



bevacizumab maintenance in primary ovarian cancer

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Patient H-P-L

- ▶ 74 y old otherwise healthy, non Ashkenazi
- ▶ Presented on 11.2013 with urinary incontinence
- ▶ VUS – semi solid mass posterior to the uterus , no clear border between uterus and mass
- ▶ CT – same findings, interpretation – benign leiomyoma
- ▶ Tumor markers – performed prior to operation but **result receive post op** :
ca125 – 2609, others within normal limits
- ▶ Referred for abdominal hysterectomy



At surgery (29.12.2013)

- ▶ 10 cm left ovarian mass – heterogenic – adherent to pelvic wall and to distal sigmoid . Small right ovarian mass.
- ▶ Seeding on pelvic peritoneum , omental cake, small solid diaphragmatic masses
- ▶ Tumor invading the pouch of Douglas with severe adhesions – cannot be excised

- ▶ Debulking : uterus, adnexas, omentum, peritoneum, diaphragm, nodes
- ▶ Upon separation from sigmoid – suspected perforation of colon : revised and sealed

- ▶ >> sub optimal debulking (sub total hysterectomy and Douglas disease)



Had we known...

- ▶ Patient suitable for NACT : disseminated upper abdominal and peritoneal disease, adhesions
 - >> low probability of optimal debulking
- ▶ Could we evaluate better pre-surgery???

Had we known....

- Risk prediction models for optimal primary debulking:

Radiographic evaluation:

Bowel mesentery involvement

Diffuse peritoneal thickening / implants

Diaphragmatic disease

Large volume ascites

Liver involvement

Suprarenal aortic lymph nodes

Clinical Clinical – PS 0-1 vs 2

Models to predict incomplete surgery in advanced ovarian cancer have limited predictive ability and their reproducibility is questionable

Had we known...

If starting with NACT >> IDS

► **Should we add bevacizumab to NACT?**

study	Pts no	End point	Time from bev to surg	Best results	Complications Gr 3/4
Chereau	5 St IV	Safety outcome	54 days	100% optimal	1 (20%) gr 3 lymphocyst
Salani w. Taxol dose escalation	9 5 st IIIc 4 st IV	Toxicity	63 days	100% optimal	3 gr 3 neutropenia 2 gr 3 VTE 1 gr 4 rectal leak
Petrillo Case control	25 (50)	Toxicity Outcome PFS	27 days	80% (control 72%) No difference.. PFS 18 m vs 10 m (s)	1 gr 5 perforation

Chereau , Int J Gynecol Cancer sept 2013

Salani . Int J Gynecol Cancer May 2014

Petrillo, Ann Surg Oncol Dec 2015

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H-P-L – post surgery

- ▶ 2 days post op – bowel obstruction >> resolved
- ▶ Surgical wound infection >> resolved
- ▶ Ca125 post surgery – 854
- ▶ Pathology – high grade serous ca of ovary in ovaries, uterus, nodes, omentum and pelvic masses
- ▶ **Diagnosis: stage IIIc high grade serous ovarian cancer**



H-P-L – post surgery treatment

- ▶ 1 month later – started systemic therapy:
carboplatin AUC5 , weekly paclitaxel 80 mg/m² , Bevacizumab 7.5 mg/kg
- ▶ treatment tolerance – moderate to poor (nausea – maximally treated, severe fatigue, severe dyspepsia, progressive neuropathy, myelotoxicity)
- ▶ 6 courses full treatment (dose reductions)
- ▶ 2 more courses of carboplatin , ongoing bevacizumab for 1 year
- ▶ Ca125 – at 4th cycle – 16. At end of chemotherapy - 13

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H-P-L follow up and treatment

- ▶ CT at chemotherapy end – new lesion in the LLL lung 1.2 cm.
ca125 stable : suspected infection??
- ▶ Received antibiotics >> repeated CT scan after 2 months
- ▶ Lung lesion resolved, new lesion in the 4th segment of the liver
ca125 stable (11.8)
- ▶ PET CT : no absorption in lung or liver (focal fatty infiltration)



