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Submitted by:
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NCCN Guidelines Panel: Ovarian Cancer

On behalf of Genentech, Inc., I respectfully request the NCCN Ovarian Cancer Guideline Panel to review the enclosed recent presentation for Avastin® (bevacizumab) in platinum-sensitive, recurrent ovarian cancer.

- Coleman RL, Brady MF, Herzog TJ, et al. A Phase III randomized controlled clinical trial of carboplatin and paclitaxel alone or in combination with bevacizumab followed by bevacizumab and secondary cytoreductive surgery in platinum-sensitive, recurrent ovarian, peritoneal primary and fallopian tube cancer (Gynecologic Oncology Group 213). Presented at the 46th Annual Meeting on Women's Cancer in Chicago,IL; March 28-31, 2015. SGO Oral presentation.

Specific Changes:
There are no specific changes being requested. We are providing recently presented data on Avastin in platinum-sensitive, recurrent ovarian, peritoneal primary, and fallopian tube cancer for your review and consideration.

FDA Clearance:
Avastin is FDA approved in combination with paclitaxel, pegylated liposomal doxorubicin or topotecan for the treatment of women with platinum-resistant, recurrent, epithelial ovarian, fallopian tube, or primary peritoneal cancer, who received no more than two prior chemotherapy regimens. Please refer to the product prescribing information for the full FDA-approved indications and safety information.

- Full Avastin® prescribing information available at: http://www.gene.com/download/pdf/avastin_prescribing.pdf

Rationale:
In the Phase III Gynecologic Oncology Group study (GOG 213) in patients with platinum-sensitive, recurrent ovarian cancer, the addition of Avastin to chemotherapy (carboplatin and paclitaxel) improved median overall survival (OS) (42.2 months vs. 37.3 months; adjusted hazard ratio [HR_{adj}]=0.829, 95% CI 0.683-1.005), but results were not significant (p=0.056). There was a significant difference in progression-free survival (PFS) in patients receiving Avastin + chemotherapy vs chemotherapy alone (median: 13.8 months vs 10.4 months; HR_{adj}=0.61, 95% CI: 0.52 - 0.72, p<0.0001). The Grade ≥3 adverse events that occurred more frequently in the Avastin-treated group included infections, joint pain, proteinuria, hypertension, and thromboembolism. Additional data have been reported on the use of Avastin in platinum-sensitive ovarian cancer. [1-5]

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Respectfully submitted,

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Supplemental References

1. Aghajanian C, Blank SV, Goff BA, et al. OCEANS: a randomized, double-blind, placebo-controlled Phase III trial of chemotherapy with or without bevacizumab in patients with platinum-sensitive recurrent epithelial ovarian, primary peritoneal, or fallopian tube cancer. J Clin Oncol 2012;30:2039-2045. http://www.ncbi.nlm.nih.gov/pubmed/22529265.
2. Aghajanian C, Goff B, Nycum LR, et al. Final analysis of overall survival in OCEANS, a randomized Phase 3 trial of gemcitabine, carboplatin and bevacizumab followed by bevacizumab until disease progression in patients with platinum-sensitive recurrent ovarian cancer. Presented at the 45th Annual Meeting on Women's Cancer in Tampa, FL; March 22-25, 2014. SGO Oral presentation.
3. Eisenhauer EL, Zanagnolo V, Cohn DE, et al. A Phase II study of gemcitabine, carboplatin and bevacizumab for the treatment of platinum-sensitive recurrent ovarian cancer. Gynecol Oncol. Epub Date: [published online ahead of print] 2014. DOI # 10.1016/j.ygyno.2014.05.030. http://www.ncbi.nlm.nih.gov/pubmed/24910452.
4. Hagemann AR, Novetsky AP, Zighelboim I, et al. Phase II study of bevacizumab and pemetrexed for recurrent or persistent epithelial ovarian, fallopian tube or primary peritoneal cancer. Gynecol Oncol 2013;131:535-540. http://www.ncbi.nlm.nih.gov/pubmed/24096113.
5. del Carmen MG, Micha J, Small L, et al. A Phase II clinical trial of pegylated liposomal doxorubicin and carboplatin plus bevacizumab in patients with platinum-sensitive recurrent ovarian, fallopian tube, or primary peritoneal cancer [supplementary appendix appears online]. Gynecol Oncol 2012;126:369-74.

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