A randomized phase II study of secondary cytoreductive surgery (CRS) in patients with relapsed ovarian cancer who have progressed on PARP inhibitor maintenance: KGOG 3067/SOCCER-P trial

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• Although recent two phase 3 randomized controlled trials showed survival benefit of secondary cytoreductive surgery (CRS) in first relapsed ovarian cancer, the patients who received PARP inhibitor (PARPi) as first-line maintenance were not included in these trials.
• The treatment consensus for recurrence after PARPi has not been established because subsequent platinum-based chemotherapy is not sensitive in relapsed patients after PARPi maintenance.
• Therefore, there is a significant need for optimal strategy including secondary CRS in patients whose cancer progresses while using a PARPi. The aim of SOCCER-P is to find out whether secondary CRS is beneficial in patients who have progressed on PARPi maintenance.

BACKGROUND

UNMET NEED

• Survival benefit of surgery in PARPi naive relapsed OC
• Reduce tumor burden
• Reduce or eliminate resistant clones
• Decreased response to subsequent CTX

TRIAL SCHEMA

Cytoreductive surgery (n=62)

No surgery (n=62)

Recurrent ovarian, fallopian tube, or peritoneal cancer

R 1:1

TRIAL ENDPOINTS

• First recurrence
• PFI (platinum-free interval) ≥ 6 month
• Progressed with prior PARPi or < 3 months after completion of PARPi
• Possible R0
  • AGO or Tia positive
  • AGO and Tia negative
    • If PI and designated radiologist reach consensus that recurrent tumor detected by CT could be completely resected, patients could be considered as possible R0

FUTURE DIRECTIONS FOR RESEARCH

• The trial is open and enrolling at centers in Korea
• This study is registered at clinicaltrials.gov: NCT05704621
• For additional information please contact: limpcho82@gmail.com

TRIAL SCHEM

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