

**GOG-0261: A Randomized Phase III Trial of Paclitaxel Plus Carboplatin Versus Ifosfamide Plus Paclitaxel in Chemotherapy -Naive Patients with Newly Diagnostic Stage I-IV Persistent or Recurrent Carcinosarcoma (Mixed Mesodermal Tumors) of the Uterus or Ovary**

*Fast Facts*

No drugs provided.

CTC v3; RECIST v1.0; AJCC staging book

**Eligible Patients**

1. Patients must have newly diagnosed Stage I-IV, persistent or recurrent (including unstaged) uterine or ovarian carcinosarcoma (malignant mixed mullerian tumor- MMMT) and be chemotherapy naive as directed against uterine or ovarian carcinosarcoma. Review of the pathologic specimen from the uterus or ovary is required. Unstaged patients (patients who have not had hysterectomy or ovarian surgery) are eligible and should be included as "unstaged" if the only histologic (pathology) documentation of the disease is a biopsy or curettage of the uterus. If these patients have documented metastatic disease, it should be assigned the appropriate Stage (III/IV).
2. Patients may have received prior adjuvant external beam radiation therapy and/or vaginal brachytherapy. Patients should be at least 4 weeks from the completion of external beam radiotherapy prior to beginning protocol chemotherapy. Patients do not need to be delayed if receiving vaginal brachytherapy.
3. Patients must have a GOG Performance Status of 0, 1, or 2.
4. Patients must have recovered from effects of recent surgery, radiotherapy or other therapy.
5. Patients must be free of active infection requiring antibiotics.
6. Any hormonal therapy directed at the malignant tumor must be discontinued at least one week prior to beginning protocol chemotherapy. Continuation of hormone replacement therapy is permitted.
7. Patients must have adequate:
  - a. Bone marrow function: Platelet count greater than or equal to 100,000/mcl, and ANC count greater than or equal to 1,500/mcl, equivalent to CTCAE v3.0 Grade 1.
  - b. Renal function: creatinine less than or equal to 1.5 x institutional upper limit normal (ULN), CTCAE v3.0 Grade 1.
  - c. Hepatic function: Bilirubin less than or equal to 1.5 x ULN (CTCAE v3.0 Grade 1). SGOT and alkaline phosphatase less than or equal to 2.5 x ULN (CTCAE v3.0 Grade 1). Serum Albumin should be equal to or greater than 3 g/dL.
  - d. Neurologic function: Neuropathy (sensory and motor) less than or equal to CTCAE v3.0 Grade 1.
8. Patients must have signed an approved informed consent and authorization permitting release of personal health information.
9. Patients of childbearing potential must have a negative serum pregnancy test prior to study entry and be practicing an effective form of contraception.
10. Patients may have measurable disease or non-measurable disease. Measurable disease is defined as at least one lesion that can be accurately measured in at least one dimension (longest dimension to be recorded). Each lesion must be  $\geq 20$  mm when measured by conventional techniques, including palpation, plain x-ray, CT, and MRI, or  $\geq 10$  mm when measured by spiral CT. Measurable disease patients must have at least one "target lesion" to be used to assess progression on this protocol as defined by RECIST (Section 8). Tumors within a previously irradiated field will be designated as "non-target" lesions unless progression is documented or a biopsy is obtained to confirm persistence at least 90 days following completion of radiation therapy.
11. Patients must be 18 years of age or older.

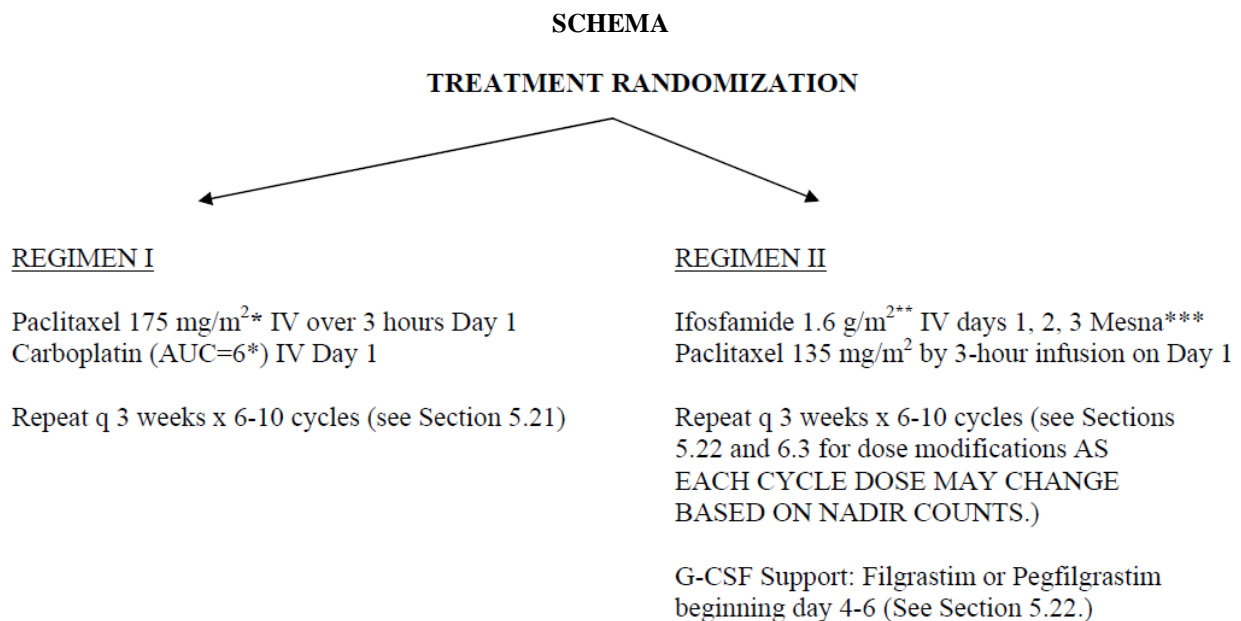
**Ineligible Patients**

1. Patients who have received prior cytotoxic chemotherapy for management of uterine or ovarian carcinosarcoma.
2. Patients with a history of other invasive malignancies or with a concomitant invasive malignancy, with the exception of non-melanoma skin cancer, if there is any evidence of other malignancy being present within the last five years. Patients are also ineligible if their previous cancer treatment contraindicates this protocol therapy.

3. Patients for whom radiotherapy is planned after or during study chemotherapy prior to progression of cancer.
4. Patients with a known hypersensitivity to E. coli-derived drug preparations (Pegfilgrastim and Filgrastim).
5. Patients with a known hypersensitivity to mesna or other thiol compounds.
6. Patients who are not biopsy proven to have carcinosarcoma of the uterus or ovary.

### Pre-Study Parameters

1. History and physical including pelvic exam, toxicity assessment including neurotoxicity assessment
2. Labs including CBC with differential, CMP, Mg, PO4, CA-125, pregnancy test if childbearing potential exists
3. EKG; CT or MRI of chest, abdomen and pelvis
4. Audiogram is there is a history of hearing loss or new onset of hearing loss
5. QOL evaluations



\*Initial dose reduced to Paclitaxel 135 mg/m<sup>2</sup> and Carboplatin (AUC=5) if prior whole pelvic radiotherapy (may be escalated if patient tolerates lower dose—see Section 6.134)

\*\* Initial dose reduced to Ifosfamide 1.2 g/m<sup>2</sup>/day x 3 days if prior whole pelvic radiotherapy (subsequent dosing MAY CHANGE EACH CYCLE BASED ON NADIR COUNTS)

\*\*\* See Sec. 5.22 for Mesna administration information.