



EPICS

GLOBAL PERSPECTIVES IN GYNECOLOGIC MALIGNANCIES

September 2020

- > On September 25, 2020, during the European Society for Medical Oncology (ESMO) Virtual Congress, Aptitude Health convened a group of experts in gynecologic malignancies to a small closed-session panel
- > The goal of the panel was to discuss the latest therapeutic developments and translational research in gynecologic malignancies and explore how emerging data will affect ongoing research, development of new compounds, and future treatment paradigms

FACULTY EXPERTS

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Chair
Robert Coleman, MD
Texas Oncology
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Anna Fagotti, MD, PhD
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Christina Fotopoulou, MD, PhD
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Jonathan Ledermann, MD
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Mansoor Mirza, MD
Copenhagen University Hospital
Copenhagen, Denmark



Bradley Monk, MD
Creighton University School of Medicine
University of Arizona College of Medicine
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Matt Powell, MD
Washington University School
of Medicine
St. Louis, MO, US



Eric Pujade-Lauraine, MD, PhD
University of Paris Descartes
Paris, France



Jalid Sehouli, MD
Charité Comprehensive
Cancer Center
Berlin, Germany

AGENDA

Time (CDT)	Topic	Speaker/Moderator
9.00 AM – 9.05 AM	Introduction	Robert Coleman, MD
9.05 AM – 9.20 AM	Early Stage Ovarian Cancer	Christina Fotopoulou, MD, PhD
9.20 AM – 9.40 AM	Key Questions and Topics for Discussion	Robert Coleman, MD
9.40 AM – 9.45 AM	Key Takeaways	Christina Fotopoulou, MD, PhD, Robert Coleman, MD
9.45 AM – 10.00 AM	First-Line Treatments and Maintenance Therapy for Advanced Ovarian Cancer	Mansoor Mirza, MD
10.00 AM – 10.30 AM	Key Questions and Topics for Discussion	Robert Coleman, MD
10.30 AM – 10.35 AM	Key Takeaways	Mansoor Mirza, MD, Robert Coleman, MD
10.35 AM – 10.50 AM	Treatment Strategies for Relapsed Ovarian Cancer	Jonathan Ledermann, MD
10.50 AM – 11.25 AM	Key Questions and Topics for Discussion	Robert Coleman, MD
11.25 AM – 11.30 AM	Key Takeaways	Jonathan Ledermann, MD, Robert Coleman, MD
11.30 AM – 11.45 AM	BREAK	All
11.45 AM – 11.55 AM	Advanced Cervical Cancer: Current and Future Treatment	Bradley Monk, MD
11.55 AM – 12.30 PM	Key Questions and Topics for Discussion	Robert Coleman, MD
12.30 PM – 12.35 PM	Key Takeaways	Bradley Monk, MD, Robert Coleman, MD
12.35 PM – 12.50 PM	Current Treatment and Future Directions for Advanced Endometrial Cancer	Matthew Powell, MD
12.50 PM – 1.20 PM	Key Questions and Topics for Discussion	Robert Coleman, MD
1.20 PM – 1.25 PM	Key Takeaways	Matthew Powell, MD, Robert Coleman, MD
1.25 PM – 1.30 PM	Conclusions and Wrap-up	Robert Coleman, MD

EARLY STAGE OVARIAN CANCER (1/5)

- > Primary management of early ovarian cancer (OC) is very important, as it can greatly increase overall survival

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- > A fertility-sparing approach should be offered and discussed with eligible pts (eg, young pts with early stage

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- > Adjuvant therapy with platinum-based chemotherapy is indicated for pts with early stage OC with high-risk

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- > In pts for whom the benefits of adjuvant chemotherapy remain uncertain, the ESGO/ESMO guidelines

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- > *BRCA* testing is considered important in early stage OC. However, there is no consensus for using

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**First-Line Treatments and
Maintenance Therapy for
Advanced Ovarian Cancer**

FIRST-LINE TREATMENTS AND MAINTENANCE THERAPY FOR ADVANCED OVARIAN CANCER (1/5)

- > There are different histologic subtypes of OC: low- or high-grade serous, mucinous, endometrial, and/or clear cell

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FIRST-LINE TREATMENTS AND MAINTENANCE THERAPY FOR ADVANCED OVARIAN CANCER (2/5)

- > The PAOLA-1 trial showed the benefits of a combination treatment with bevacizumab + the PARPi olaparib.

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FIRST-LINE TREATMENTS AND MAINTENANCE THERAPY FOR ADVANCED OVARIAN CANCER (3/5)

- > *BRCA* mutation testing is considered very important and should be done at diagnosis for all types of OC, as it

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FIRST-LINE TREATMENTS AND MAINTENANCE THERAPY FOR ADVANCED OVARIAN CANCER (4/5)

- > In France, similar to UK, pts are tested for both germline and somatic *BRCA* mutations. The

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FIRST-LINE TREATMENTS AND MAINTENANCE THERAPY FOR ADVANCED OVARIAN CANCER (5/5)

- > The benefits of IO in OC were recently investigated in clinical trials, and more studies are currently ongoing

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Treatment Strategies for Relapsed Ovarian Cancer

TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (1/6)

- > Relapsed OC is a difficult-to-treat disease, as it evolves during treatment. The intervals between treatments

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TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (2/6)

- > The experts agreed on the significant limitations of classifying pts as platinum sensitive or resistant only on

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TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (3/6)

- > Pts who are not suitable for platinum chemotherapy have poor response rates and poor OS. The common

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TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (4/6)

- > The experts discussed their treatment choice in first, second, and subsequent lines for relapsed OC

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TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (5/6)

- > One expert from UK prefers to use bevacizumab in second line after platinum treatment, to allow pts a TFI and better quality

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TREATMENT STRATEGIES FOR RELAPSED OVARIAN CANCER (6/6)

- > In US, clinicians can use either bevacizumab or PARPi in frontline settings. The choice is guided by the

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Advanced Cervical Cancer – Current and Future Treatment

ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (1/6)

- > Cervical cancer (CC) is one of the most common types of gynecologic malignancies worldwide, with a mortality

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ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (2/6)

- > New treatments for the second-line setting in M/R CC are also under investigation in ongoing clinical trials

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ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (3/6)

- > Tisotumab vedotin (TV), an antibody-drug conjugate (ADC) against tissue factor, is currently under

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ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (4/6)

- > The experts were asked to express their opinions on the benefits of using IO in M/R CC pts

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ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (5/6)

- > Treatment combination of PD-1 and CTLA-4 has demonstrated pt responses similar to TV. The experts were

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ADVANCED CERVICAL CANCER – CURRENT AND FUTURE TREATMENT (6/6)

- > There was general consensus that the treatment landscape in CC will change in the near

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Current Treatment and Future Directions for Advanced Endometrial Cancer

CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (1/6)

- > Endometrial cancer (EC) incidence is rapidly rising with the aging population and the increasing

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CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (2/6)

- > Carboplatin + paclitaxel is the current standard of care for frontline advanced EC

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CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (3/6)

- > Adjuvant chemotherapy may not be beneficial for all advanced EC pts, but may depend on the

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CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (4/6)

- Hormonal therapies

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CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (5/6)

- > Among the DNA repair agents, treatment with cediranib monotherapy or cediranib + olaparib is

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CURRENT TREATMENT AND FUTURE DIRECTIONS FOR ADVANCED ENDOMETRIAL CANCER (6/6)

- > Pts with specific mutations respond differently to treatment; therefore, it is crucial to perform molecular tests to

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