**ARE POLY (ADP-RIBOSE) POLYMERASE INHIBITORS WELL TOLERATED BY OUR PATIENTS? A SAFETY STUDY IN REAL-WORLD PRACTICE**

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**BACKGROUND:** Poly (ADP-ribose) polymerase inhibitors (PARPi) are used for maintenance therapy in ovarian cancer after a platinum-sensitive relapse. Treatment individualization is crucial due to frequency of adverse events (AEs).

**AIM:** To assess the safety of PARPi for maintenance treatment in ovarian cancer. To compare obtained results with reference trials.

**MATERIALS AND METHODS**

**STUDY DESING**
Retrospective observational study

**STUDY DURATION**
From March 2020 to March 2021

**PATIENTS INCLUDED**
Ovarian cancer patients that received PARPi for maintenance after platinum-based chemotherapy

**REFERENCE TRIALS**
- Olaparib: SOLO2/ENGOT-Ov21
- Niraparib: NOVA/ENGOT-Ov21

**RESULTS**

- 40 patients included
  - Olaparib = 20 patients
  - Niraparib = 18 patients
  - Rucaparib = 2 patients

- Mean Age: 55 years-old
  - Range: 37-74 years-old

- Adverse events incidence
  - Grade ≤ 2: 37.5%
  - Grade ≥ 3: 62.5%

- Grade ≥ 3 AE reported by systems
  - PARPi | Hematological | Gastrointestinal | Other toxicity
  - Olaparib | 14% | 43% | 43%
  - Niraparib | 83% | 0% | 17%
  - Rucaparib | 50% | 50% | 0%

- Time until first appearance of grade 3 toxicity
  - Mean: 5.4 months
  - Median: 4 months

- 65% patients required a dose reduction due to AEs
  - Olaparib: 36%
  - Niraparib: 41%
  - Rucaparib: 100%

- 6 patients discontinued PARPi

**CONCLUSIONS**
- More than the half of patients that start PARPi therapy require a dose reduction.
- In contrast with the revised trials, we report an overall higher AEs incidence.
- Hematological AEs the main concern specially with Niraparib.
- More studies are needed to improve the PARPi tolerance without compromising efficacy.