**BACKGROUND**

- **Approximately 1%** of US women will be diagnosed with epithelial ovarian cancer (OC) during their lifetime.
- **The survival rate of women diagnosed with OC is less than 50%**.
- As standard treatments with platinum and taxane-based chemotherapy have reached a benefits plateau, novel therapeutic agents and maintenance treatment have attracted increased interest.
- A better understanding of germline and somatic BRCA mutations, homologous recombination deficiency (HRD) status and platinum-sensitivity of the tumor have all aided in improved treatment selection for OC patients.
- Studies show OC patients who achieve a response to platinum-based chemotherapy may benefit from maintenance therapy, to induce a lasting remission or extend the time interval before progression without any deleterious impact on quality of life.
- Maintenance therapy options for OC patients include chemotherapy, antiangiogenic agents, and poly(ADP-ribose) polymerase inhibitors (PARP).
- While somewhat better response rates have been observed in OC patients carrying BRCA mutations, maintenance therapy with PARPs ( niraparib, olaparib, and rucaparib) shows improved PFS in all patients irrespective of BRCA status compared to placebo.

**OBJECTIVE**

- This study was designed to assess the current utilization of maintenance therapy in second and later lines among maintenance-eligible patients in the US community oncology practices.

**METHODS**

- This real-world data analysis utilized the Integra Data Exchange (DTX) database, a deidentified data source that captures electronic medical records (EMR), practice management, and part (claims).
- Data were collected from eight practice groups (Figure 1) varying in size and geographic representation from across the United States.
- This retrospective study included 3629 patients with OC with at least two visits between July 16, 2016, and April 16, 2018.
- Data were abstracted from pre-populated fields and through manual abstraction.
- Line of therapy is defined by applying business rules on EMR.
- Data were checked for accuracy, quality, integrity, and completeness using internal manual and automated quality check procedures.

**RESULTS**

- Table 1 shows a step-by-step selection of patients with OC who were included in the study and had maintenance therapy data.

**REFERENCES**