KURZPROTOKOLL
POLO

Öffentlicher Titel	Phase III Studie zu Olaparib bei metastasiertem Pankreaskarzinom mit BRCA-Mutation
Wissenschaftl. Titel	A Phase III, Randomised, Double Blind, Placebo Controlled, Multicenter Study Maintenance Olaparib Monotherapy in Patients with gBRCA Mutated Metastatic Pancreatic Cancer whose Diesease Has Not Progressed on First Line Platinum Based Chemotherapy
Kurztitel	POLO
Studienart	multizentrisch, Therapiestudie, randomisiert, doppelblind, zweiarmig, kontrolliert
Studienphase	Phase III
Erkrankung	Verdauung: Bauchspeicheldrüsenkrebs (Pankreaskarzinom): Zweitlinie oder höher
Ziele	- Progression free survival (PFS) by central review of modified RECIST 1.1 [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of PFS (time from randomisation to objective disease progression according to modified Response Evaluation Criteria in Solid Tumours (RECIST 1.1) or death) of olaparib maintenance monotherapy compared to placebo, using blinded independent central review (BICR) of radiological scans. - Overall survival (OS) [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of OS (time from randomisation to death by any cause) of olaparib maintenance monotherapy compared to placebo - Time from randomisation to second progression or death (PFS2) [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of PFS2 (time from randomisation to second progression, defined as objective radiological or symptomatic progression, or death) of olaparib maintenance monotherapy compared to placebo. - Time from randomisation to first subsequent therapy or death (TFST) [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of TFST (time from randomisation to the earlier of first subsequent therapy following study treatment discontinuation, or death) of olaparib maintenance monotherapy compared to placebo. - Time from randomisation to second subsequent therapy or death (TSST) [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of TSST (time from randomisation to the earlier of second subsequent therapy following study treatment discontinuation, or death) of olaparib maintenance monotherapy compared to placebo. - Time from randomisation to study treatment discontinuation or death (TDT) [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of TDT (time from randomisation to the earlier of study treatment discontinuation or death) of olaparib maintenance monotherapy compared to placebo. compared to placebo. - Objective response rate by BICR using modified RECIST 1.1 [Time Frame: Up to 4 years.] [Designated as safety issue: No] Efficacy by assessment of objective response rate according to modified RECIST 1.1 of olaparib maintenance monotherapy compared to placebo - Disease control rate by BICR using modified RECIST 1.1 [Time Frame: Up to 4 years] [Designated as safety issue: No] Efficacy by assessment of disease control rate according to modified RECIST 1.1 of olaparib maintenance monotherapy compared to placebo. - Adjusted mean change from baseline in global quality of life (QoL) score from the EORTC-QLQ-C30 questionnaire [Time Frame: Up to 4 years] [Designated as safety issue: No] Assessment of the effect of olaparib on health-related quality of life (QoL) as measured by the EORTC-QLQ-C30 global QoL scale

	- Safety and tolerability of olaparib [Time Frame: Up to 4 years] [Designated as safety issue: Yes] Assessment of adverse events (AEs), physical examination, vital signs including blood pressure (BP), pulse, electrocardiogram (ECG) and laboratory findings including clinical chemistry and haematology. - Improvement rate of global quality of life (QoL) [Time Frame: Up to 4 years] [Designated as safety issue: No] Assessment of the effect of olaparib on improvement rate of global health status/QoL and pancreatic pain as measured by the EORTC-QLQ-C30 global QoL scale and the PAN-26 pancreatic pain scale.
Einschlusskriterien	- Histologically or cytologically confirmed pancreas adenocarcinoma receiving initial chemotherapy for metastatic disease and without evidence of disease progression on treatment - Patients with measurable disease and/or non-measurable or no evidence of disease assessed at baseline by CT (or MRI where CT is contraindicated) will be entered in this study. - Documented mutation in gBRCA1 or gBRCA2 that is predicted to be deleterious or suspected deleterious - Patients are on treatment with a first line platinum-based (cisplatin, carboplatin or oxaliplatin) regimen for metastatic pancreas cancer, have received a minimum of 16 weeks of continuous platinum treatment and have no evidence of progression based on investigator's opinion. - Patients who have received platinum as potentially curative treatment for a prior cancer (eg ovarian cancer) or as adjuvant/neoadjuvant treatment for pancreas cancer are eligible provided at least 12 months have elapsed between the last dose of platinum-based treatment and initiation of the platinum-based chemotherapy for metastatic pancreas cancer.
Ausschlusskriterien	- gBRCA1 and/or gBRCA2 mutations that are considered to be non detrimental (eg, "Variants of uncertain clinical significance" or "Variant of unknown significance" or "Variant, favour polymorphism" or "benign polymorphism" etc.) - Progression of tumour between start of first line platinum based chemotherapy for metastatic pancreas cancer and randomisation. - Cytotoxic chemotherapy or non-hormonal targeted therapy within 28 days of Cycle 1 Day 1 is not permitted. - Exposure to an investigational product within 30 days or 5 half lives (whichever is longer) prior to randomisation - Any previous treatment with a PARP inhibitor, including Olaparib
Alter	18 Jahre und älter
Molekularer Marker	BRCA
Fallzahl	145
Prüfzentren	**Universitätsklinikum Frankfurt** (Rekrutierung beendet) Zentrum für Chirurgie, Klinik für Allgemein- und Viszeralchirurgie Theodor-Stern-Kai 7 60590 Frankfurt am Main Prof. Dr. med. Wolf-Otto Bechstein Tel: 069 6301-7669 Fax: 069 6301-86356 allgemeinchirurgie@kgu.de
Sponsor	Astra Zeneca (Hauptsponsor) Myriad Genetics
Registrierung in anderen Studienregistern	ClinicalTrials.gov NCT02184195