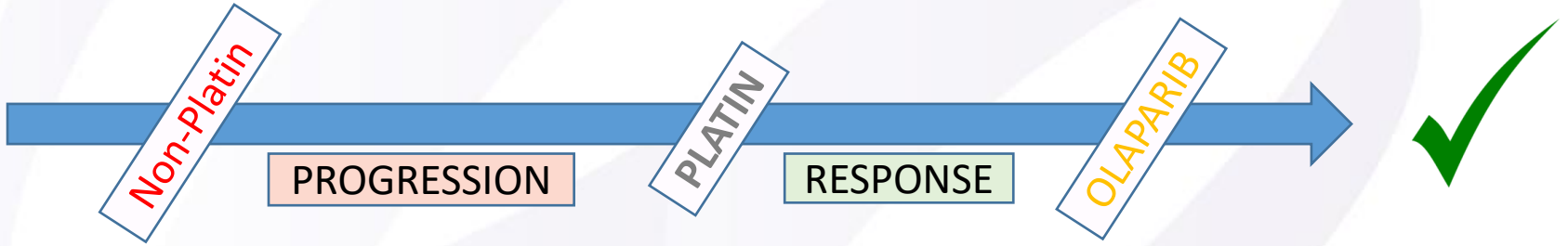
RESULTS

POLO

1) Had a response after a Platin regimen (regardless of the line of therapy).

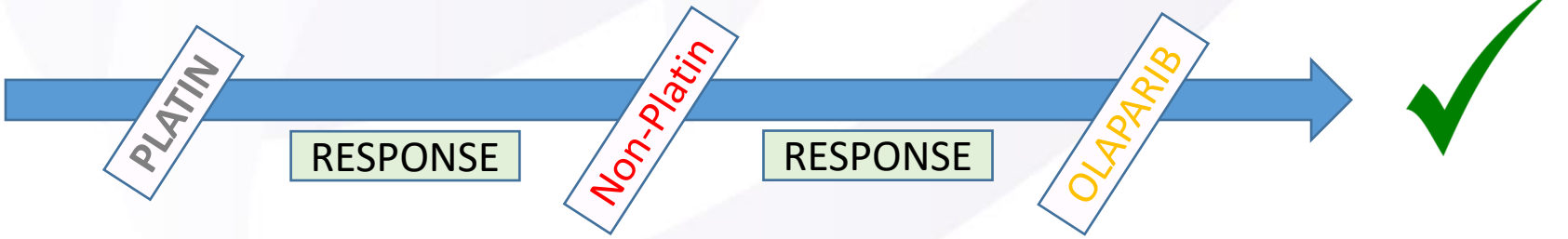


14 patients



6 patients

2) Had a response after a non-Platin therapy with continued response after previous platin therapy.



1 patient

Switch because of toxicity

RESULTS

27 patients screened → 1 exclusion

↓

26 patients (Overall population) → Patients characteristics, conditions of use and safety

↓

21 patients (Maintenance population) → Effectiveness analysis

5 patients (Non-maintenance) → PFS/OS

↓

15 patients progressed → **PFS**

↓

9 patients died → OS not reached

RESULTS

	mPSF (range)	mOS (range)
Non-Maintenance (N=5)	**2.6** (0.2-6.4) months	**6.2** (0.6-11.1) months
Maintenance (N=21)	**5.7** (1.7-34) months (N= 15)	**NR***

*More than 50% are still alive

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Safety (N=26)

-73% of patients experienced any adverse event.

-More frequent adverse events: Asthenia (53.8%), nausea (26.9%), headache (19.2%), anemia (15.4%).

-No cases of AML/MDS were detected.

DISCUSSION

Comparison of our results in the maintenance setting with POLO.

	POLO (N=90)	Spanish RW study (N=21)
mPFS	**7.4** months HR 0.53; 95% CI, (0.35 – 0.82); p=0.004.	**5.7** (1.7-34) months (N=15)
mOS	**19.0** months HR 0.83; 95% CI (0.56-1.22); p= 0.3487.	**NR***
Survival rate >24 months	**37%**	**33%**

*More than 50% are still alive

-Limitations of a retrospective study.
-Preliminary results

CONCLUSION

→The **preliminary analysis** of our real-wold study about the use of olaparib in PC in Spain has shown a PFS of **5.7 (1.7-34) months** when used in **maintenance**. OS could not be calculated at this time.

→Olaparib toxicity has been similar to reported in previous studies.

→Patients carrying genes related with HRD other than *gBRCA (ATM, PALB2, sBRCA)* could potentialy benefit from olaparib.

→Olaparib seems to be more effective in maintenance than in treatment.

→Olaparib PFS observed in our population has been worse than the reported by POLO trial (needs confirmation).


gracias
merci
obrigado
danke
teşekkür ederim
thank you
go raibh maith agat
bedankt
sukriya
dziękuję
mochchakkeram
tapadh leat
takk
dank je
terima kasih
ngiyabonga
arigatô
taiku
sagolun
hvala
kop khun krap
mauruuru
grazie
dakujem
mammun
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