

# Les « Scoops » en sénologie

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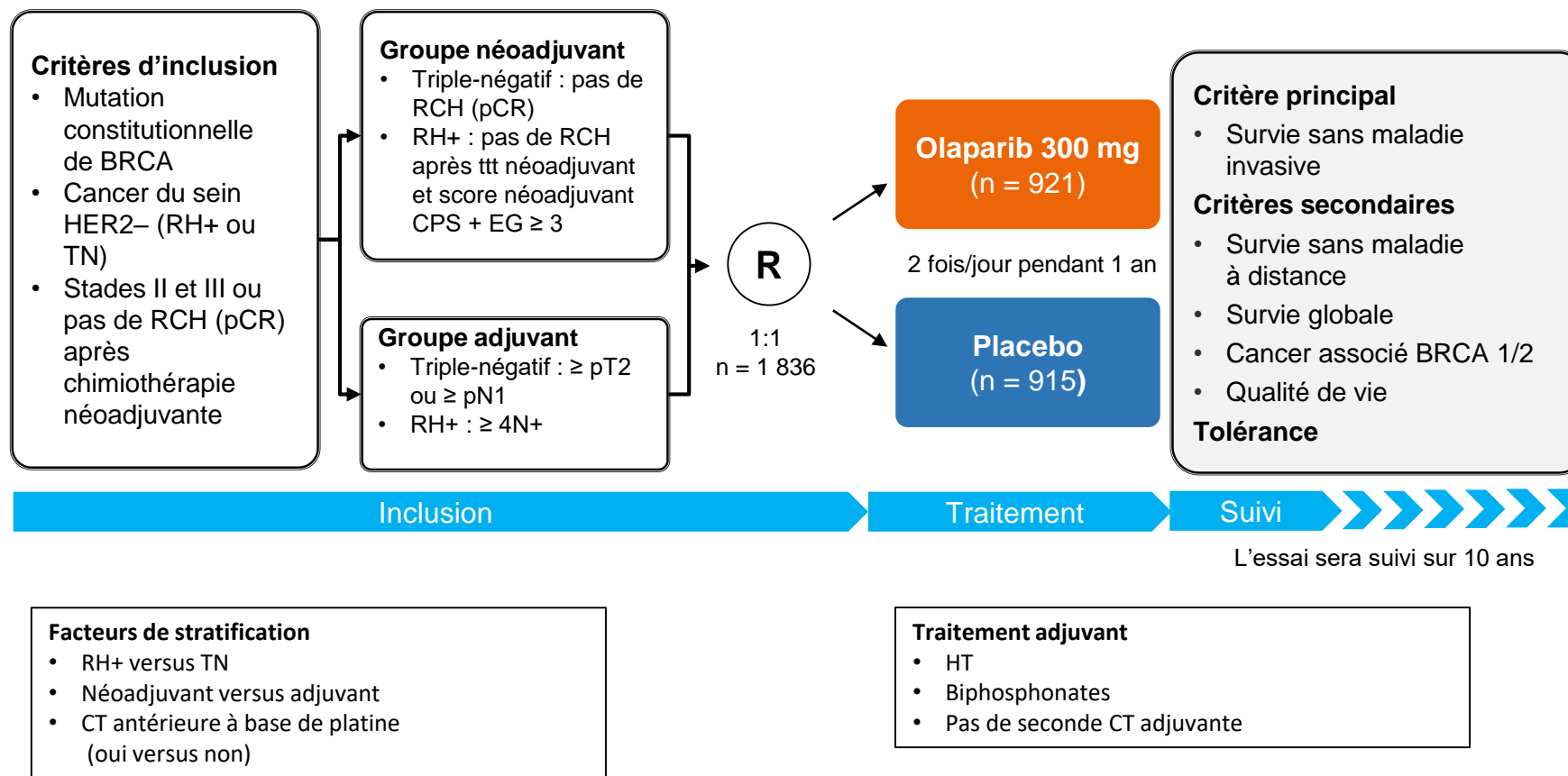
# ETUDE OLYMPIA