H-P-L follow up and treatment

- ▶ Continues bevacizumab 7.5 mg/kg q3w
- ▶ Approaches 1 year of bev :
 - repeated PET CT – no evidence of disease
 - ca125 – 7

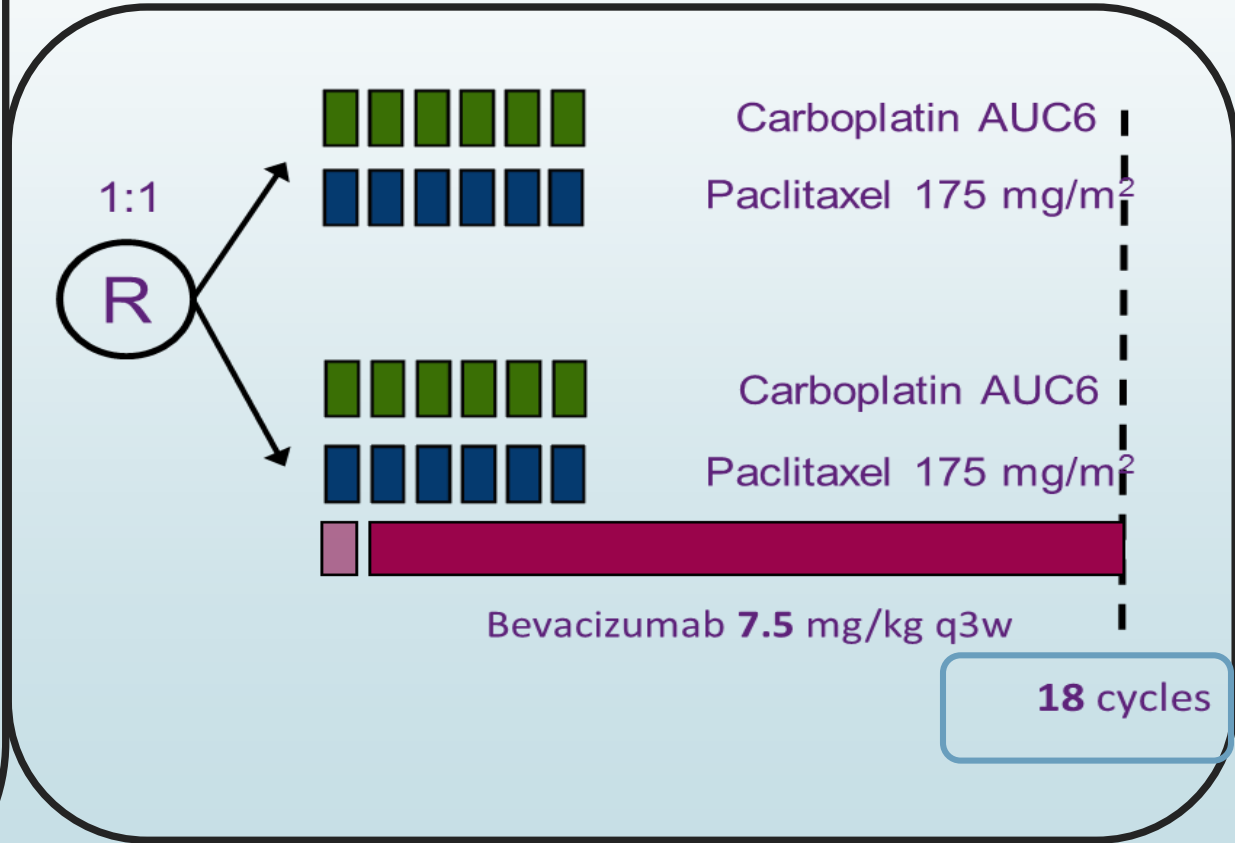
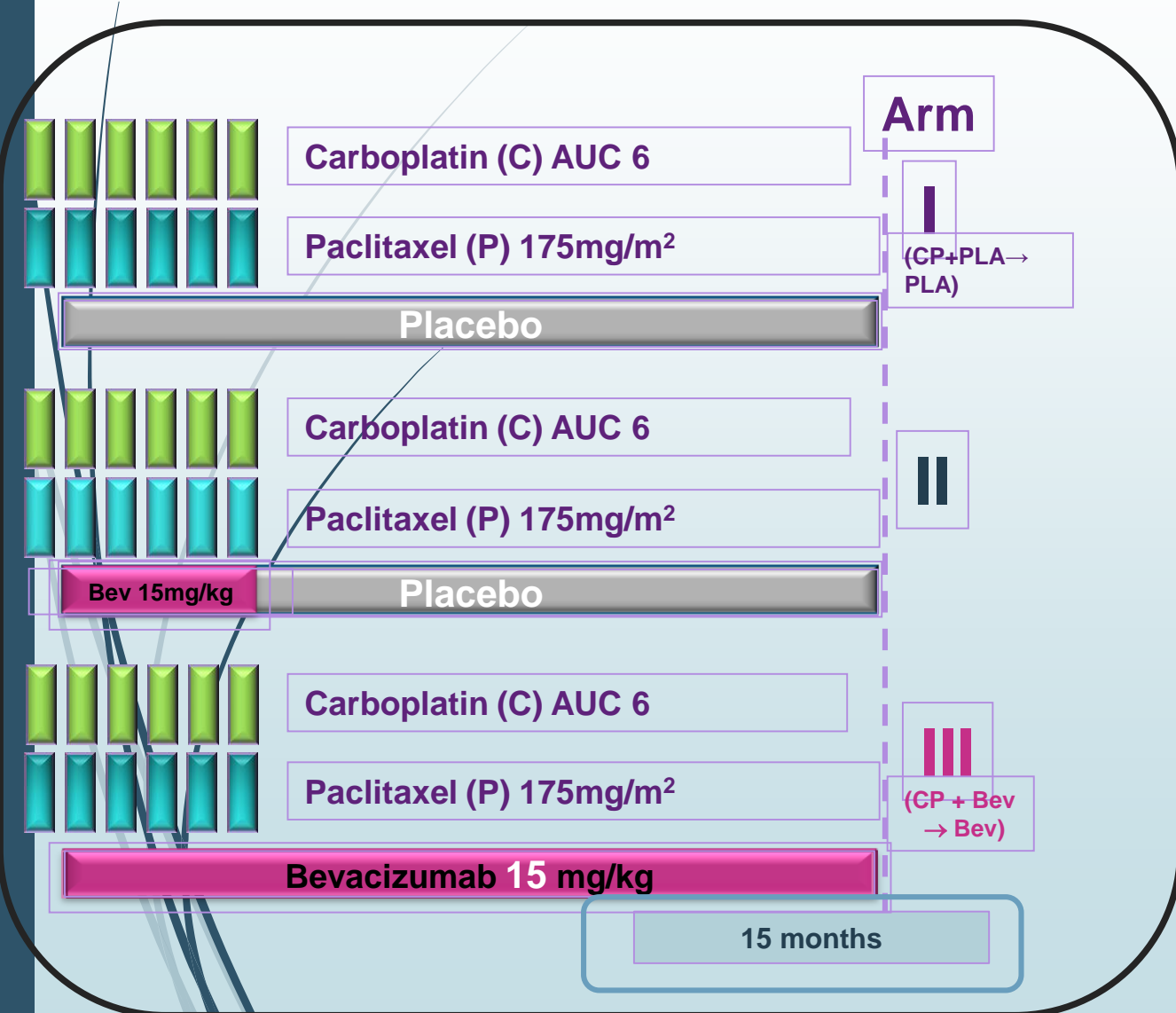
Discussion at patient wish : to continue or not to continue bevacizumab?

