LBA37
Atezolizumab (atezo) combined with platinum-based chemotherapy (CT) and maintenance niraparib for recurrent ovarian cancer (rOC) with a platinum-free interval (TFIp) >6 months: Primary analysis of the double-blind placebo (pbo)-controlled ENGOT-Ov41/GEICO 69-0/ANITA phase III trial


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Background
Standard therapy for late-relapsing (TFIp >6 mo) rOC includes PARPi maintenance if disease responds to platinum-based CT. ANITA (NCT03598270) is the first-reported phase 3 trial evaluating atezo with platinum-based CT and maintenance PARPi in late-relapsing rOC.

Methods
Eligible pts had measurable high-grade serous, endometrioid or undifferentiated rOC, ≤2 prior CT lines (most recent including platinum) and TFIp >6 mo. Prior PARPi for rOC and/or prior immune checkpoint inhibitor were prohibited. Pts were stratified by carboplatin (carbo) doublet (paclitaxel, gemcitabine or pegylated liposomal doxorubicin [PLD]), TFIp (6–12 vs >12 mo), BRCA status (mutated vs non-mutated) and PD-L1 status (PD-L1-expressing immune cells on <1% vs ≥1% tumour area vs non-informative by SP142). Pts were randomised 1:1 to a carbo doublet + atezo or pbo for 6 cycles followed (in pts without progression on CT) by maintenance niraparib at an individualised starting dose + atezo or pbo until disease progression. The atezo dose was 1200 mg q3w or 840 mg q2w depending on the CT regimen.

Results
Between Nov 2018 and Jan 2022, 417 pts were randomised (14% BRCAm, 36% PD-L1+, 66% TFIp >12 mo, 11% prior PARPi after front-line CT, 54% prior bevacizumab); most (71%) received carbo–PLD and 74% began maintenance. At the data cut-off (15 Apr 2023), median follow-up was 36 mo. PFS results (Table) were consistent in key subgroups. Overall response to CT was 43% (95% CI 36–49%) and 45% (95% CI 39–52%) in the pbo and atezo arms, respectively. The safety profile was as expected from prior experience of these drugs.

<table>
<thead>
<tr>
<th>Events, n (%)</th>
<th>Pbo + CT (n=209)</th>
<th>Atezo + CT (n=208)</th>
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<tbody>
<tr>
<td>PFS</td>
<td>174 (83)</td>
<td>170 (82)</td>
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<tr>
<td>Hazard ratio (95% CI)</td>
<td>0.89 (0.71–1.10); p=0.28</td>
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</table>

Table: LBA37
**Conclusions**

Combining atezo with CT and maintenance niraparib for late-relapsing rOC did not significantly improve PFS or ORR.

**Clinical trial identification**

NCT03598270, EudraCT 2018-000366-11.

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GEICO.

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**Disclosure**

and Subject Editor Gyn ESMO Guidelines.