Tutt A et al., abstr. LBA1

# OLYMPIA

## Schéma de l'étude

### Étude de phase III randomisée en double aveugle



# OLYMPIA

## Population de l'étude

### Caractéristiques cliniques

	Olaparib (N = 921)	Placebo (N = 915)
Age, years, median (interquartile range)	42 (36–49)	43 (36–50)
<b>BRCA gene affected in germline</b>		
BRCA1	657 (71.3%)	670 (73.2%)
BRCA2	261 (28.3%)	239 (26.1%)
BRCA1 and BRCA2	2 (0.2%)	5 (0.5%)
<b>Primary breast cancer surgery</b>		
Mastectomy	698 (75.8%)	673 (73.6%)
Conservative surgery only	223 (24.2%)	240 (26.2%)
Missing	0 (0.0%)	2 (0.2%)
<b>Hormone receptor status*</b>		
Hormone receptor $\geq$ 1% / HER2- <sup>†</sup>	168 (18.2%)	157 (17.2%)
Triple Negative Breast Cancer <sup>†</sup>	751 (81.5%)	758 (82.8%)
<b>Menopausal status (female only)</b>		
Premenopausal	572/919 (62.2%)	553/911 (60.7%)
Postmenopausal	347/919 (37.8%)	358/911 (39.3%)
<b>Prior chemotherapy</b>		
Adjuvant (ACT)	461 (50.1%)	455 (49.7%)
Neoadjuvant (NACT)	460 (49.9%)	460 (50.3%)
Anthracycline and taxane regimen	871 (94.6%)	849 (92.8%)
Neo(adjuvant) platinum-based therapy	247 (26.8%)	239 (26.1%)
<b>Concurrent endocrine therapy (HR-positive only)</b>	146/168 (86.9%)	142/157 (90.4%)

### Caractéristiques anatomopathologiques

#### CPS+EG score\* (Neoadjuvant only)

	Olaparib (n = 460)	Placebo (n = 460)
<b>HR+/HER2-</b>		
CPS+EG score $\leq$ 2 <sup>†</sup>	13 (2.8%)	6 (1.3%)
<b>CPS+EG score of 3 or 4</b>	<b>88 (19.1%)</b>	<b>85 (18.5%)</b>
CPS+EG score of 5 or 6	3 (0.7%)	1 (0.2%)
Not recorded	0 (0.0%)	0 (0.0%)
<b>Triple Negative Breast Cancer</b>		
CPS+EG score $\leq$ 2	151 (32.8%)	144 (31.3%)
<b>CPS+EG score of 3 or 4</b>	<b>179 (38.8%)</b>	<b>197 (42.8%)</b>
CPS+EG score of 5 or 6	19 (4.1%)	14 (3.0%)
Not recorded	7 (1.5%)	13 (2.8%)

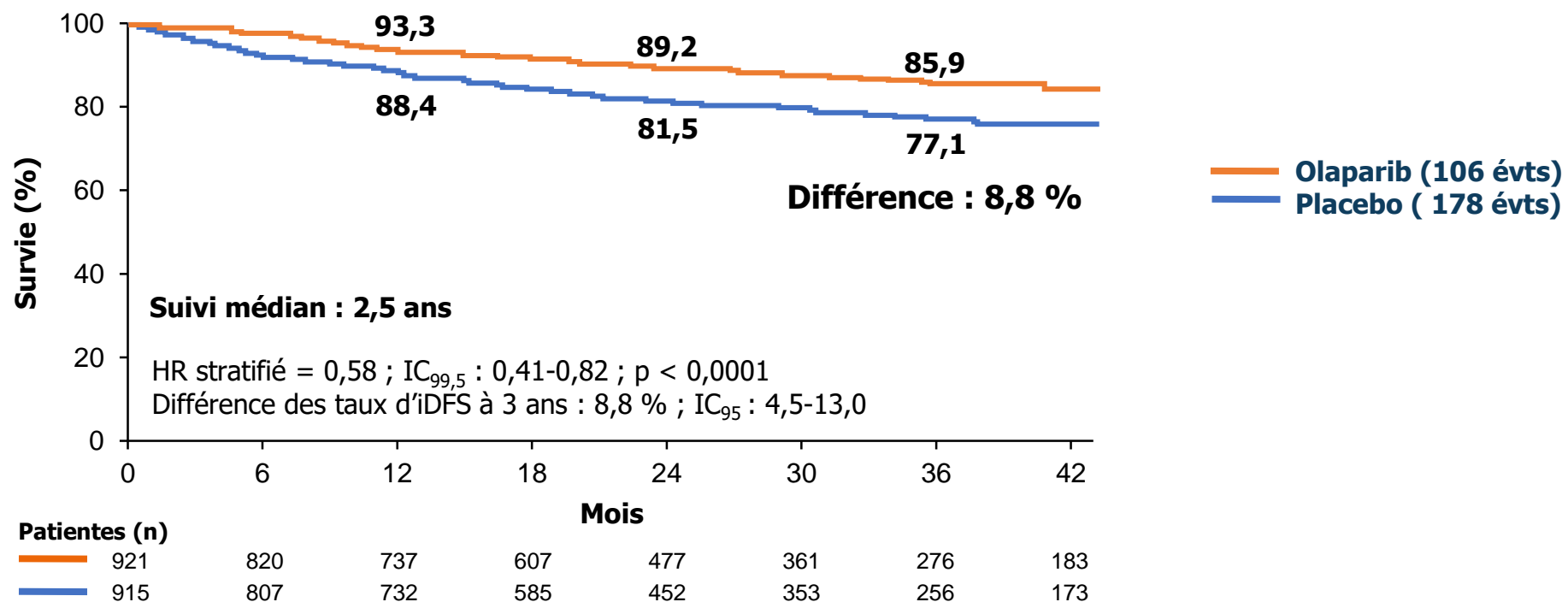
#### Pathological AJCC stage (Adjuvant only)

