

# Olaparib maintenance extends PFS by estimated three years in advanced ovarian cancer

October 22 2018

	Median, months			HR (95% CI) P value
	Olaparib (N=260)	Placebo (N=131)	Between-group difference	
PFS, investigator assessed (51% maturity)	NR	13.8	NC	0.30 (0.23–0.41) P<0.0001
PFS, BICR* (38% maturity)	NR	14.1	NC	0.28 (0.20–0.39) P<0.0001
TFST	51.8	15.1	36.7	0.30 (0.22–0.40) P<0.0001
PFS2 (31% maturity)	NR	41.9	NC	0.50 (0.35–0.72) P=0.0002

\*Sensitivity analysis using BICR  
BICR, blinded independent central review; HR, hazard ratio; NC, not calculable; NR, not reached; PFS, progression-free survival; PFS2, time from randomization to second progression or death; TFST, time to first subsequent therapy or death

Two-year maintenance therapy with olaparib, a PARP (poly ADP ribose polymerase) inhibitor, olaparib, led to a substantial, unprecedented improvement in progression-free survival (PFS) in newly diagnosed patients with advanced ovarian cancer and a BRCA1 or 2 mutation, results from the phase 3 SOLO-1 trial show. Credit: © European Society for Medical Oncology

Two-year maintenance therapy with olaparib, a PARP (poly ADP ribose polymerase) inhibitor, olaparib, led to a substantial, unprecedented

improvement in progression-free survival (PFS) in newly diagnosed patients with advanced ovarian cancer and a BRCA1 or 2 mutation, results from the phase 3 SOLO-1 trial show.

"The median PFS for patients who received placebo was only 13.8 months while the median PFS for those who received olaparib was not reached but looks to be approximately three years longer than the [placebo group](#) [HR was 0.30; 95% CI: 0.23, 0.41; p

Citation: Olaparib maintenance extends PFS by estimated three years in advanced ovarian cancer (2018, October 22) retrieved 26 January 2023 from <https://medicalxpress.com/news/2018-10-olaparib-maintenance-pfs-years-advanced.html>

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