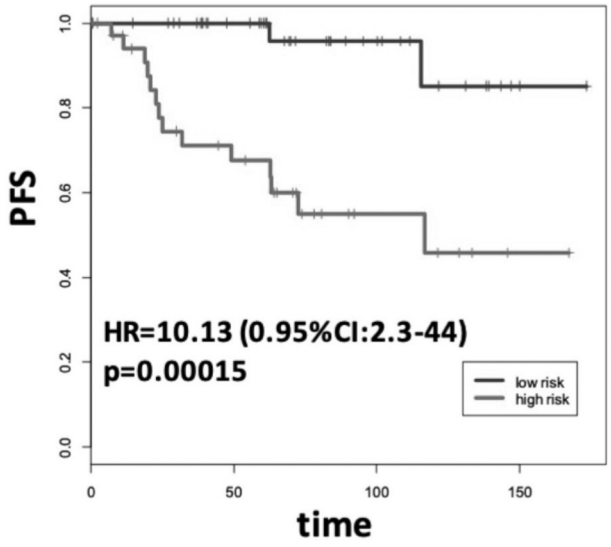

Abstract 37 Figure 1 Kaplan-Meier curves of PFS in eEOC cohort according to MiROvaR classification

MiROVaR classified 37 patients (46.3%) at high-risk (14 events, *median PFS: 117 months, 95%CI: 62-nyr*) and 43 patients (53.7%) at low-risk of relapse (2 events, *median PFS time: nyr; 95%CI:nyr*). Kaplan-Meier curves confirmed the significantly different PFS time (figure 1) for the two groups with HR=10.13 (95%CI: 2.3–4.4, p=0.00015) for the high-risk patients.

Conclusions MiROvaR confirmed as a potential predictor of EOC progression and has prognostic value independent of relevant clinical covariates also in patients with eEOC. MiROvaR warrants further investigation for the development of a clinical-grade prognostic assay.

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38 PHASE II STUDY OF ENZALUTAMIDE IN ANDROGEN RECEPTOR POSITIVE (AR+) RECURRENT OVARIAN CANCER: FINAL RESULTS

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Objectives This was a single institution, phase II, Simon 2-stage with safety lead-in study of the oral androgen-receptor antagonist, enzalutamide, in patients with recurrent AR+ ovarian cancer with measurable disease and 1–3 prior lines of chemotherapy. The primary objective was to determine the proportion of patients surviving progression free for 6 months (PFS_6) and overall response rate by RECIST 1.1 Criteria; with 7/58 responses or PFS_6 of 13 being considered a positive study.

Methods Following consent, archival tissue was screened for AR+ by IHC with ≥5% considered positive. Enrolled patients were treated with enzalutamide 160mg po daily until progression of disease or treatment discontinuation. A cycle was 28 days. Adverse events were graded by CTCAE V 4.0.

Results Between 11/2013–7/2018 160 patients were screened and 59 patients [45 high grade serous(HGS), 14 low grade serous(LGS)] consented to treatment on the study (1 patient was replaced; efficacy cohort=58, safety cohort=59). There was 1 confirmed and 1 unconfirmed partial response (PR), PFS6 was 22% (90% CI: 15.1–100%) with PFS6 for those with HGS 19.8% (90% CI: 12.7–100%) and for LGS 38.5% (21.7%-100%). Median PFS was 3.5 months. There were no toxicities >grade 3 related to study drug. Related grade 3 toxicities occurred in 6 patients [fatigue (1), rash (2), hypertension (1), anemia (1), and transaminase elevation (1)].

Conclusions The study met its primary endpoint, with 13 patients (22%) remaining progression free at 6 months, however the response rate was low. Enzalutamide was well tolerated and may offer a good treatment option in select patients.

IGCS19-0345

39 INTERIM ANALYSIS OF OVARIAN CANCER BY THE US NATIONAL CANCER MOONSHOT'S TRI-FEDERAL (DOD/NCI/VA) APPLIED PROTEOGENOMIC ORGANIZATIONAL LEARNING AND OUTCOMES (APOLLO) RESEARCH NETWORK

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Objectives Although studies including TCGA have selected for pure tumors to enhance detection of cancer-related biomarkers, many impure tumors are associated with poor prognosis raising concerns over historical selection bias. Enrichment techniques to prep tumor micro-compartments was aligned with comprehensive proteogenomic analysis in an advanced stage high grade serous ovarian cancer (HGSOC) patient cohort to detect novel, clinically-relevant alterations.