monotherapy. Women with platinum-resistant ovarian, primary peritoneal, or fallopian tube cancer who have received 1–3 lines of prior systemic anticancer therapy, including prior bevazucumab, and at least 1 line of platinum-based therapy are being enrolled. Patients with primary platinum-refractory disease are excluded from the trial. Approximately 360 patients are being randomised 1:1 to relacorilant (150 mg the day before, of, and after nab-paclitaxel infusion) + nab-paclitaxel (80 mg/m<sup>2</sup>) or nab-paclitaxel monotherapy (100 mg/m<sup>2</sup>) on days 1, 8, and 15 of each 28-day cycle. Stratification factors are prior lines of therapy (1 vs >1) and region of world (North America vs. Europe vs. rest of world).

**Results** The primary endpoint is PFS assessed by blinded independent central review. Key secondary endpoints include OS, PFS by investigator assessment, objective response rate, best overall response, DoR, safety, pharmacokinetics, pharmacodynamics, patient-reported outcomes, and quality of life.

**Conclusion** N/A

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Two-step frailty assessment at UMM

Abstract #222 Figure 1

Conclusion Frailty is a multidimensional, difficult quantifiable complex. To ensure a possible operationalization, we developed the two-step frailty assessment. This two-step frailty assessment identifies a significant proportion of non-frail patients and women who received optimization of their global health status to realize the standard operation.

Disclosures The authors declare no relevant conflict of interests.

AGO-OVAR 28/ENGOT-OV57: NIRAPARIB VS NIRAPARIB IN COMBINATION WITH BEVACIZUMAB IN PATIENTS WITH CARBOPLATIN-TAXANE BASED CHEMOTHERAPY IN ADVANCED OVARIAN CANCER (A MULTICENTRE RANDOMISED PHASE III TRIAL)

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Methodology AGO-OVAR 28/ENGOT-ov57 (NCT05009082; EudraCT-Number: 2021–001271-16) is a multicenter, randomized, prospective phase III trial. The trial population is composed of adult pts with newly diagnosed, high-grade epithelial AOC, primary peritoneal cancer or fallopian tube cancer FIGO III/IV (except FIGO IIIA2 without nodal involvement). All pts should have completed cycle1 of chemotherapy (C/P) as part of Study-Run-In-Period. Prior to day1 of cycle2, 970 pts with a valid central tumor BRCA (tBRCA) test result will be randomized 1:1 into either Arm1 and will receive 5 additional cycles of C/P q21d followed by niraparib for up to 3 years; or into Arm2 where pts will receive 5 additional cycles of C/P plus bevacizumab q21d followed by bevacizumab q21d (for up to 1 year) and niraparib for up to 3 years. Patients who are scheduled for neoadjuvant chemotherapy and interval debulking surgery can also be enrolled. The primary objective is progression-free-survival (PFS). Secondary objectives include but are not limited to: PFS according to BRCA-status, overall survival, PFS2, safety/tolerability, and quality of life. The trial is currently recruiting, the first patient was randomized in October 2022.

Results Trial-In-Progress

Conclusion Trial-In-Progress

Disclosures Arbeitsgemeinschaft Gynäkologische Onkologie (AGO) Study Group is the sponsor of the trial. Financial support and drug supply by GSK.

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