	Olaparib (n = 461)	Placebo (n = 455)
0	0 (0.0%)	0 (0.0%)
IA*	5 (1.1%)	2 (0.4%)
IB	15 (3.3%)	11 (2.4%)
<b>IIA</b>	<b>264 (57.3%)</b>	<b>250 (54.9%)</b>
<b>IIB</b>	<b>70 (15.2%)</b>	<b>75 (16.5%)</b>
IIIA	73 (15.8%)	70 (15.4%)
IIIB	0 (0.0%)	2 (0.4%)
IIIC	28 (6.1%)	41 (9.0%)
NA <sup>†</sup>	6 (1.3%)	4 (0.9%)

# OLYMPIA

## Résultats

**Critère principal: Survie sans maladie invasive (SSMi)**





# OLYMPIA

## Résultats

### Types d'évènements

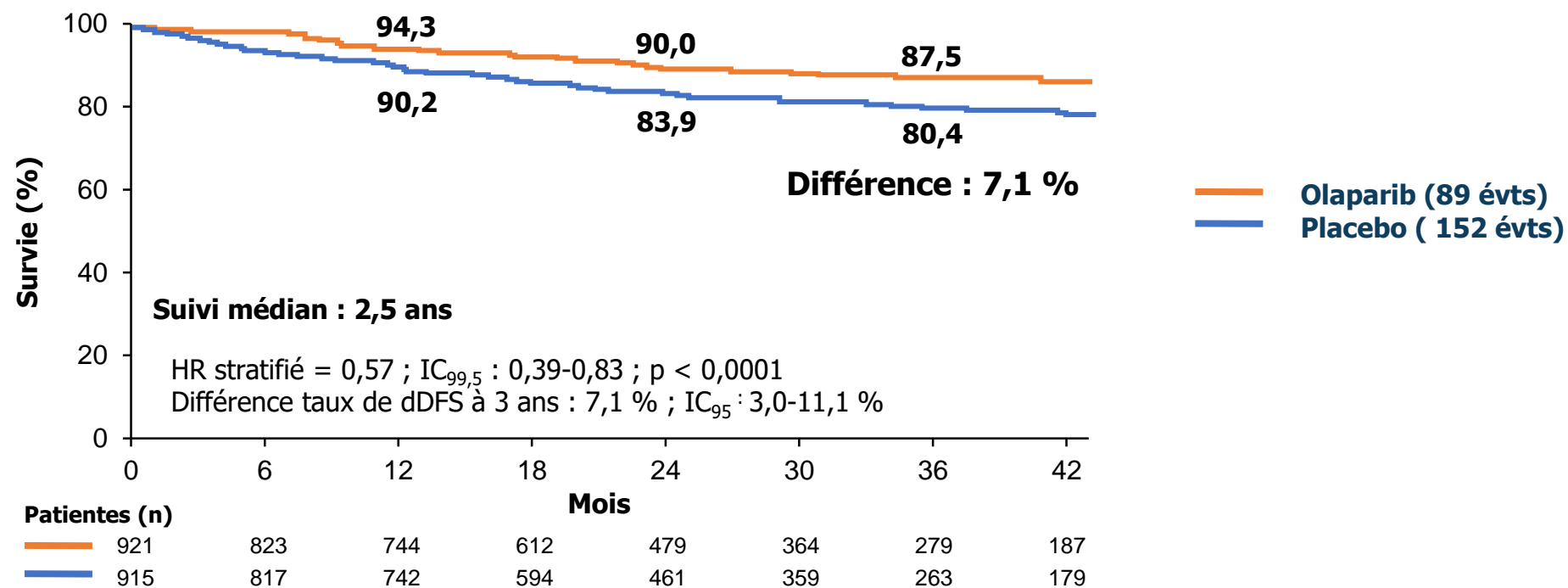
	<b>Olaparib (N = 921)</b>	<b>Placebo (N = 915)</b>
<b>Number of patients with a first IDFS event</b>	<b>106 (11.5%)</b>	<b>178 (19.5%)</b>
<b>Distant recurrence</b>	<b>72 (7.8%)</b>	<b>120 (13.1%)</b>
Distant CNS Recurrence	22 (2.4%)	36 (3.9%)
Distant excluding CNS Recurrence	50 (5.4%)	84 (9.2%)
Regional (Ipsilateral) Recurrence	6 (0.7%)	14 (1.5%)
Local (Ipsilateral) Recurrence	7 (0.8%)	11 (1.2%)
Contralateral invasive breast cancer	8 (0.9%)	12 (1.3%)
Second primary non-breast malignancies	11 (1.2%)	21 (2.3%)
Ovarian	1 (0.1%)	4 (0.4%)
Peritoneal	0 (0.0%)	0 (0.0%)
Fallopian tube	1 (0.1%)	4 (0.4%)
Other	9 (1.0%)	13 (1.4%)
Deaths without a prior IDFS event*	2 (0.2%)	0 (0.0%)

