



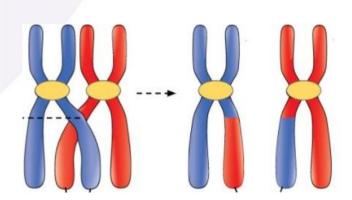






# Case series: use of olaparib in uncommon locations in patients with impaired homologous recombination.

- Héctor Carlos García-Díaz, María Larrosa-García<sup>1</sup>, Anna Farriols-Danés<sup>1</sup>, María Guerra-González<sup>1</sup>, Berta Renedo-Miró<sup>1</sup>, Carolina Valdivia-Vadell<sup>1</sup>, Lucas Rivera-Sánchez<sup>1</sup>, Carla Alonso-Martínez<sup>1</sup>, Maria J Carreras-Soler<sup>1</sup>, Maria Q Gorgas-Torner<sup>1</sup>
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# Our DNA is constantly damaged, potentially leading to cancer.













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However, there are mechanisms that prevent this to happen...









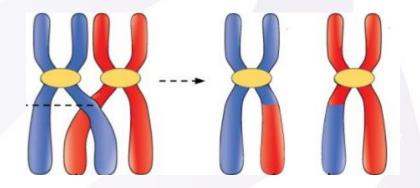








Homologous recombination (HR)





Regulated by genes









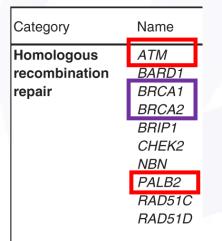


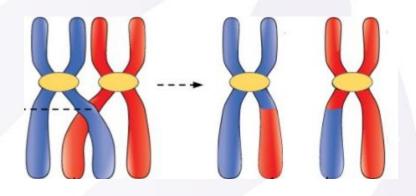


Homologous recombination (HR)



Regulated by genes





HR deficiency (HRD) can be used as a predictor of response to certain therapies like PARP inhibitors...



Modified from: H Kimura et al. 2022. Prognostic significance of pathogenic variants in BRCA1, BRCA2, ATM and PALB2 genes in men undergoing hormonal therapy for advanced prostate cancer. Br J Cancer



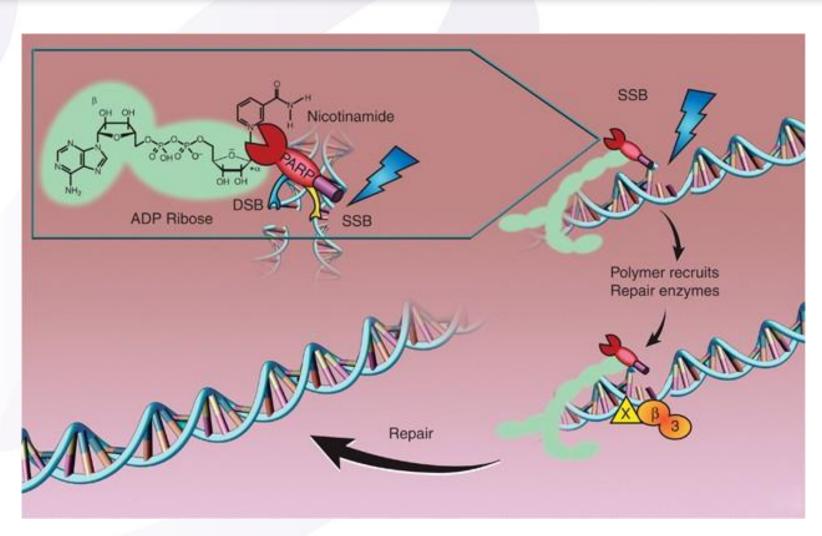








PARP acts as an alternative repair mechanism when HR is impaired.