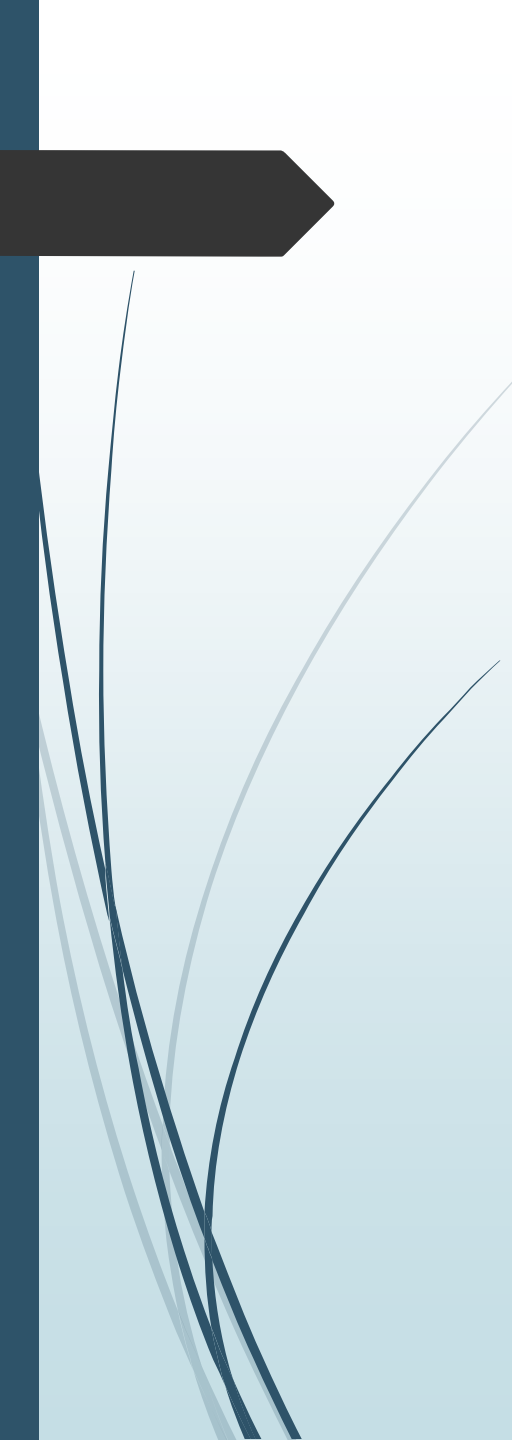
(patient has private insurance)

