Summary of Clinical Trial Results

A study that looked at whether the addition of bevacizumab to carboplatin and paclitaxel works and is safe in Chinese women with ovarian cancer, fallopian tube cancer, or primary peritoneal cancer

See the end of the summary for the full title of the study.

About this summary

This is a summary of the results of a clinical trial (called a 'study' in this document) – written for:

- members of the public and
- people who took part in the study.

This summary is based on information known at the time of writing (January 2025).

The study started in August 2018 and finished in May 2023. This summary was written after the study had ended.

No single study can tell us everything about the risks and benefits of a medicine. It takes lots of people in many studies to find out everything we need to know. The results from this study may be different from other studies with the same medicine.

- **This means that you should not make decisions based on this one summary – always speak to your doctor before making any decisions about your treatment.**

Contents of the summary

Thank you to the people who took part in this study

The people who took part have helped researchers to answer important questions about ovarian cancer, cancer in the tubes that connect the ovaries to the uterus (fallopian tubes), and cancer in the lining inside the belly (peritoneum) and the medicines studied – 'carboplatin', 'paclitaxel', and 'bevacizumab'.

Key information about this study

- This study was done to find out how well adding the study medicine (called 'bevacizumab') to existing chemotherapy (carboplatin and paclitaxel) worked in Chinese women who have ovarian cancer, fallopian tube cancer, or peritoneal cancer.

- In this study, women were given existing chemotherapy combined with either the study medicine (bevacizumab, **Group A**) or a placebo (something that looked the same as bevacizumab but did not contain any real medicine, **Group B**). The existing chemotherapy medicines were carboplatin and paclitaxel. The study was 'randomised', which means it was decided by chance which treatment each person was given.

- This study included 100 Chinese women from 16 study centres in China. There were 50 patients in each study group.

- The main findings were that:
    - Half of the women lived for 25.3 months **(Group A)** and half for 12.3 months **(Group B)** before their cancer got worse.
    - At the end of the study, the proportion of women whose cancer became worse or died was 73% (41 out of 49 women) in **Group A** and 84% (37 out of 51 women) in **Group B.**
    - Around 31% of women (15 out of 49 women) in **Group A** had serious unwanted effects related to their treatment compared with around 30% of women (15 out of 50 women) in **Group B**.

- This study is now finished, and this document provides a summary of the final analysis.

1. General information about this study

Why was this study done?

Ovarian cancer is a type of cancer that occurs when the cells in the lining of the ovary, which is part of the female reproductive system, start to grow in a harmful and uncontrollable way. It also can happen when cancer cells from the tubes that connect the ovaries to the uterus (fallopian tubes) or from the lining inside the belly (peritoneum) spread to the ovary. Cancer that has spread to nearby cells or to other parts of the body is called 'advanced' cancer.

Women with ovarian cancer usually take medicine called chemotherapy that kills cancer cells or stops them from growing. However, sometimes the chemotherapy may not work or may work for only a short time, and then the cancer gets worse again. There is a need for new treatments that help people live longer without their cancer getting worse.

Anti-angiogenic treatments stop the cancer cells from forming the new blood vessels that they need to grow and spread. Anti-angiogenic medicines can also help other

medicines to kill cancer cells. A type of anti-angiogenic treatment (bevacizumab) was shown to help chemotherapy work better in women with advanced ovarian cancer in the USA, Europe, and other countries.

In this study, researchers wanted to see if adding bevacizumab to existing chemotherapy could help chemotherapy work better in Chinese women with advanced ovarian, fallopian tube, or peritoneal cancers who had not yet taken other medicines for their disease.

What was the medicine being studied?

This study looked at a medicine called 'bevacizumab' (known by its brand name Avastin®) in combination with other medicines.

- You say this as 'bev-ah-siz-uh-mab'.
- Cancers grow their own blood vessels so they can get food and oxygen from the blood. The cancer needs a protein called vascular endothelial growth factor (VEGF) to do this. Bevacizumab blocks VEGF and stops the cancer from growing blood vessels, so that the cancer starves and cannot grow.
- Bevacizumab can also help chemotherapy reach the cancer cells more easily by improving the function of blood vessels around the cancer.

