Abstract EP305/#335 Figure 1  Study outline

thrombocytopenia (0.00% vs 10%) and with a similar incidence of anemia (11.76% vs 8%).

Conclusions Preliminary results suggested that for advanced epithelial ovarian cancer the short-course Nab-PC regimen as first-line chemotherapy provided equivalent efficacy to that of the PC regimen and there appeared to be a lower incidence of hematologic toxicities.

EP306/#201  Efficacy and safety of nanoparticle albumin-bound paclitaxel plus carboplatin as neoadjuvant chemotherapy for women with unresectable ovarian cancer: a single-center, open phase I/II clinical trial

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Objectives This study aimed to explore the efficacy and safety of nanoparticle albumin-bound paclitaxel (nab-p) combined with carboplatin as a neoadjuvant chemotherapy (NACT) regimen for patients with ovarian cancer (OC).

Methods This is a single-center, open phase Ib/II Clinical Trial (ChiCTR1900026893). We enrolled women with unresectable epithelial OC, FIGO stages III-IV. Patients received 3 cycles of NACT, then interval debulking surgery (IDS), followed by 3–6 cycles of adjuvant chemotherapy. Each 3-week cycle consisted of carboplatin AUC 5 plus nab-p 260 mg/m². In the phase Ib part, the objective was to evaluate the safety and tolerability of the NACT. In the phase II part, the primary objective was R0 resection rate. Secondary objectives were progression-free survival, objective response rate (ORR) and safety.

Results Phase Ib results showed the NACT was safe and tolerable, so the study proceeded to phase II. A total of 22 patients were included in this analysis, 10 patients in the phase Ib and 12 patients in the phase II. The median age was 58.5 years and 13 (59.1%) patients had stage IIIC. After NACT, the ORR was 86.4% (95%CI: 65.1%-97.1%). Among the 20 patients who underwent IDS, all patients achieved optimal debulking and 75% (95%CI: 50.9%-91.3%) achieved R0 resection. During NACT, the most common grade 3/4 adverse events were hematologic toxicities, including neutropenia (81.8%), leucopenia (54.5%), anaemia (22.7%) and thrombocytopenia (22.7%). All adverse events returned to normal or acceptable levels after receiving appropriate treatment.

Conclusions Nab-p plus carboplatin as a NACT regimen was effective and tolerable for unresectable epithelial OC.