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NCCN Guidelines Panel: Ovarian Cancer

On behalf of Genentech, I respectfully request the NCCN Ovarian Cancer Guideline Panel to review the enclosed data for the use of Avastin® (Bevacizumab) in women with recurrent ovarian, primary peritoneal, or fallopian tube cancer.

Specific Changes: Consider updating page MS-14 which currently states “Several trials are assessing combination therapy with bevacizumab for recurrent ovarian cancer (i.e., OCEANS, AURELIA).” as results from these trials are now available. Consider data from the OCEANS and AURELIA trials for updates to Acceptable Recurrence Therapies on page OV-E.

FDA Clearance: FDA has not approved Avastin in combination with chemotherapy for the treatment of either ovarian, primary peritoneal, or fallopian tube cancers. Please refer to the enclosed prescribing information for the full FDA-approved indications and safety information.1

Rationale: Results of the OCEANS and AURELIA Phase III trials were recently published and/or presented at the American Society of Clinical Oncology (ASCO) Annual Meeting held June 1-5, 2012.

OCEANS: platinum-sensitive recurrent ovarian cancer

Results of OCEANS, a randomized, double-blind, placebo-controlled Phase III trial of chemotherapy with or without Avastin in patients with platinum-sensitive recurrent epithelial ovarian, primary peritoneal, or fallopian tube cancer, have been published and an updated safety analysis was recently presented at the ASCO annual meeting.2,3 The study met its primary endpoint of significantly improving median progression free survival (PFS) in patients treated with Avastin in combination with gemcitabine and carboplatin versus placebo in combination with gemcitabine and carboplatin, respectively.2 Grade ≥3 adverse events included neutropenia, hypertension, proteinuria, arterial/venous thromboembolic events (ATEs), non-central nervous system bleeding, congestive heart failure, and wound healing complications. No GI perforations were noted in either arm during treatment, but 2 GI perforations occurred 69 days after the last Avastin dose in the Avastin-containing arm. The updated safety analysis added 11 months of follow-up and safety findings were similar to that seen at the time of the original PFS analysis.3

AURELIA: platinum-resistant, recurrent ovarian cancer

AURELIA is a randomized Phase III trial evaluating Avastin combined with chemotherapy for platinum-resistant recurrent ovarian, primary peritoneal, or fallopian tube cancer. The study met the primary endpoint of PFS improvement in favor of Avastin + chemotherapy versus chemotherapy alone.4 Grade ≥3 adverse events that occurred more frequently in the Avastin arm compared with the chemotherapy alone arm included hypertension, proteinuria, GI perforation, fistula formation, and ATEs. In addition, Grade ≥3 peripheral sensory neuropathy and hand-foot syndrome occurred at a higher incidence in the Avastin arm.

Additional Phase II studies (N ≥25) of Avastin in recurrent ovarian cancer are cited for your reference.5-14

Respectfully submitted,
Cited and Enclosed References (copyright-paid where applicable):


2. Aghajanian C, Blank SV, Goff B, et al. An updated safety analysis of OCEANS, a randomized, double-blind, phase III trial of gemcitabine (G) and carboplatin (C) with bevacizumab (BV) or placebo (PL) followed by BV or PL to disease progression (PD) in patients with platinum-sensitive (Plat-S) recurrent ovarian cancer. Presented at the American Society of Clinical Oncology 2012 Annual Meeting in Chicago, IL; June 1-5, 2012. ASCO poster presentation #LBA5054.


4. Avastin® Prescribing Information

Additional Phase II studies (N≥25)