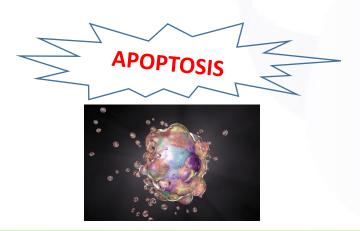


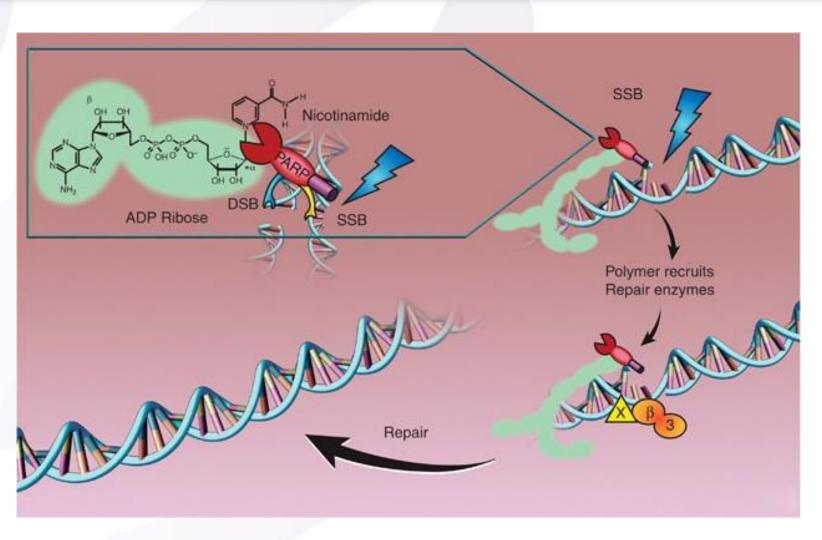




PARP acts as an alternative repair mechanism when HR is impaired.

So... if PARP is inhibited in cells with HRD...















**Olaparib** is the first approved PARPi and currently has indication in: Ovarian, Breast, Pancreatic and Prostate cancer (FDA/EMA).











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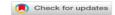
But off-label indications have been explored since 2015 in:

Primary endpoint Response Rate

**Different locations** (Phase II basket CT Kaufman et al.)

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Olaparib Monotherapy in Patients With Advanced Cancer and a Germline *BRCA1/2* Mutation



Bella Kaufman, Ronnie Shapira-Frommer, Rita K. Schmutzler, M. William Audeh Michael Friedlander, Judith Balmaña...

B Kaufmann et al. 2015. Olaparib monotherapy in patients with advanced cancer and a germline BRCA1/2 mutation. J Clin Oncol.

Other HR mutations than BRCA (Phase II CT Mateo et al.)

Clinical Trial > N Engl J Med. 2015 Oct 29;373(18):1697-708. doi: 10.1056/NEJMoa1506859.

DNA-Repair Defects and Olaparib in Metastatic Prostate Cancer

Joaquin Mateo <sup>1</sup>, Suzanne Carreira, Shahneen Sandhu, Susana Miranda, Helen Mossop,

J Mateo et al. 2015. DNA-Repair Defects and Olaparib in Metastatic Prostate Cancer. N Engl J Med.













<u>Journal of Clinical Oncology</u> > <u>List of Issues</u> > <u>Volume 33, Issue 3</u> >

**ORIGINAL REPORTS** | Rapid Communications

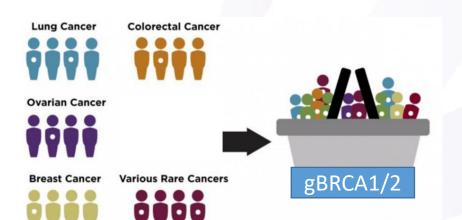
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Response rate as the primary endpoint.



Bella Kaufman, Ronnie Shapira-Frommer, Rita K. Schmutzler, M. William Audeh, Michael Friedlander, Judith Balmaña...