There can only be one first IDFS event per patient  
\*1 death due to cardiac arrest and 1 patient with unknown cause of death

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## Résultats

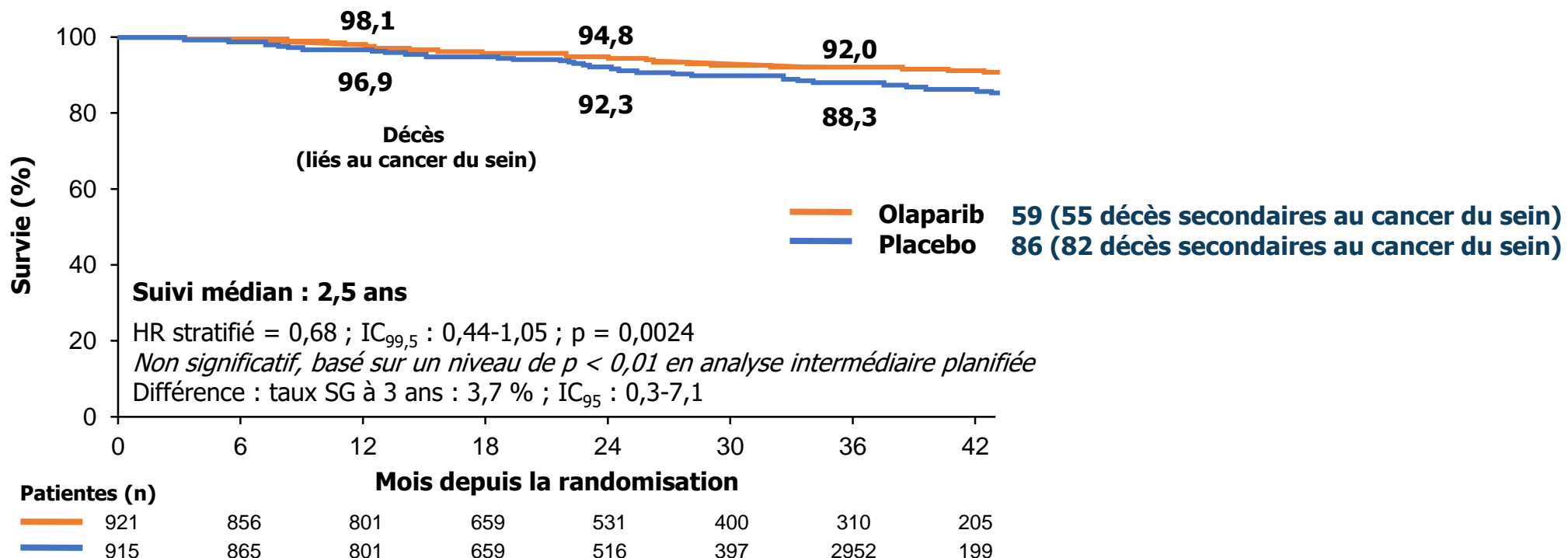
Critère secondaire: *Survie sans maladie à distance (SSMd)*



# OLYMPIA

## Résultats

Critère secondaire: Survie globale (SG)



- Moins de décès dans le bras olaparib que dans le bras placebo, mais différence non statistiquement significative
- Suivi de l'étude en cours



