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# PREDICTIVE MARKERS OF RESPONSE TO ADJUVANT TREATMENT IN LOCALLY ADVANCED OVARIAN CANCER

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#### **Background and Importance**

Along with mutations in the BRCA genes and homologous recombination deficiency, the rate of CA-125 biomarker clearance during the first cycles of chemotherapy is emerging as an indicator of chemosensitivity in ovarian cancer. The validated indicator for this clearance rate, **KELIM** (CA-125 ELIMination Rate Constant K), has demonstrated its prognostic value for the benefit obtained after treatment in several clinical trials.

### **Aim and Objectives**



Our objective was to **validate the KELIM score** in clinical practice in patients with ovarian cancer treated with adjuvant chemotherapy and to determine whether the KELIM score is predictive of progression-free (**PFS**) and overall survival (**OS**).

# **Materials and Methods**



Patients with stage III ovarian cancer who had received adjuvant chemotherapy following cytoreductive primary surgery at our center from January 2014 to January 2024.

Kaplan-Meier survival analyses was performed for **PFS** and **OS**.

× Patients treated in the recurrent setting were excluded.

KELIM was calculated, using a **validated formula** (*https://www.biomarker-kinetics.org/CA-125*), based on **CA-125 values** during each treatment cycle within the first 100 days of chemotherapy.

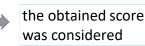
At least **three values** were required.

N=43

✓ Mean age: 60 years.

✓ Median follow-up:

4.98 years.



Favorable (KELIM ≥1) → high chemosensitivity

unfavorable (KELIM <1) → low chemosensitivity

### Results

- ✓ 56.1% had a **favorable KELIM score**.
- ✓ In those patients where BRCA status was available, there was a mutation in 20.7%.
- ✓ 88.5% of patients had an **optimal surgical cytoreduction**.
- ✓ Bevacizumab was added to chemotherapy in 25% of patients.

An **unfavorable KELIM score** was associated with a non-statistically significant **lower** estimated median **PFS** (6.00 vs 7.66 years, p=0.167) and **OS** (6.37 vs 8.06 years, p=0.126) as compared to a favorable KELIM.

#### **Conclusion and Relevance**

Patients with ovarian cancer treated with adjuvant chemotherapy with a calculated KELIM score <1 were more likely to have a lower PFS and lower OS when compared to patients with a KELIM score  $\geq$ 1.

