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RECOMMENDATION ON NIVOLUMAB FOR ADJUVANT TREATMENT OF OESOPHAGEAL OR GASTRO-OESOPHAGEAL JUNCTION CANCER

At its meeting of 10 May 2022, the Council for Choices in Health Care in Finland (COHERE Finland) adopted a recommendation on nivolumab for adjuvant treatment of oesophageal or gastro-oesophageal junction cancer.

COHERE Finland recommends that nivolumab be included in the national range of services for adjuvant treatment of oesophageal or gastro-oesophageal junction cancer in patients with good performance status (ECOG 0-1) who have residual pathological disease after previous neoadjuvant chemoradiotherapy and surgery. Inclusion in the range of services requires that the marketing authorisation holder and the buyer agree on a price below the wholesale list price.

The outcome of the CheckMate-577 trial shows that adjuvant nivolumab increased disease-free survival by approximately 12 months compared with placebo in patients with oesophageal or gastro-oesophageal junction cancer who had chemoradiotherapy and residual pathologic disease was present in the removed surgical specimen. Adjuvant nivolumab doubled disease-free survival compared with placebo (from just under one year to nearly two years). The result is significant given the poor prognosis for these patients. Results for overall survival are not yet available.

According to the market authorisation holder's estimate of cost effectiveness, the incremental cost-effectiveness ratio (ICER) of nivolumab compared to routine surveillance was around EUR 65,000 per quality-adjusted life year gained. However, the modelling involves significant uncertainty. The per-patient cost of medication and administration at list prices is around EUR 61,000 with a duration of treatment of 7.6 months. The estimated number of users is from 15 to 25 patients. This means that the cost of nivolumab treatment

would be approximately EUR 0.92–1.5 million with a duration of treatment of 7.6 months and EUR 1.4–2.4 million with a duration of treatment of 12 months.

Previously, there has been no active treatment available for the patient group covered by the therapeutic indication and surgery has been followed by routine surveillance. In Finland, the number of newly diagnosed cases of oesophageal cancer was 368 and of gastric cancer 603 in 2019 and gastro-oesophageal junction cancer accounted for around 60 of these cases. In 2017–2019, the one-year relative survival rate for oesophageal cancer was 41% and the five-year rate was 17%.

This is a summary of a recommendation adopted by the Council for Choices in Health Care in Finland (COHERE Finland). The actual recommendation and the related background material are available in Finnish on the website of COHERE Finland under [Recommendations](#).

The summary of the recommendation is also available in [Swedish](#) and [Finnish](#) on the website.

The Council for Choices in Health Care in Finland (COHERE Finland) works in conjunction with the Ministry of Social Affairs and Health, and its task is to issue recommendations on services that should be included in the range of public health services. Further information about service choices in healthcare is available on [the COHERE Finland website](#).