# OLYMPIA

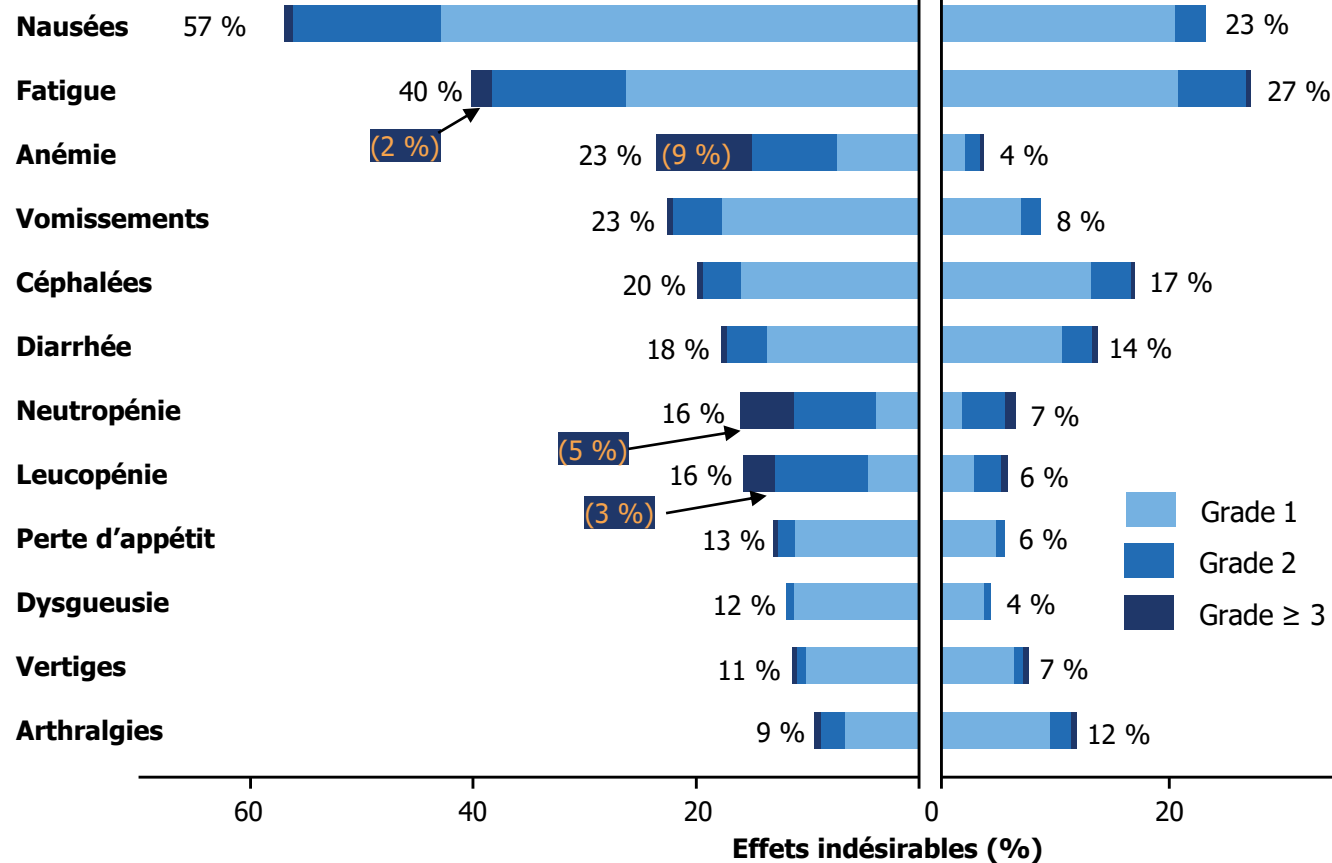
## Résultats

### Tolérance

#### Effets indésirables tous grades ≥ 10 %

Olaparib

Placebo



	Olaparib (N = 911)	Placebo (N = 904)
Any adverse event	835 (91.7%)	753 (83.3%)
Serious adverse event (SAE)	79 (8.7%)	76 (8.4%)
Adverse event of special interest	30 (3.3%)	46 (5.1%)
MDS/AML	2 (0.2%)	3 (0.3%)
Pneumonitis	9 (1.0%)	11 (1.2%)
New primary malignancy	20 (2.2%)	32 (3.5%)
Grade ≥ 3 adverse event	221 (24.3%)	102 (11.3%)
Grade 4 adverse event	17 (1.9%)	4 (0.4%)
Adverse event leading to permanent discontinuation of treatment*	90 (9.9%)	38 (4.2%)
Adverse event leading to death†	1 (0.1%)	2 (0.2%)

\*Adverse events leading to permanent discontinuation of treatment in the olaparib group that occurring in > 1% were; nausea, anemia and fatigue

