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## **Intraperitoneal Chemotherapy Administration Prolongs Survival for Women with Advanced Ovarian Cancer**

*Findings Indicate That Expertise in Management of Intraperitoneal Catheters is an  
Important Issue in Administration of IP Chemotherapy*

CHICAGO (January 4, 2006) – A study featured in this month’s edition of *Gynecologic Oncology* examines the challenges associated with the administration of intra-abdominal chemotherapy, also known as intraperitoneal (IP) chemotherapy. This is a companion study to a paper released today in the *New England Journal of Medicine* showing longer survival for women who received IP chemotherapy compared with those who received the standard intravenous (IV) regimen.

The *New England Journal of Medicine* study, “Intravenous Cisplatin and Paclitaxel Versus an Intensive Regimen of Intravenous Paclitaxel, Intraperitoneal Cisplatin and Intraperitoneal Paclitaxel in Stage III Ovarian Cancer: A Gynecologic Oncology Group (GOG) Study,” found that women who received part of their chemotherapy via an IP route had a median survival 16 months longer than women who received IV chemotherapy alone (65.6 months versus 49.7 months). Women could only be enrolled in this study if they had undergone thorough surgery resulting in optimal resection of their cancers such that the largest residual tumor nodules were less than 1 cm in diameter prior to initiation of chemotherapy. Segmental bowel resections were required to remove large tumor nodules in 32% of the women treated with IP chemotherapy. This finding highlights the importance of referral of women with known or suspected ovarian cancer to physicians with special expertise and training in the surgical management of ovarian cancer.

The IP therapy was shown to improve survival even though only 42% of patients in the IP therapy arm of the study completed all the prescribed IP treatments. This highlights the importance of continuing efforts to optimize techniques for IP chemotherapy administration.

The companion study published in *Gynecologic Oncology*, “Intraperitoneal Catheter Outcomes: A Phase III Trial of Intravenous Versus Intraperitoneal Chemotherapy in Optimal Stage III Ovarian and Primary Peritoneal Cancer: A Gynecologic Oncology

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Group Study,” by Joan L. Walker, MD and colleagues identifies issues and challenges associated with the administration of IP chemotherapy in conjunction with IV chemotherapy. These include proper surgical insertion and maintenance of IP catheters, as well as management of adverse events such as catheter obstruction, infection and bowel complications.

“IP chemotherapy’s success is dependent upon appropriate surgical resection, patient selection, and training of the physicians and nurses,” said Dr. Walker, Chief, Section of Gynecologic Oncology, Department of Obstetrics and Gynecology, University of Oklahoma. “We hope intraperitoneal chemotherapy will be embraced by the oncology community treating ovarian cancer, and will be translated into an improvement in overall survival and quality of life for these women.”

“The Society of Gynecologic Oncologists (SGO) and its members are encouraged by the latest findings on IP chemotherapy,” said Beth Karlan, MD, SGO President and Director of the Women’s Cancer Research Institute and the Division of Gynecologic Oncology at the Cedars-Sinai Medical Center. “IP chemotherapy should be considered by oncologists in women who have had optimal surgical resection for ovarian cancer.”

Ovarian cancer is the leading cause of death from a gynecologic malignancy in the United States. In 2005, the American Cancer Society estimates that there will be approximately 22,000 new cases of ovarian cancer identified in this country and more than 16,000 women will die from the disease.

A position statement from the SGO regarding the findings of both studies can be found on the SGO Web site at [www.sgo.org](http://www.sgo.org).

#### ***About SGO***

*The SGO is a national medical specialty organization of physicians who are trained in the comprehensive management of women with malignancies of the reproductive tract. Its purpose is to improve the care of women with gynecologic cancer by encouraging research, disseminating knowledge which will raise the standards of practice in the prevention and treatment of gynecologic malignancies and cooperating with other organizations interested in women’s health care, oncology and related fields. The Society’s membership is primarily comprised of gynecologic oncologists, as well as other related medical specialists such as, medical oncologists, radiation oncologists and pathologists. SGO members provide multidisciplinary cancer care including chemotherapy, radiation therapy, supportive care and surgery. More information on the SGO can be found at [www.sgo.org](http://www.sgo.org).*

#### ***About GOG***

*The GOG is an international non-profit organization dedicated to clinical research in the field of gynecologic cancer. The purpose of the GOG is to improve the treatment of gynecologic cancer. These goals are addressed through research encompassing surgery, radiation therapy, chemotherapy, pathology, immunology and/or gynecologic nursing. To promote this mission, the GOG receives support from the National Cancer Institute (NCI) of the National Institutes for Health. The GOG has a history of establishing treatment standards for ovarian cancer, demonstrating improved survival with platinum therapy in the early 1980s and again with the combination of Taxol and platinum in the mid-1990s. More information can be found at [www.GOG.org](http://www.GOG.org).*