Ovarian: 193 patients

Breast: 62 patients

Pancreatic: 23 patients

Prostate: 8 patients

"Others group" (n=12)

**Biliary tract: 4 patients** 

Bladder: 2 patients

**Lung: 3 patients** 

**Colorectum: 1 patient** 

Esophagus: 1 patient

Uterus: 1 patient



Stable disease in 58.3% of patients that persisted >8weeks

B Kaufmann et al. 2015. Olaparib monotherapy in patients with advanced cancer and a germline BRCA1/2 mutation. J Clin Oncol.











Clinical Trial > N Engl J Med. 2015 Oct 29;373(18):1697-708. doi: 10.1056/NEJMoa1506859.

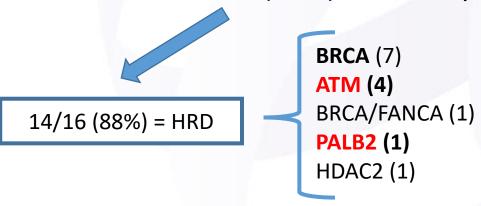
DNA-Repair Defects and Olaparib in Metastatic **Prostate Cancer** 

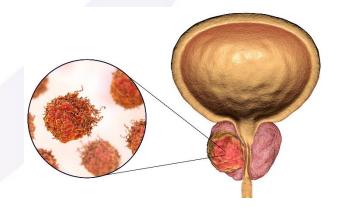


Response rate as the primary endpoint.

Joaquin Mateo 1, Suzanne Carreira, Shahneen Sandhu, Susana Miranda, Helen Mossop,

 $\rightarrow$  49 patients evaluated  $\rightarrow$  16 (33%) had a response.





J Mateo et al. 2015. DNA-Repair Defects and Olaparib in Metastatic Prostate Cancer. N Engl J Med.











# **OBJECTIVE**



Describe the effectiveness and safety of olaparib off-label indications...











#### **OBJECTIVE**



Describe the effectiveness and safety of olaparib off-label indications...

→In patients with HRD and different solid tumors than those authorized.











## **METHODS**

#### **Design and patients:**

- -Single-center, observational, retrospective study.
- -Patients with tumor sites other than those authorized who initiated olaparib between June 2019 and April 2022 were included.

**Variables:** Age, sex, Eastern Cooperative Oncology Group performance status (ECOG), mutation, initial dosing, type (maintenance or not) and line of treatment, dose reductions, adverse events (AEs), best overall response (BOR), progression-free survival (PFS) and overall survival (OS).

**Data:** Obtained from the clinical history and the outpatient dispensing program







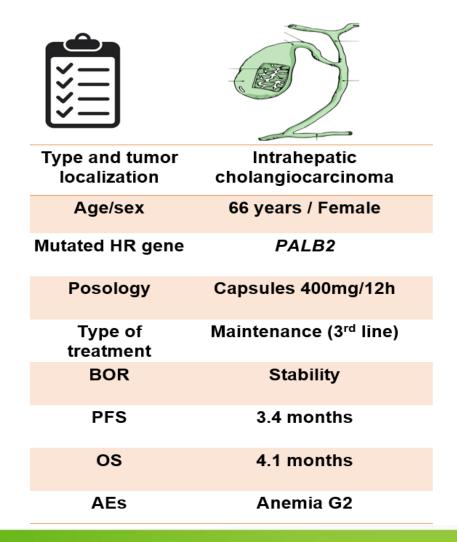






















** ** **		
Type and tumor localization	Intrahepatic cholangiocarcinoma	Non-small cell lung cancer
Age/sex	66 years / Female	71 years / Female
Mutated HR gene	PALB2	ATM
Posology	Capsules 400mg/12h	Tablets 300mg/12h
Type of treatment	Maintenance (3 <sup>rd</sup> line)	Treatment (5 <sup>th</sup> line)
BOR	Stability	Stability
PFS	3.4 months	5.6 months
os	4.1 months	10.2 months
AEs	Anemia G2	Asthenia G2