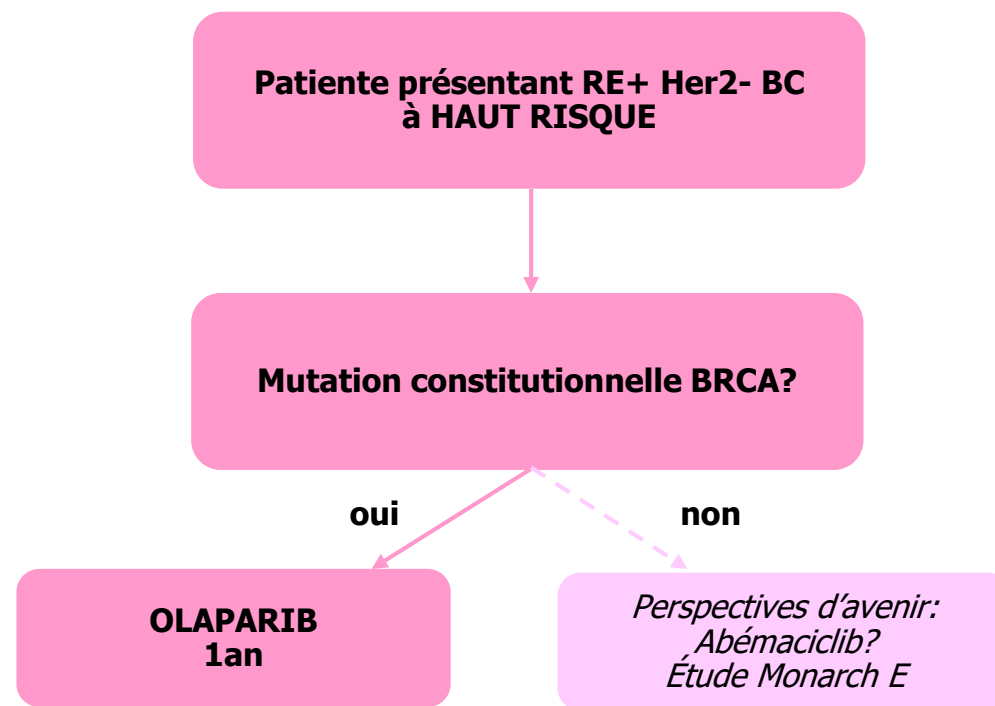
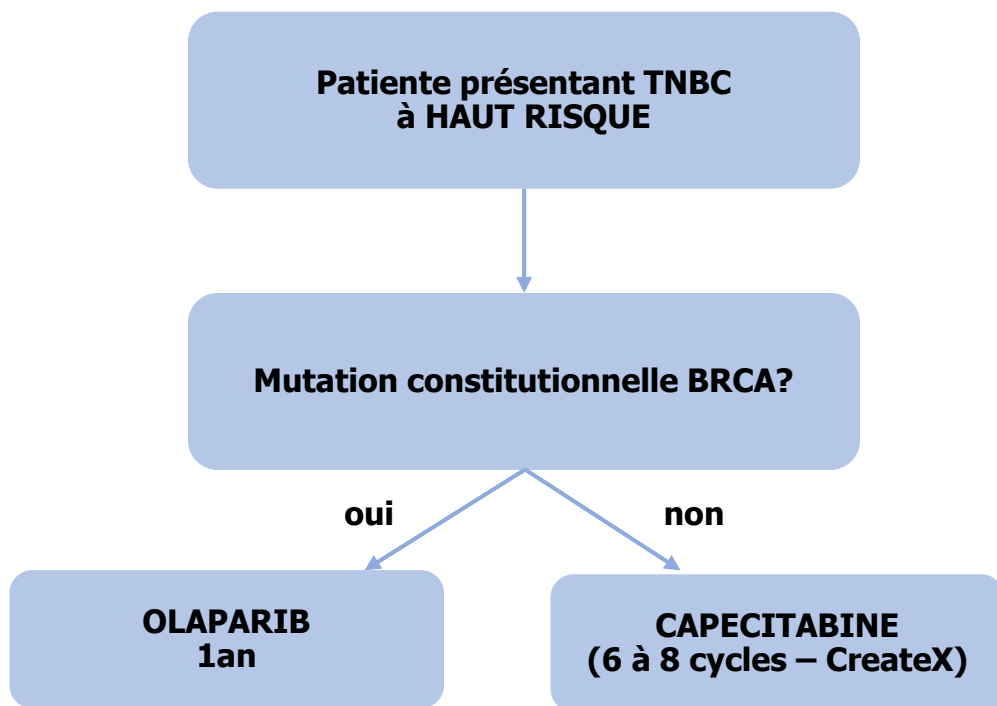
†Adverse events leading to death are cardiac arrest (olaparib, n = 1), AML (placebo, n = 1), and ovarian cancer (placebo, n = 1)