Bevacizumab was compared with a 'placebo'.

- You say this as 'plah – see – bo'
- The placebo looked the same as bevacizumab but did not contain any real medicine. This means it had no medicine-related effect on the body.

Both bevacizumab and placebo were given with existing chemotherapy medicines. The chemotherapy medicines used in this study were:

- Carboplatin
    - Carboplatin affects the genetic material in cells – the DNA. This stops cancer cells from dividing into new cells and kills them.
    - This medicine is a platinum chemotherapy drug
- Paclitaxel
    - Paclitaxel works by stopping cancer cells from dividing into new cells, so it blocks the growth of the cancer.

What did researchers want to find out?

- Researchers wanted to see if bevacizumab plus chemotherapy worked better than placebo plus chemotherapy in Chinese women with ovarian cancer, fallopian tube cancer, or peritoneal cancer (see section 4 "What were the results of the study?").
- They also wanted to find out how safe the medicine was. They did this by checking how many people had unwanted effects, and how serious those unwanted effects were, when taking each of the medicines during this study (see section 5 "What were the unwanted effects?").

The main question that researchers wanted to answer was:

1. How much time was there between the start of treatment and the cancer getting worse in **Group A** and **Group B**?

Other questions that researchers wanted to answer included:

2. How long did women in **Group A** and **Group B** live (during the study)?
3. How many people had unwanted effects during the study, and how many of these unwanted effects were serious (meaning they were life-threatening, required hospital care, or caused lasting problems)?

What kind of study was this?

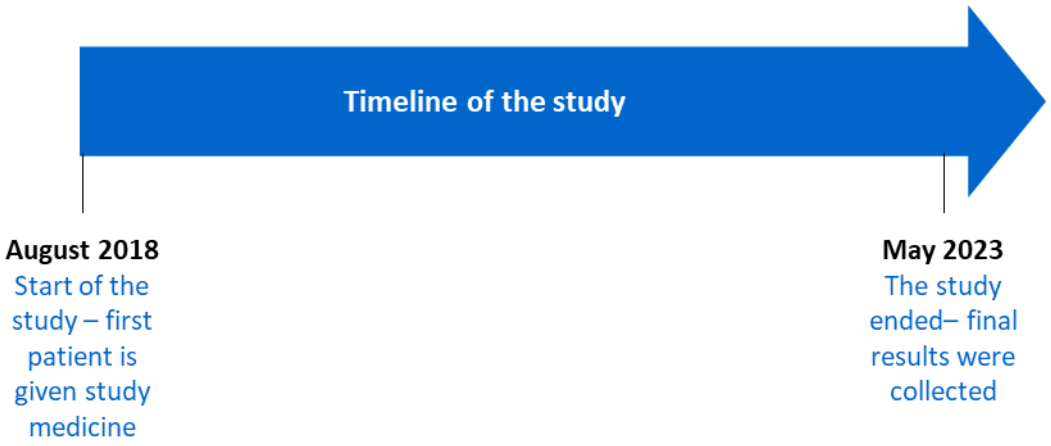
This study was a '**Phase 3**' study. This means that bevacizumab had been tested in a smaller number of people with ovarian cancer before this study. Phase 3 studies are done in a larger number of people to see if a drug works better than the standard existing treatment and is safe enough for it to be approved by the health authorities as a treatment that can a doctor can prescribe.

The study was '**randomised**'. This means that it was decided by chance which of the medicine combinations people in the study would be given – like tossing a coin. Randomly choosing which medicine people take, makes it more likely that the types of people in both groups (for example, age, race) will be a similar mix. Apart from the exact medicines being tested in each group, all other aspects of care were the same between the groups.

This was a '**double-blind**' study. This means that neither the people taking part in the study nor the study doctors knew which of the study medicines people were taking. 'Blinding' of a study is done so that any effect seen from the medicine is not due to something people expected to happen – if they had known which medicine they were taking.

When and where did the study take place?

The study started in August 2018 and finished in May 2023. This summary was written after the study had ended.