Study design

GOG 218

ICON7





Bevacizumab in 1st line ovarian cancer – studies GOG218 and ICON7

- ▶ Patient treatment with bevacizumab:
- ▶ Based on OS benefit from ICON7
- ▶ Bevacizumab dose – 7.5 mg/kg – based on ICON7
- ▶ Request for Bevacizumab for further 3 months (15 m)- Based on GOG 218

4 Study design

- Epithelial ovarian, fallopian tube or primary peritoneal cancer:

- Stage IIB–IV
- Grade 3 stage I/IIA
- Clear-cell carcinoma (any stage)
- Carcinosarcoma

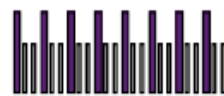
- Maximally debulked (prior neoadjuvant chemotherapy allowed)

- ECOG PS 0–2

Dec 2010–May 2012:
1021 patients enrolled



IV carboplatin AUC 5–6 q3w
(4–8 cycles)^a



IV paclitaxel 175 mg/m² d1 or
80 mg/m² d1, 8, 15 q3w (4–8 cycles)^b



BEV 15 or 7.5 mg/kg IV q3w for up to 36 cycles (2 years)
or until disease progression or unacceptable toxicity

Patients without progression at cycle 36 could
continue therapy after discussion with the Steering Committee

