

Rubraca™ (rucaparib) – New Orphan Drug Approval

- On December 19, 2016, the [FDA announced](#) the approval of [Clovis Oncology's Rubraca \(rucaparib\)](#), indicated as monotherapy for the treatment of patients with deleterious BRCA mutation (germline and/or somatic) associated advanced ovarian cancer who have been treated with two or more chemotherapies.
 - Patients should be selected for therapy based on an FDA-approved companion diagnostic for Rubraca. Clovis Oncology, in partnership with Foundation Medicine, has co-developed the companion diagnostic test, FoundationFocus™ CDx_{BRCA}, to identify patients for Rubraca treatment.
 - Rubraca was approved under the FDA's accelerated approval program. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trials.
- According to the [National Cancer Institute](#), about 22,280 women will be diagnosed with ovarian cancer and an estimated 14,240 will die of this disease in 2016. Approximately 15 – 20% of patients with ovarian cancer have a BRCA gene mutation.
- Rubraca is a poly ADP-ribose polymerase (PARP) inhibitor that blocks an enzyme involved in repairing damaged DNA. By blocking this enzyme, DNA inside the cancerous cells with damaged BRCA genes may be less likely to be repaired, leading to cell death and possibly a slow-down or stoppage of tumor growth.
- The safety and efficacy of Rubraca were based on two single-arm studies of 106 patients with BRCA-mutated advanced ovarian cancer who had been treated with ≥ 2 chemotherapy regimens.
 - Objective response rate was 54% (95% CI: 44, 64).
 - Median duration of response was 9.2 months (95% CI: 6.6, 11.6).
- Warnings and precautions of Rubraca include myelodysplastic syndrome/acute myeloid leukemia and embryo-fetal toxicity.
- The most common adverse events ($\geq 20\%$) with Rubraca use were nausea, fatigue (including asthenia), vomiting, anemia, abdominal pain, dysgeusia, constipation, decreased appetite, diarrhea, thrombocytopenia, and dyspnea.
- The most common laboratory abnormalities ($\geq 35\%$) with Rubraca use were increase in creatinine, increase in alanine aminotransferase (ALT), increase in aspartate aminotransferase (AST), decrease in hemoglobin, decrease in lymphocytes, increase in cholesterol, decrease in platelets, and decrease in absolute neutrophil count.
- The recommended dose of Rubraca is 600 mg (two 300 mg tablets) orally twice daily.
 - Continue treatment until disease progression or unacceptable toxicity.

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- To manage adverse reactions, consider interruption of treatment or dose reduction per the prescribing information.
- Clovis Oncology immediately launched Rubraca. Rubraca is available as 200 mg and 300 mg tablets.



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