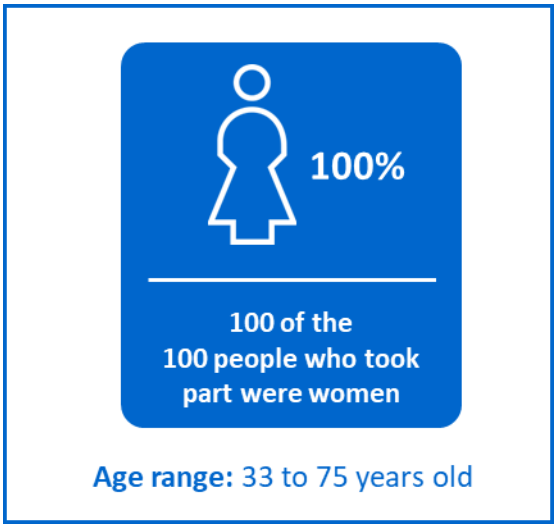


The study took place at 16 study centres in mainland **China**.

2. Who took part in this study?

In this study, 100 women with ovarian cancer took part.

Women who took part in the study were between 33 and 75 years of age. More information on the women who took part is given below:



Women could take part in the study if:

- They were at least 18 years old.
- They had advanced ovarian cancer, fallopian tube cancer, or peritoneal cancer. The cancer was called ‘advanced’ because the cancer had spread from where it started to nearby cells or to other parts of the body.
- They were able to perform activities as well or almost as well as they could before they got cancer.

Women could not take part in the study if:

- They had previously received any treatment for their cancer.

3. What happened during the study?

During the study, women with ovarian cancer were selected by chance to get one of two treatments. The treatments were selected at random – by a computer.

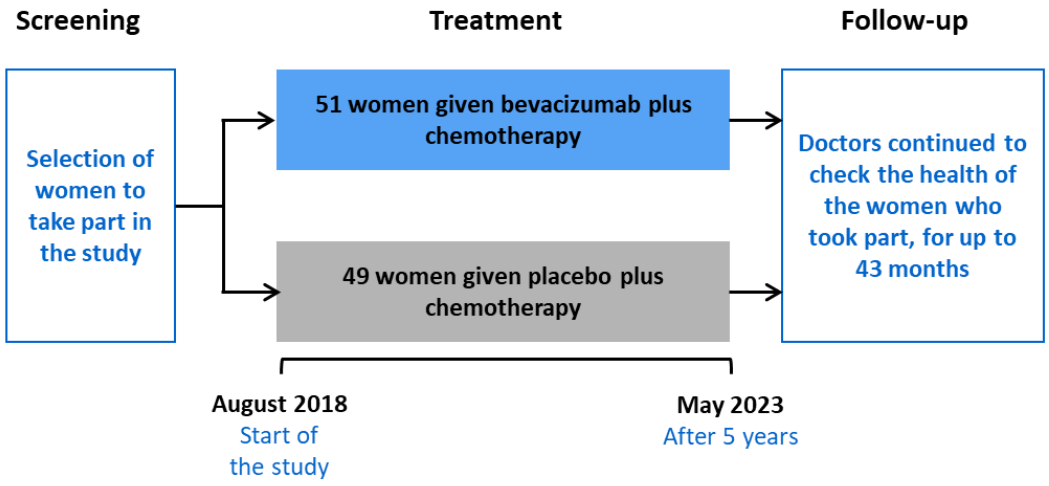
- In **Group A**, women were given **bevacizumab** plus **chemotherapy** (**carboplatin** plus **paclitaxel**)
    - Paclitaxel 175 mg for each square meter of body area (mg/m²) was given by drip (infusion) into a vein over about 3 hours and repeated every 3 weeks for 6 rounds

- Carboplatin 6 mg/mL/min was given by drip (infusion) into a vein over approximately 30 minutes and repeated every 3 weeks for 6 rounds
- Bevacizumab 15 mg for each kilogram of body weight (mg/kg) given by drip (infusion) into a vein every 3 weeks, starting in the second round. The first dose was given over about 90 minutes. If the woman tolerated it well, the second dose was given over 60 minutes, and subsequent doses were given over 30 minutes

- In **Group B**, women were given **placebo** plus **chemotherapy** (**carboplatin** plus **paclitaxel**)
  - Paclitaxel 175 mg/m² was given by drip (infusion) into a vein over about 3 hours and repeated every 3 weeks for 6 rounds
  - Carboplatin 6 mg/mL/min was given by drip (infusion) into a vein over approximately 30 minutes and repeated every 3 weeks for 6 rounds
  - Placebo given by drip (infusion) into a vein with the same timing as bevacizumab in Group A

Women continued treatment with bevacizumab or placebo until their cancer got worse or they experienced unacceptable unwanted effects. Treatment would stop after a maximum of 21 rounds, or if the women decided to stop participating in the study.

