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A summary of a COHERE Finland recommendation

Durvalumab for treating non-small-cell lung cancer after chemoradiation

Approved at the meeting of Council for Choices in Health Care in Finland (COHERE Finland) on 12 June 2019.

According to the recommendation, durvalumab is included in the national range of services as therapy for the treatment of locally advanced, unresectable non-small-cell lung cancer in adults provided that all the following conditions are met:

- 1) the tumour expresses PD-L1 on at least 1% of tumour cells,
- 2) the disease has not progressed after platinum-based chemoradiation,
- 3) the patients' performance status is good (ECOG 0 or 1),
- 4) the marketing authorisation holder and buyer agree on a price for the product that is significantly lower than the current wholesale price and that particularly takes into account the uncertainty related to the efficacy and safety of the treatment, and
- 5) data on the number and characteristics of patients treated as well as on the realization, duration and outcomes of treatment is collected systematically and consistently.

According to the marketing authorisation, the duration of treatment cannot exceed 12 months.

The status of the treatment in the Finnish range of services will be reassessed in 2022 at the latest, by which time the above-mentioned data on the implementation and outcomes of the treatments will have to be available.

Durvalumab is an antibody in the group of PD-L1 inhibitors that identifies the PD-L1 protein on the surface of many cancer cells and adheres to it. Durvalumab enhances the immune system's ability to attack cancer cells. Compared with placebo treatment, durvalumab has been shown to prolong the time without disease progression by about one year. The results published by the time the recommendation was approved also show that patients treated with durvalumab lived longer than those treated with placebo; however, longer-term follow-up will only prove the duration of this prolongation.

Treatment with durvalumab is expensive: the extra cost of one year of durvalumab treatment per patient is estimated at EUR 87,000 calculated with the wholesale price excluding tax. According to the Finnish Medicines Agency Fimea's estimate, approximately 45 patients per year in Finland would qualify for durvalumab treatment and the budgetary impact would be about EUR 4 million. The cost-effectiveness of durvalumab treatment has not been estimated in Finland, but according to a Swedish analysis, its extra costs per one quality-adjusted life year (incremental cost-effectiveness ratio) would be around EUR 81,000. Without a price reduction, the costs of durvalumab treatment are high with regard to the uncertainty related to its expected health benefit and therapeutic value. Therefore, a precondition for this recommendation is that the pharmaceutical company and the buyer of the product agree on a price that is significantly lower than the wholesale price.

Currently, the standard care for locally advanced, unresectable non-small-cell lung cancer after chemoradiation is follow-up observation. Lung cancer prognosis is poor on average, and the overall 5-year survival rate after diagnosis is only about 15 per cent.

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: www.palveluvalikoima.fi.