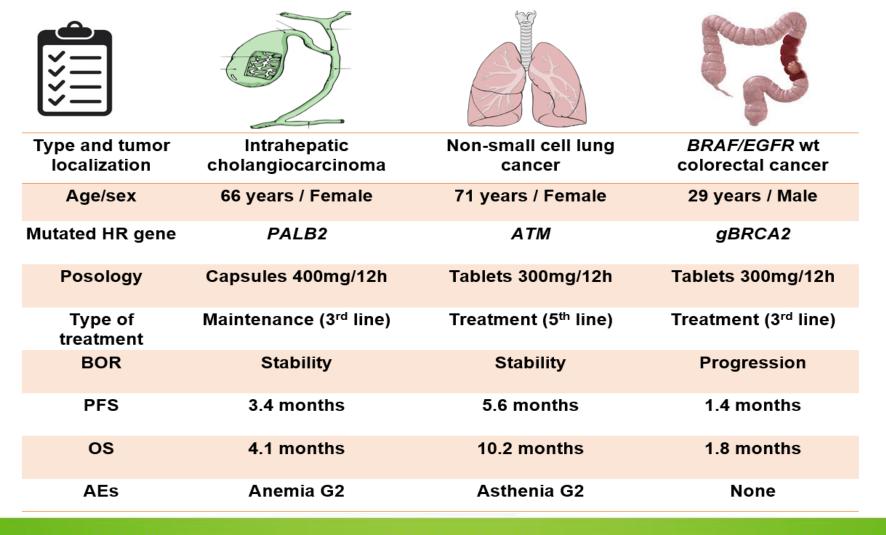












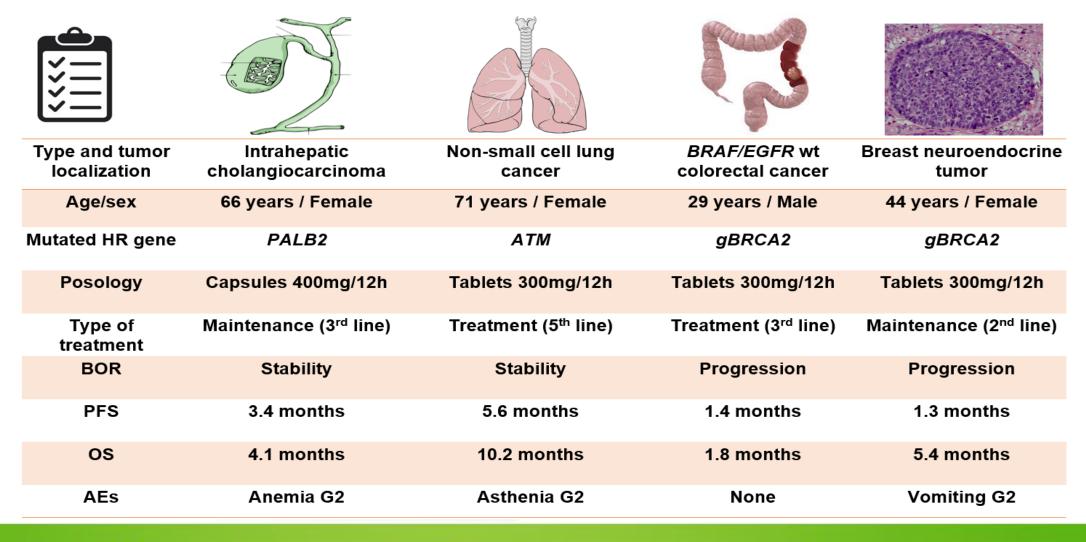






















#### **CONCLUSION**

- → We have described the off-label use of olaparib in 4 patients with HRD in uncommon tumor locations.
- → Safety was adequate and similar to previous studies.
- → Further studies are needed to assess the efficacy and safety of olaparib in patients with HRD in new tumor sites.
- → Currently, there are CT ongoing analyzing olaparib combination with antiangiogenics/ICIs.