When the study finished, the women who took part were asked to go back to their study centre for more visits – to check their overall health. More information about what happened in the study is shown below.



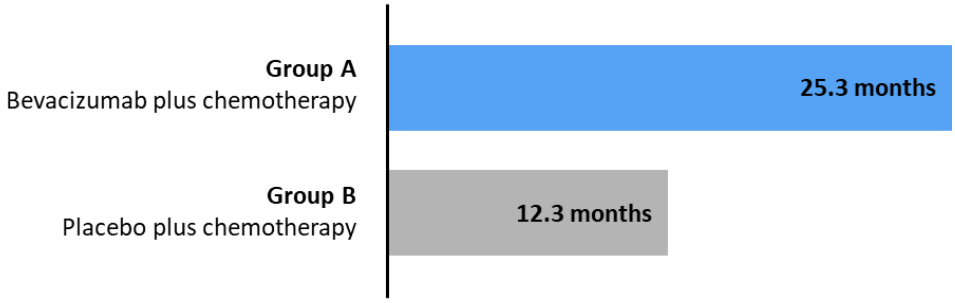
4. What were the key results of the study?

Question 1: How much time was there between the start of treatment and the cancer getting worse in **Group A** and **Group B**?

Researchers looked at how much time there was before the cancer became worse (in other words, spread to another part of the body, spread further, or grew larger) in **Group A** and **Group B**.

- In **Group A**, half of the women in this group lived for 25.3 months before their cancer got worse
- In **Group B**, half of the women in this group lived for 12.3 months before their cancer got worse

How long did half of the women in each group live without their cancer getting worse?



At the end of the study, the proportion of women whose cancer became worse or who died was 73% (37 out of 51 women) in **Group A** and 84% (41 out of 49 women) in **Group B.**

Question 2: How long did women in **Group A** and **Group B** live (during the study)?

Researchers also looked at how long women lived on average during the study. This was compared between **Group A** and **Group B**. This information was collected from women in both groups from **August 2018** until **May 2023**.

- The average length of time that women lived for after starting the study medicine could not be calculated in either group because more than half of the women were still alive at the time the information was collected in May 2023.

Until the end of the study, 26% of women (13 out of 49 women) in **Group A** and 38% of women (19 out of 50 women) in **Group B** had died.

This section only shows the key results from this study. You can find information about all other results on the websites at the end of this summary (see section 8).

5. What were the unwanted effects?

Unwanted effects are medical problems (such as feeling dizzy) that happen during the study.

- They are described in this summary because the study doctor believes the unwanted effects were related to the treatments in the study.
- Not all of the people in this study had all of the unwanted effects.
- Unwanted effects may be mild to very serious and can be different from person to person.
- It is important to be aware that the unwanted effects reported here are from this single study. Therefore, the unwanted effects shown here may be different from those seen in other studies, or those that appear on the medicine leaflet.
- Unwanted effects can vary from mild to very serious and may vary from person to person.
- Serious and common unwanted effects are listed in the following sections.

Sometimes people who enrol in a study do not end up receiving the treatment they were assigned. The safety results shown in this section are for all the people who took the medicines during the study. Results were collected and analysed for 49 women in **Group A** and 50 women in **Group B**.

Serious unwanted effects

An unwanted effect is considered 'serious' if it is life-threatening, needs hospital care, or causes lasting problems.

During this study, 3 in every 10 women (30%) had at least one serious unwanted effect that was related to the treatments in the study. In **Group A**, around 31% of women taking bevacizumab plus chemotherapy (15 out of 49 women) had at least one serious unwanted effect, compared with around 30% of women taking placebo plus chemotherapy (15 out of 50 women) in **Group B**.

