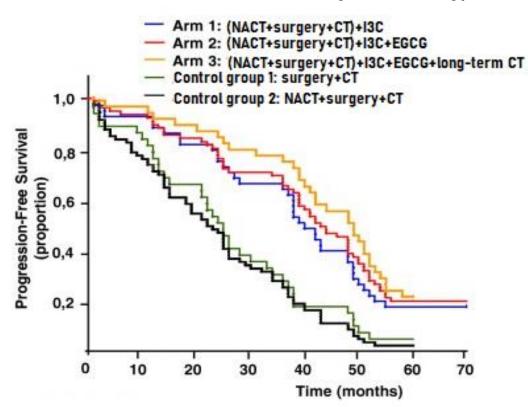
# How did to improve the overall survival of patients with advanced serous ovarian cancer?

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#### **BACKGROUND:**

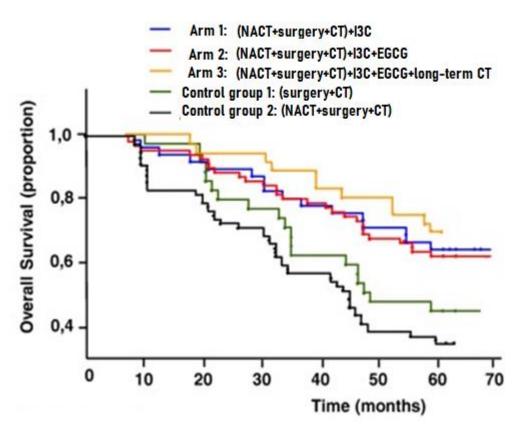
At present, there are numerous confirmed data on multitarget effect of indole-3-carbinol (I3C) and epigallocatechin-3-gallate (EGCG) against tumors of different origin.

**The AIM** was to study the effectiveness of combined therapy for patients with ovarian cancer (OC) when I3C and I3C with EGCG are included in its scheme.

#### **METHODS:**

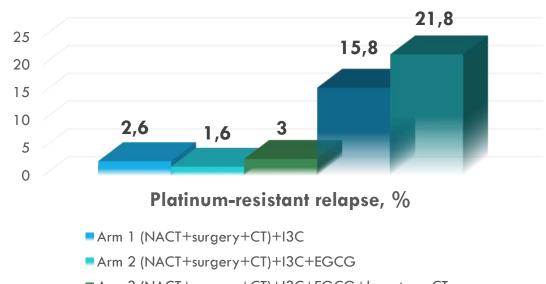
The study included 284 patients with an ascitic form of advanced serous OC. All of them underwent combined treatment: polychemotherapy (TP, TC, DC) and cytoreductive surgery. At the same time, treatment with neoadjuvant chemotherapy (NACT) was provided in the 1 st (n=46), the 2 nd (n=76) and the 3 rd (n=42) groups and prolonged (60 months) usage of I3C (for the 1 st group) and its combination with EGCG (for the 2 nd , 3 rd groups). In addition, prolonged polychemotherapy (PPCT) was given in the 3 rd group.

Two groups of treatment-naive patients (without I3C, EGCG)



The overall survival (OS) in the 1 st and 2 nd studies groups were higher than in the control's groups, amounted to 65.2% and 63.2%, against 40% and 36.3%, respectively.

OS in 3 rd studies group achieved of 71.4%, as was as a longer progression-free survival (PFS) a median was of 48.5 months. In the 1 st and 2 nd studies group the median of PFS were of 39.5 and 42.5 months, in the control's Groups were 24.5 and 22 months.



Arm 3 (NACT+surgery+CT)+13C+EGCG+long-term CT



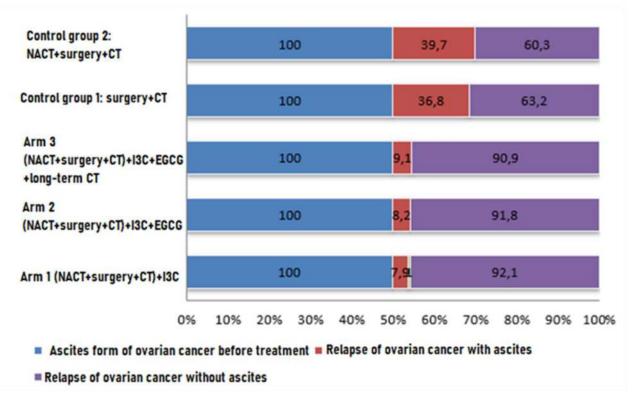
were taken as control arm: in the 1 st group (n=40) treatment included operation+6 courses of adjuvant chemotherapy (ACT); the 2 nd group (n=80) was treated by NACT+operation+6 courses of ACT. The observation period was 60 months.

## **RESULTS:**

The overall survival (OS) in the 1 st and 2 nd studies groups were higher than in the control's groups, amounted to 65.2% and 63.2%, against 40% and 36.3%, respectively. OS in 3 rd studies group achieved of 71.4%, as was as a longer progression-free survival (PFS) a median was of 48.5 months. In the 1 st and 2 nd studies group the median of PFS were of 39.5 and 42.5 months, in the control's groups were 24.5 and 22 months.

We result that the usage of drugs with multitarget effects (I3C, EGCG) in addition to standard therapy of OC increased its effectiveness by forming conditions (increasing the efficacy of NACT, maintaining the sensitivity of the tumor to first-line of PCT, reducing the number of ascites relapses) to achieve a longer duration PFS, OS.

- Control group 1 (surgery+CT)
- Control group 2 (NACT+surgery+CT)



### CONCLUSION:

We result that the usage of drugs with multitarget effects (I3C, EGCG) in addition to standard therapy of OC increased its effectiveness by forming conditions (increasing the efficacy of NACT, maintaining the sensitivity of the tumor to first-line of PCT, reducing the number of ascites relapses) to achieve a longer duration PFS, OS.

<u>BMC Cancer.</u> 2018 Sep 20;18(1):904. doi: 10.1186/s12885-018-4792-9.

A new promising way of maintenance therapy in advanced ovarian cancer: a comparative clinical study.

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