# Article details



# Title of article

Olaparib with or without bevacizumab or bevacizumab and 5-fluorouracil in advanced colorectal cancer: Phase III LYNK-003

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# Article URL

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Trial registration number NCT04456699

#### Key eligibility criteria

- Aged 18 years
- W Histologically confirmed metastatic or unresectable (stage IV) CRC
- Section 2012 ECOG performance status of 0 or 1
- 🧭 Adequate organ functior

Patients must not nave progressed after a first-line induction course of ≥6 cycles of FOLFOX (folinic acid, 5-FU, oxaliplatin) plus bevacizumab

**Primary objective** 

RECIST v1.1 by BICR

Primary objectives/rationale



### Secondary objectives

• Evaluation of OS, ORR, and DOR per RECIST v1.1 by BICR

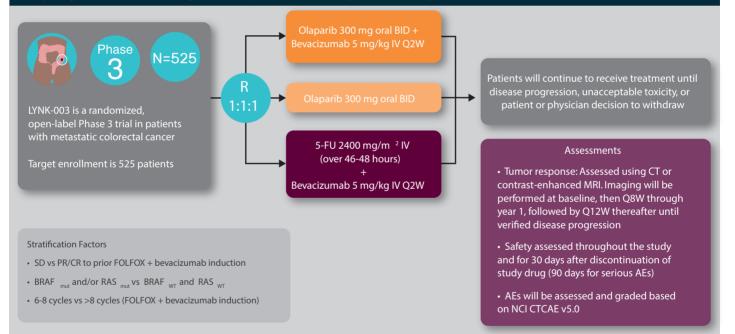
Compare PFS with olaparib alone or olaparib plus bevacizumab versus bevacizumab plus 5-FU in patients with unresectable or metastatic CRC that

has not progressed on first-line FOLFOX plus

bevacizumab. PFS will be assessed per

Safety of olaparib alone and olaparib plus bevacizumab

#### Study design and treatment, including planned sample size, planned study period, and study procedures



# Outcome measures/end points

#### **Primary end points**

PFS per RECIST v1.1 by BICR. The study will meet its primary objective if either olaparib alone or olaparib plus bevacizumab provides longer PFS vs bevacizumab plus 5-FU

#### Secondary end points

OS, ORR, and DOR per RECIST v1.1 by BICR; safety

## **Exploratory end points**

Include PFS2 by investigator assessment; HRQoL using the EORTC QLQ-C30, EORTC QLQ-C29, and EQ-5D-5L instruments; molecular biomarkers and pharmacokinetics of olaparib alone and olaparib plus bevacizumab

### Glossary

5-FU, 5-fluorouracil; AE, adverse event; BICR, blinded independent central review; BID, twice daily; CR, complete response; CRC, colorectal cancer; CT, computed tomography; CTCAE, Common Terminology Criteria for Adverse Events; DOR, duration of response; ECOG, Eastern Cooperative Oncology Group; FOLFOX, folinic acid, 5-FU, and oxaliplatin; HRQoL, health-related quality of life; IV, intravenous; MRI, magnetic resonance imaging; NCI, National Cancer Institute; ORR, objective response rate; OS, overall survival; PFS, progression-free survival; PFS2, time from randomization to second documented disease progression or death due to any cause, whichever occurs first; PO, orally; PR, partial response; Q2W, every 2 weeks; Q8W, every 8 weeks; Q12W, every 12 weeks; R, randomization; RECIST v1.1, Response Evaluation Criteria in Solid Tumors version 1.1; SD, stable disease.