The most common serious unwanted effects that were related to the treatments in the study are shown in the following table – these are unwanted effects that happened in at least 5% of women in either group. Some women had more than one unwanted effect – this means that they are included in more than one row in the table.

Most common serious unwanted effects reported in this study in at least 5% of women	**Group A** Bevacizumab plus chemotherapy (49 women)	**Group B** Placebo plus chemotherapy (50 women)
Problems with blood-making cells (fewer blood cells being made)	2% (1 out of 49)	8% (4 out of 50)
Low level of red blood cells (can make you feel tired or weak)	0	6% (3 out of 50)
Low level of platelets (makes it harder for blood to clot)	6% (3 out of 49)	8% (4 out of 50)

No women in the study died because of unwanted effects that were related to the treatments in the study.

During the study, some women decided to stop taking their medicine because of unwanted effects:

- In **Group A**, 3 out of 49 women (6%) stopped taking their medicine.

- In **Group B**, 3 out of 50 women (6%) stopped taking their medicine.

Other unwanted effects

You can find information about other unwanted effects (not shown in the sections above) on the websites listed at the end of this summary – see section 8.

6. How has this study helped research?

The information presented here is from a single study of 100 women with ovarian cancer, fallopian tube cancer, or peritoneal cancer. These results helped researchers learn more about the effects of adding bevacizumab to existing chemotherapy with carboplatin plus paclitaxel.

Overall, this study showed that for women who were given bevacizumab plus chemotherapy, their cancer took longer to get worse than women who were given chemotherapy on its own. Even though we don't have enough information yet to fully understand how long women lived after starting treatment, the results suggest that women who were given bevacizumab plus chemotherapy lived longer than women who were given chemotherapy on its own. The unwanted effects observed in women in this study were similar to what doctors already know about bevacizumab and chemotherapy.

No single study can tell us everything about the risks and benefits of a medicine. It takes lots of people in many studies to find out everything we need to know. The results from this study may be different from other studies with the same medicine.

- This means that you should not make decisions based on this one summary – always speak to your doctor before making any decisions about your treatment.

7. Are there other studies ongoing?

Other studies looking at the safety and effects of bevacizumab are still happening.

8. Where can I find more information?

You can find more information about this study on the websites listed below:

- https://clinicaltrials.gov/study/NCT03635489

- https://forpatients.roche.com/en/trials/cancer/oc/a-study-of-the-efficacy-and-safety-of-bevacizumab-in-ch-64415.html

If you would like to find out more about the results of this study, the full title of the relevant scientific paper is: “First-line bevacizumab plus chemotherapy in Chinese patients with stage III/IV epithelial ovarian cancer, fallopian tube cancer or primary peritoneal cancer: a phase III randomized controlled trial”. The authors of the scientific publication are: Xiaohua Wu, Jihong Liu, Ruifang An, Rutie Yin, Yu Zhang, and others. The paper was published in 2024 in the journal ‘Journal of Gynecologic Oncology’, volume number 35, issue 5, article e99.

Who can I contact if I have questions about this study?

If you have any further questions after reading this summary:

- Visit the ForPatients platform and fill out the contact form here
- Contact a representative at your local Roche office.

If you took part in this study and have any questions about the results:

- Speak with the study doctor or staff at the study hospital or clinic.

If you have questions about your own treatment:

- Speak to the doctor in charge of your treatment.

Who organised and paid for this study?

This study was organised and paid for by F. Hoffmann-La Roche Ltd who have their headquarters in Basel, Switzerland.

Full title of the study and other identifying information

The full title of this study is: “A Phase III trial of Carboplatin and Paclitaxel plus Placebo versus Carboplatin and Paclitaxel plus Concurrent and Extended Bevacizumab in Chinese Women with Newly Diagnosed, Previously Untreated, Stage III or Stage IV Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer”.

The study is known as ‘YO40268’.

- The protocol number for this study is: YO40268.
- The ClinicalTrials.gov identifier for this study is: NCT03635489.
- YO40268 Study Report, Roche data on file.