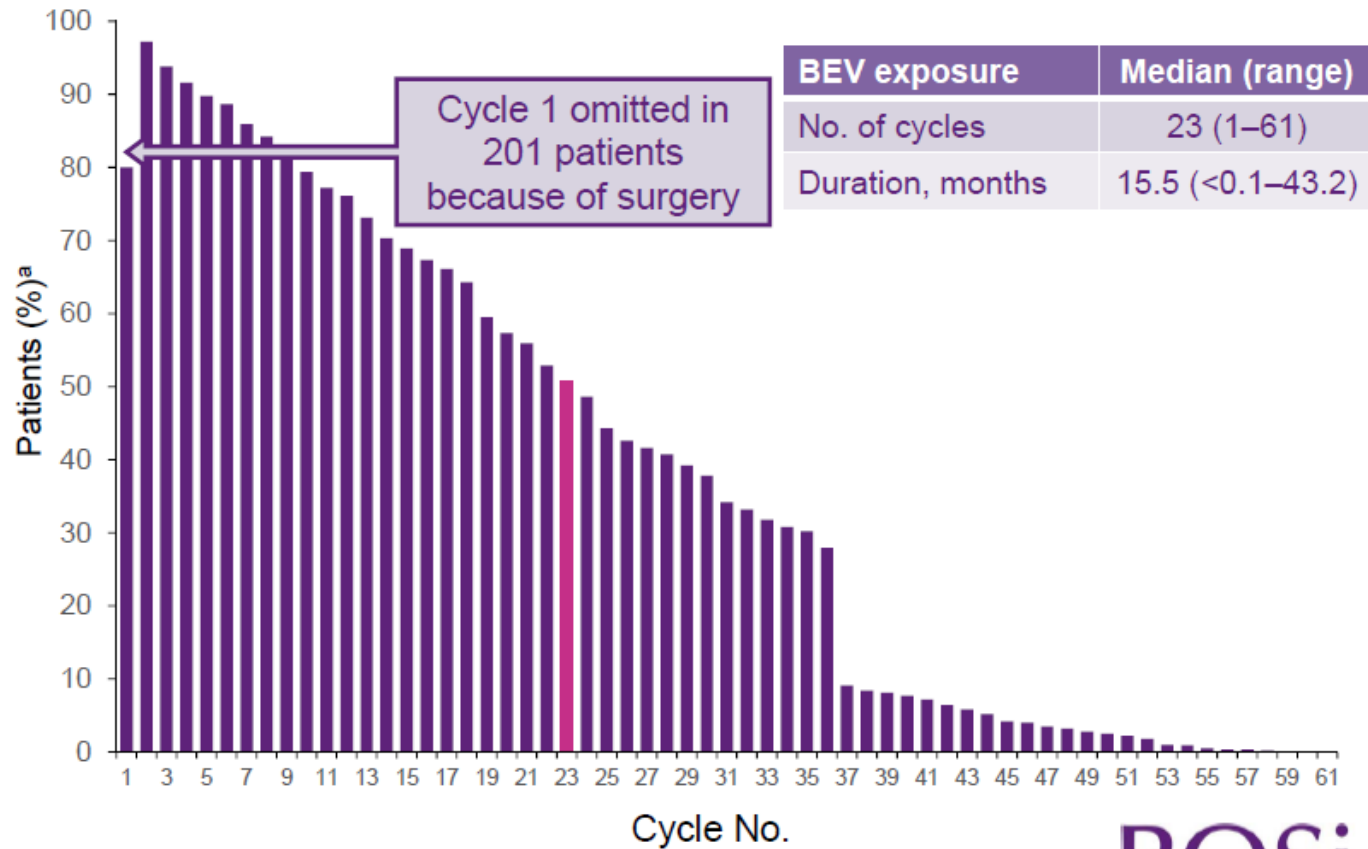
- Primary endpoint: Safety (AEs by NCI-CTCAE version 4.03)
- Secondary endpoints: PFS, ORR, duration of response, overall survival
- Exploratory objectives: Optional translational research

^aCisplatin permitted in patients with hypersensitivity to carboplatin

^bA change from one paclitaxel regimen to the alternative during the study was not permitted
ECOG PS = Eastern Cooperative Oncology Group performance status; ORR = overall response rate

Rosia study

7 Bevacizumab exposure by cycle



Exposure :

