RECOMMENDATION ON

AMIVANTAMAB IN THE TREATMENT OF NON-SMALL-CELL LUNG CANCER

At its meeting of 27 October 2022, the Council for Choices in Health Care in Finland (CO-HERE Finland) adopted a recommendation on Amivantamab in the treatment of non-small-cell lung cancer.

Amivantamab is not included in the national range of services for the treatment of non-small-cell lung cancer in adult patients who have activating EGFR gene Exon 20 insertion mutations and who have previously undergone platinum chemotherapy. The rationale for the Recommendation notes that there is significant uncertainty associated with research evidence. Research evidence is not sufficient, and it is impossible to assess whether the therapeutic effect demonstrated for the treatment is clinically significant. No information is available on the cost-effectiveness of the treatment.

Amivantamab is indicated for treatment of adult patients with advanced non-small-cell lung cancer with activating epidermal growth factor receptor (EGFR) Exon 20 insertion mutations, after failure of platinum-based therapy. Amivantamab blocks the growth factor signalling and spread of cancer cells. It also activates the body's immune system. The European Commission issued a conditional marketing authorisation for Amivantamab in December 2021. Amivantamab has no other therapeutic indications.

The research evidence is based on the CHRYSALIS study (n = 114), in which more than one third (37%) of patients had partial response to Amivantamab treatment, the size of the tumour decreasing by more than 30%. The average duration of the monitoring was 12.5 months. The median progression-free survival (PFS) was 6.9 months. The study did not have a control group, the uncertainty of the evidence is very high and the clinical significance of the outcomes is uncertain.

Meritullinkatu 8, Helsinki
PO BOX 33, 00023 GOVERNMENT, FINLAND
Telephone +358 295 16001
www.palveluvalikoima.fi
email: palveluvalikoima.stm@gov.fi

As patients with the highest performance status (ECOG Performance Status Scale 0−1) were selected for the study, the outcomes may overestimate the efficacy of treatment and corresponding treatment outcomes may actually not be achievable. According to the indirect comparative study, Amivantamab increases survival compared to the data available in registers.

Adverse reactions were common. The most frequent adverse events were rash, infusion-related adverse reactions and nail toxicity. The impact of treatment on quality of life has not been studied. The optimal duration of treatment is not known.

No cost-effectiveness analysis is available for Amivantamab treatment. It is estimated that approximately 10 patients per year would be suitable for treatment.

Approximately 2,800 new cases of lung and tracheal cancer are diagnosed in Finland every year, of which 85% are non-small-cell cancers. EGFR Exon 20 insertion mutations lead to an increased risk of progression and the prognosis is poor at the advanced stage of the cancer.

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 Finnish and Swedish.

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.

MINISTRY OF SOCIAL AFFAIRS AND HEALTH

Meritullinkatu 8, Helsinki
PO BOX 33, 00023 GOVERNMENT, FINLAND
Telephone +358 295 16001
www.palveluvalikoima.fi
email: palveluvalikoima.stm@gov.fi