*Suivi pendant 10 ans*

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## conclusions-discussions

### ■ Changement de pratique



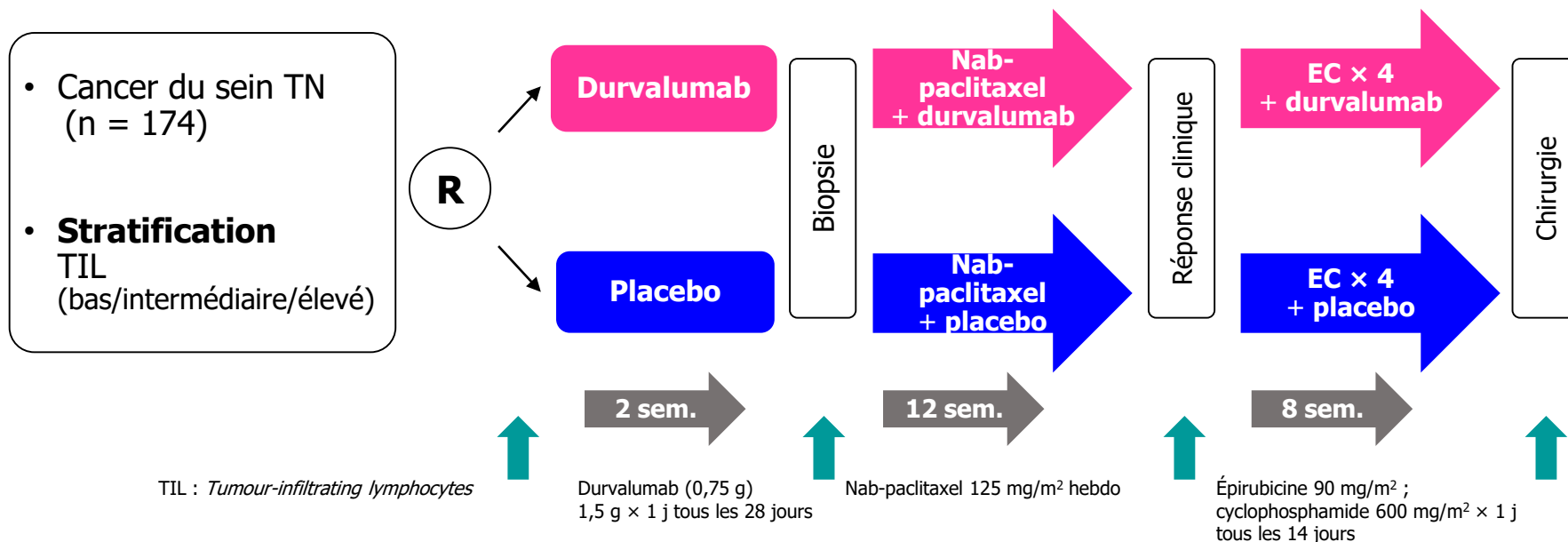
# ETUDE GUEPARNUEVO

Loibl S et al., abstr. 506

# GueparNUEVO

## Schéma de l'étude

Etude de phase II randomisée évaluant l'adjonction en néo adjuvant du durvalumab à la chimiothérapie dans les cancers du sein triple négatifs

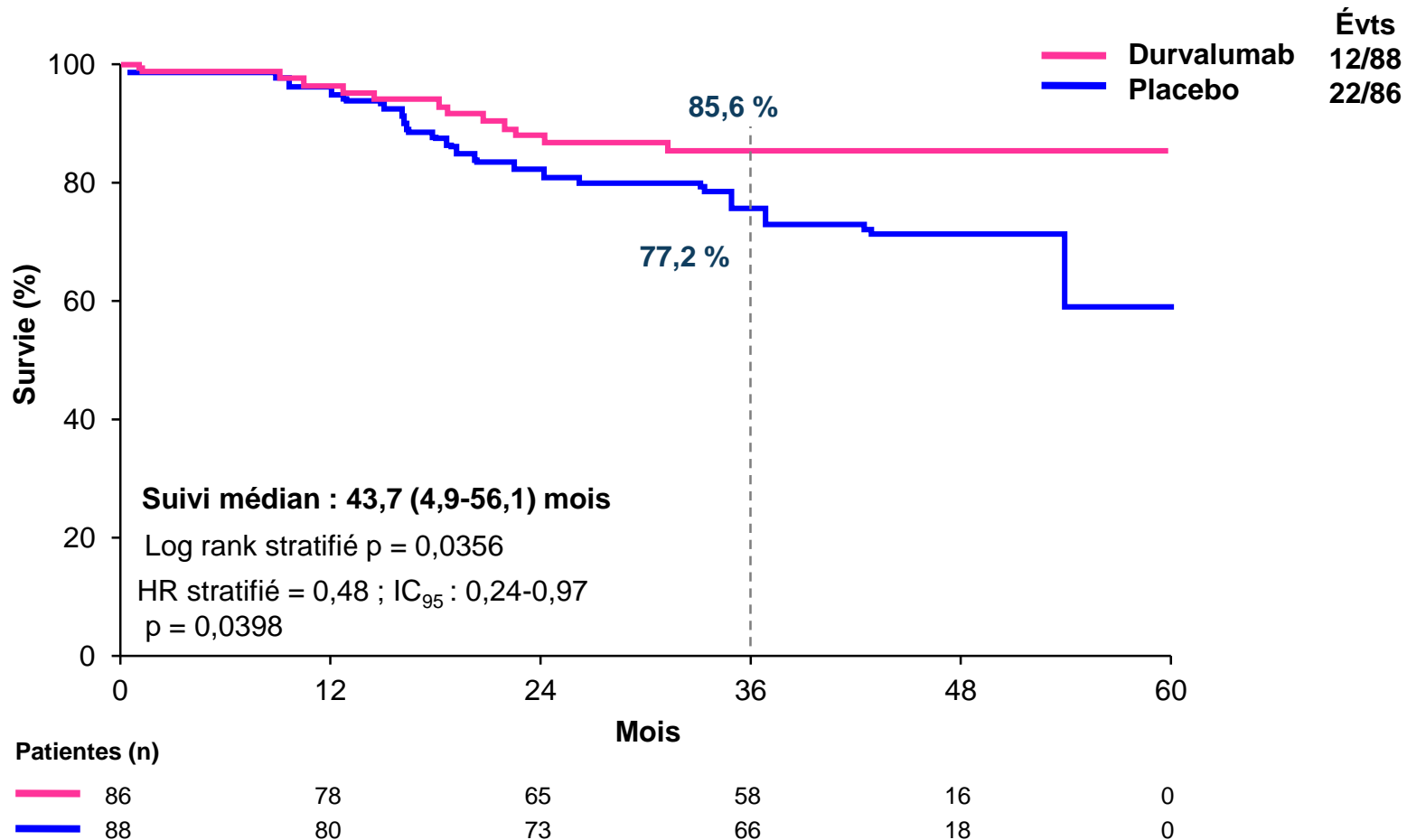


- Critère principal : taux de réponse complète pathologique (pCR) [ypT0, ypN0] : 53% vs 44% NCS
- **Principaux critères secondaires: SSMi, SSMd, SG**