53% of pts above 15 m

Median PFS – 26 m

^aDenominator at each cycle is 1021

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H-P-L follow up

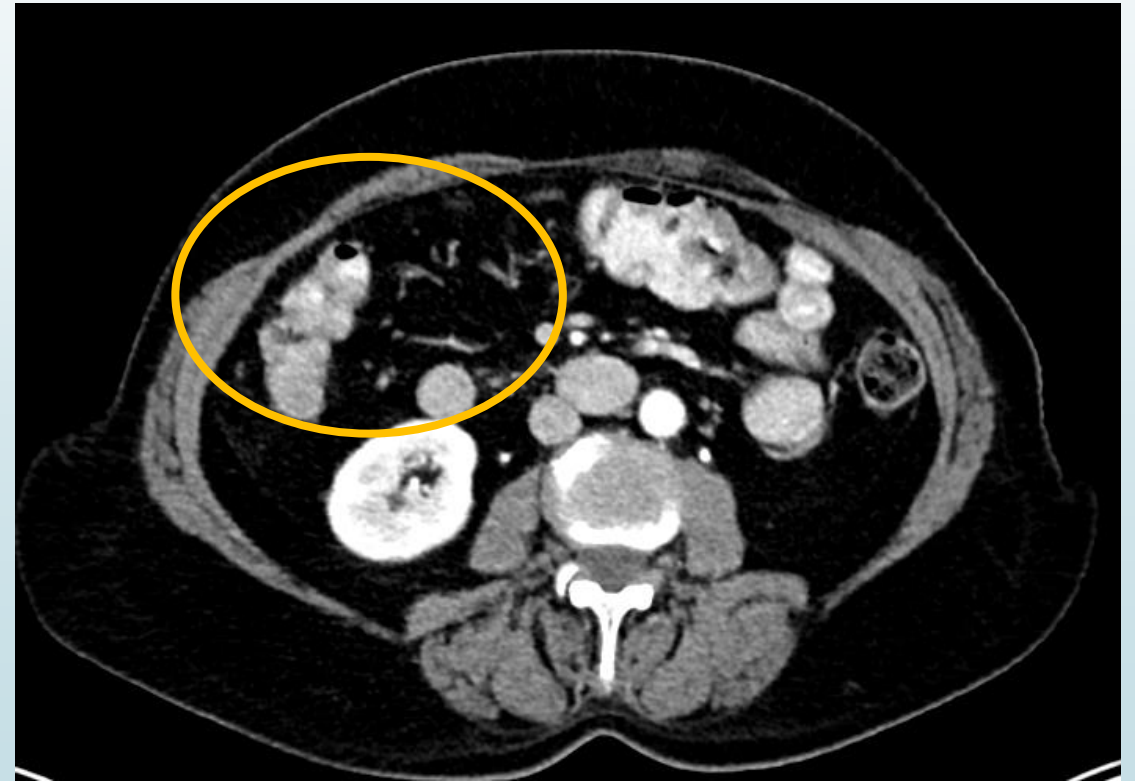
- ▶ Request for bevacizumab authorized by insurance for 3 more months
- ▶ Ongoing bevacizumab (since 5.2.2014)
- ▶ Tolerance – good (gr 2 fatigue for 3 days post bev)
- ▶ PET CT 12.2015 – no evidence of active disease
- ▶

Imaging

8 days post operation



12.2015 2 years post operation



Tumor markers

Full Name	Units	29/12/2013 15:08 סרום 840157	05/02/2014 09:29 סרום 871664	19/02/2014 09:28 סרום 884915	19/03/2014 09:29 סרום 909377	30/04/2014 09:48 סרום 943876	22/05/2014 10:27 סרום 962218	09/07/2014 09:20 סרום 201506	30/07/2014 09:29 סרום 219003	20/08/2014 10:26 סרום 236509	10/09/2014 12:24 סרום 253303
CA 125 - new	U/ml	1950.4 H	511.6 H*	153.1 H*	16.6	13.1	13.4	12.4	12.2	11.8	10.7
CA 19-9 (new)	U/ml										3.1
CA 15-3 - new	U/ml	68.8 H	45.9 H	37.3 H				17.3			17.8
CEA - new	ng/ml										1.2

Full Name	Units	29/04/2015 13:06 סרום 851297	20/05/2015 10:30 סרום 869676	10/06/2015 12:24 סרום 887854	01/07/2015 11:04 סרום 905848	22/07/2015 10:22 סרום 934502	12/08/2015 13:00 סרום 925114	09/09/2015 13:39 סרום 978513	21/10/2015 12:49 סרום 212509	01/12/2015 16:50 סרום 248787	21/12/2015 13:18 סרום 266866
CA 125 - new	U/ml	11.4	11	14.5	13.4	13	13.5	12.7	15	11.8	11
CA 15-3 - new	U/ml	16.4	16.4	16	15.9	17.6	14.9		16.1		16.5
CEA - new	ng/ml				0.8					0.8	