

CRITERES DE SELECTION

Identité patient (coller étiquette patient)

ETUDE MK-7339-002-00 LYNK002

Version 1.0 du 10/03/2015 Investigateur : Arc : P. Philippe

VALIDATION DES CRITERES DE SELECTION

Critères d'inclusion

1.Participant has a histologically- or cytologically-confirmed advanced	□ oui □ non
(metastatic and/or unresectable) solid tumor (except breast or ovarian	
cancers whose tumor has a germline or somatic BRCA mutation) that is	
not eligible for curative treatment and for which standard of care therapy	
has failed. Participants must have progressed on or be intolerant to	
standard of care therapies that are known to provide clinical benefit.	
There is no limit on the number of prior treatment regimens	
Note: Enrollment of participants who have received 3 or more prior lines	
of cytotoxic chemotherapy (as defined in Section 8.1.5.1.1) will be	
capped at approximately 20% of the total study population	
2. Participant has either centrally-confirmed known or suspected	□ oui □ non
deleterious mutations in at least 1 of the specified 15 genes involved in	
HRR (ie, BRCA1, BRCA2, ATM, BARD1, BRIP1, CDK12, CHEK1,	
CHEK2, FANCL, PALB2, PPP2R2A, RAD51B,RAD51C, RAD51D, and	
RAD54L) or centrally-confirmed HRD based on the Lynparza HRR-	
HRD assay.	
3. If participants have received prior platinum (cisplatin, carboplatin, or	□ oui □ non
oxaliplatin either as monotherapy or in combination) for advanced	2 0 4 2 11011
(metastatic and/or unresectable) solid tumor, they are eligible to enter	
the study provided there has been no evidence of disease progression	
during the platinum chemotherapy.	
Note: Participants do not need to have received a previous platinum	
regimen to be considered eligible.	
4. Participant has measurable disease per RECIST 1.1 or PCWG-	□ oui □ non
modified RECIST 1.1 as assessed by the local site Investigator/radiology	2 0 4 2 11011
and confirmed by BICR. BICR must confirm the presence of	
radiologically measureable disease based on RECIST 1.1 or PCWG-	
modified RECIST 1.1 for the participant to be eligible for the	
study. Lesions situated in a previously irradiated area are considered	
measurable if progression has been demonstrated in such lesions.	
5. Participant is able to provide a newly obtained core or excisional	□ oui □ non
biopsy of a tumor lesion or either an archival formalin-fixed paraffin	
embedded (FFPE) tumor tissue block or slides. A newly obtained biopsy	
is preferred, but not required if archival tissue is available for analysis.	

Note: FFPE tumor blocks are preferred to slides. If submitting unstained	
cut slides, freshly cut slides should be submitted to the testing laboratory	
within 24 hours from the date the slides are cut (refer to Section	
8.1.12.2).	
6. Participant has a life expectancy of at least 3 months.	□ oui □ non
7. Participant is Male or Female who is at least 18 years of age at the	
time of signing the informed consent	□ oui □ non
8. Participant has an Eastern Cooperative Oncology Group (ECOG)	□ oui □ non
performance status of either 0 or 1, as assessed within 3 days of	
treatment initiation.	
Male Participants	□ oui □ non
9. A male participant must agree to use contraception as detailed in	
Appendix 5 of this protocol during the treatment period and for at least	
90 days (3 months), corresponding to time needed to eliminate any study	
intervention(s) (ie, olaparib) plus a spermatogenesis cycle, after the last	
dose of study intervention and refrain from donating sperm during this	
period. Refer to Appendix 5 for additional guidance.	
Female Participants	□ oui □ non
10. A female participant is eligible to participate if she is not pregnant	
(Appendix 5), not breastfeeding, and at least 1 of the following	
conditions applies:	
- Not a woman of childbearing potential (WOCBP) as defined in	
Appendix 5.	
OR	
- A WOCBP who agrees to follow the contraceptive guidance in	
Appendix 5 during the treatment period and for at least 30 days (1	
month) after the last dose of study intervention, corresponding to time	
needed to eliminate any study intervention(s) (ie, olaparib) plus 30 days	
(a menstruation cycle) for study interventions with risk of genotoxicity.	
Informed Consent	□ oui □ non
11. The participant (or legally acceptable representative if applicable)	
provides written informed consent for the study. The participant may	
also provide consent for FBR. However, the participant may participate	
in the main study without participating in FBR.	
Additional Categories 12. Participant has adequate argan function, as detailed in Table 2, all	□ oui □ non
12. Participant has adequate organ function, as detailed in Table 3; all	
screening laboratory tests should be performed within 10 days prior to	
the first dose of study intervention.	