# GueparNUEVO

## Résultats de survie

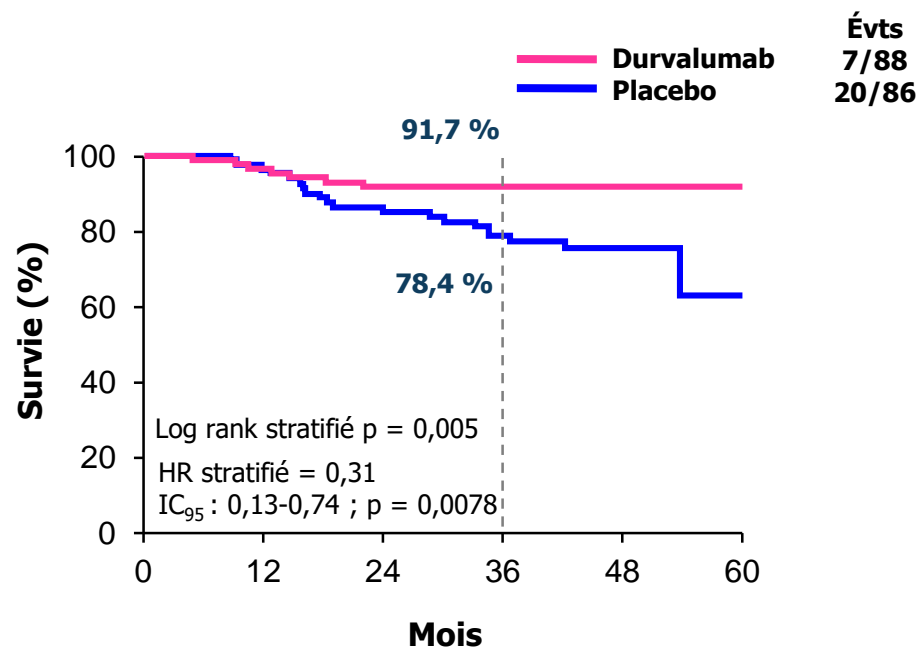
Survie sans maladie invasive (SSMi)



# GueparNUEVO

## Résultats de survie

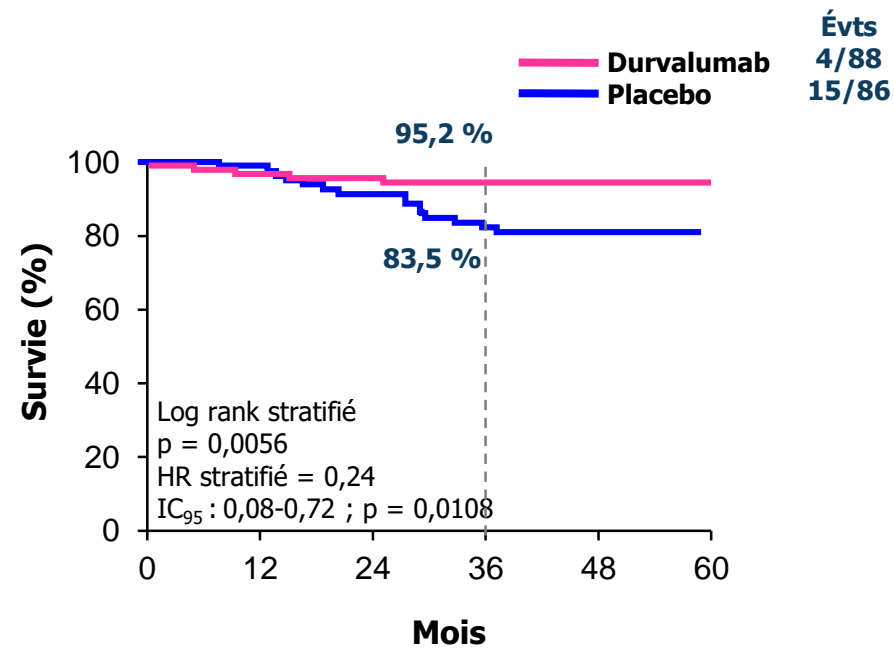
### Survie sans maladie invasive à distance



Patientes (n)

—	86	78	67	59	16	0
—	88	80	76	70	20	0

### Survie globale



Patientes (n)

—	86	78	67	59	16	0
—	88	80	76	70	20	0



# GeparNUEVO

## Conclusions - Discussions

- **Résultats encourageants** (attendons résultats des phases III Impassion 31 et Keynote 522)
- Résultats en faveur d'une amélioration de la survie avec checkpoint inhibiteurs sans majoration majeure de la pCR
- Place de l'immunothérapie en adjuvant des TNBC