FAST FACTS

NRG CC008 - A Non-Randomized Prospective Clinical Trial Comparing the Non-Inferiority of Salpingectomy to Salpingo-Oophorectomy to Reduce the Risk of Ovarian Cancer Among BRCA1 Carriers [SOROCK]

Eligibility Criteria
1. Women 35-50 years of age, inclusive.
2. Patients who have declined or elected to defer RRSO after proper counselling to clearly explain the standard of care for BRCA1 mutation carriers (for the BLS with delayed oophorectomy arms) or patients who are undergoing RRSO (for the RRSO arm).
3. At least one intact ovary and fallopian tube is in situ at the time of counseling and consent. Prior hysterectomy is allowed provided it did not include bilateral salpingectomy. Prior tubal ligation is allowed if one intact ovary and tube are present.
4. Positive CLIA-approved test results for pathogenic or likely pathogenic germline BRCA1 mutation in the patient herself. Documentation of the result is required.
5. Premenopausal; defined as <12 months of amenorrhea. However, for those patients with ≥ 12 months of amenorrhea who may be pre-menopausal or patients with a prior hysterectomy with at least one retained ovary/tube, levels of FSH, LH, and in the pre-menopausal range per local institutional standards will be acceptable. Concurrently planned hysterectomy with salpingectomy for the BS group or with BSO for the BSO group is permitted.
6. Transvaginal ultrasound (TVUS) and CA-125 within 180 days of registration.
7. The patient or a legally authorized representative must provide study-specific informed consent prior to study entry.

Ineligibility Criteria
1. Women with a history of any prior cancer who have received chemotherapy within the past 12 months, hormonal therapy in the past 90 days, or radiotherapy to abdomen or pelvis at any prior time.
2. Prior history of ovarian cancer, including low malignant potential neoplasms (LMP), primary peritoneal carcinoma, or fallopian tube carcinoma.
3. Patients medically unfit for the planned surgical procedure.
4. Patients with abnormal screening tests (TVUS, CA-125) suspicious for occult or gross pelvic malignancy or neoplasm within the past 180 days.
   a. An abnormal TVUS is defined as morphologic or structural variations suspicious for ovarian malignancy or complex cystic lesions (simple cysts <5cm in maximal diameter are not exclusionary).
   b. An abnormal CA-125 is defined as a level >50U/ml in this study population of premenopausal women if they are not current users or oral contraceptives; an abnormal CA-125 is defined as a level >40U/ml for premenopausal women who are current users of oral contraceptives (Skates 2011).
5. Women who are currently pregnant or plan to become pregnant in the future.
NRG-CC008 SCHEMA
A NON-RANDOMIZED PROSPECTIVE CLINICAL TRIAL COMPARING THE NON-INFERIORITY OF SALPINGECTOMY TO SALPINGO-OOPHORECTOMY TO REDUCE THE RISK OF OVARIAN CANCER AMONG BRCA1 CARRIERS [SOROCK]

Women ≥ 35 and ≤ 50 years of age with BRCA1 mutations

Surgical consultation, study consent, and medical decision making

TVUS and CA125 within 6 months of study enrollment

Patient Reported Outcomes (PROs) - Baseline

Patients choose between study groups (not randomized)

BLS cohort

Bilateral salpingectomy +/- hysterectomy (BS+/- Hyst)

Tissue for tissue bank

PROs – 6 and 12 months, 24 months

CA125 annually

Crossover to Bilateral oophorectomy

CA125 annually

Medical decision making at crossover and 12 months postop

Cancer incidence annually for 20 years or until funding is exhausted

BLS – bilateral salpingectomy, BSO – bilateral salpingo-oophorectomy