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Critères de non inclusion

1. Participant has a known additional malignancy that is progressing or	□ oui □ non
has required active treatment in the last 5 years.	
Note: Participants with basal cell carcinoma of the skin, squamous cell	
carcinoma of the skin, ductal carcinoma in situ, or cervical carcinoma in	
situ that has undergone potentially curative therapy are not excluded.	
2. Participant has myelodysplastic syndrome (MDS)/acute myeloid	□ oui □ non
leukemia (AML) or with features suggestive of MDS/AML.	
3. Participant has persistent toxicities (>CTCAE Grade 2) caused by	□ oui □ non
previous cancer therapy, excluding alopecia.	- Our - Hon
4. Participant has known central nervous system (CNS) metastases and/or	□ oui □ non
carcinomatous meningitis.	
Note: Participants with previously treated brain metastases may	
participate provided they are radiologically stable (ie, without evidence	
of progression for at least 4 weeks (28 days) by repeat imaging [repeat	
imaging should be performed during study screening]), clinically stable,	
and without requirement for steroid treatment for at least 14 days prior to	
the first dose of study intervention.	
5. Participant has an active infection requiring systemic therapy.	□ oui □ non
6. Participant has a history or current evidence of any condition (eg,	□ oui □ non
cytopenia, transfusion-dependent anemia, or thrombocytopenia), therapy,	
or laboratory abnormality that might confound the results of the study,	
interfere with the participant's involvement for the full duration of the	
study, or is not in the best interest of the participant to be involved, in the	
opinion of the treating Investigator.	
7. Participant received colony-stimulating factors (eg, granulocyte	□ oui □ non
colony-stimulating factor [G-CSF], granulocyte-macrophage colony-	
stimulating factor [GM-CSF] or recombinant erythropoietin) within 28	
days prior to the first dose of study intervention.	
8. Participant is considered a poor medical risk due to a serious,	□ oui □ non
uncontrolled medical disorder, non-malignant systemic disease or active,	
uncontrolled infection. Examples include, but are not limited to,	
uncontrolled ventricular arrhythmia, recent (within 3 months) myocardial	
infarction, uncontrolled major seizure disorder, unstable spinal cord	
compression, superior vena cava syndrome, extensive interstitial bilateral	
lung disease on High Resolution Computed Tomography (HRCT) scan	
or any psychiatric disorder that prohibits obtaining informed consent.	
9. Participant has a known psychiatric or substance abuse disorder that	□ oui □ non
would interfere with cooperation with the requirements of the study.	_ 001 _ 11011

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10. Participant has a known history of human immunodeficiency virus	
(HIV) infection. Testing for HIV at screening is only required if	
mandated by local health authority. Refer to Appendix 7 for country-	
specific requirements.	
11. Participant has known active hepatitis (ie, Hepatitis B or C)	□ oui □ non
- Active hepatitis B virus (HBV) is defined by a known positive	
HBV surface antigen (HBsAg) result. Participants with a past or	
resolved HBV infection (defined as the presence of hepatitis B	
core antibody and absence of HBsAg) are eligible.	
- Participants positive for hepatitis C virus (HCV) antibody are	
eligible only if polymerase chain reaction is negative for HCV	
RNA.	
12. Participant is unable to swallow orally administered medication or	_
has a gastrointestinal disorder affecting absorption (eg, gastrectomy,	□ oui □ non
partial bowel obstruction, malabsorption).	
Prior/Concomitant Therapy	□ oui □ non
13. Participant has received prior therapy with olaparib or with any other	
PARP inhibitor.	
14. Participant has a known hypersensitivity to the components or	□ oui □ non
excipients in olaparib.	
15. Participant is currently receiving either strong (eg, itraconazole,	
	□ oui □ non
telithromycin, clarithromycin, protease inhibitors boosted with ritonavir	
or cobicistat, indinavir, saquinavir, nelfinavir, boceprevir, telaprevir) or	
moderate (eg. ciprofloxacin, erythromycin, diltiazem, fluconazole,	
verapamil) inhibitors of cytochrome P450 (CYP)3A4 that cannot be	
discontinued for the duration of the study. The required washout period	
prior to starting olaparib is 2 weeks.	
Note: a current list of strong/moderate inhibitors of CYP3A4 can be	
found at the following website:	
https://www.fda.gov/Drugs/DevelopmentApprovalProcess/Development	
Resources/DrugInteractionsLabeling	
16. Participant is currently receiving either strong (phenobarbital,	D: D
enzalutamide, phenytoin, rifampicin, rifabutin, rifapentine,	□ oui □ non
carbamazepine, nevirapine and St John's Wort) or moderate (eg.	
bosentan, efavirenz, modafinil) inducers of CYP3A4 that cannot be	
discontinued for the duration of the study. The required washout period	
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prior to starting olaparib is 5 weeks for phenobarbital and 3 weeks for	
other agents.	
Note: a current list of strong/moderate inducers of CYP3A4 can be found	
at the following website:	
https://www.fda.gov/Drugs/DevelopmentApprovalProcess/Development	
Resources/DrugInteractionsLabeling	
17. Participant has received previous allogenic bone-marrow transplant	□ oui □ non
or double umbilical cord transplantation (dUCBT).	
18. Participant has received a whole blood transfusion in the last 120	□ oui □ non
days prior to entry to the study. Packed red blood cells and platelet	
transfusions are acceptable if not performed within 28 days of the first	
dose of study intervention.	
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Prior/Concurrent Clinical Study Experience	□ oui □ non
19. Participant is currently enrolled in and receiving study therapy, was	
enrolled in a study of an investigational agent and received study therapy,	
or used an investigational device within 4 weeks (28 days) of the first	
dose of study intervention	
Note: Participants who have entered the follow-up phase of an	
investigational study may participate as long as it has been 4 weeks (28	
days) after the last dose of the previous investigational agent	
20. Participant either had major surgery within 2 weeks of starting study	□ oui □ non
intervention or has not recovered from any effects of any major surgery.	
21. Participant is involved in the planning and/or conduct of the study	□ oui □ non
(applies to both Sponsor staff and/or staff at the study site).	
22. Participant, in the judgement of the Investigator, is unlikely to	□ oui □ non
comply with the study procedures, restrictions, and requirements of the	
study.	
Date :	
Signature de l'investigateur :	