

SUMMARY OF COHERE FINLAND'S RECOMMENDATION CONCERNING THE USE OF DURVALUMAB PLUS PLATINUM-ETOPOSIDE IN THE FIRST-LINE TREATMENT OF EXTENSIVE-STAGE SMALL-CELL LUNG CANCER

The recommendation was approved by COHERE Finland's meeting on 17 June 2021.

According to the recommendation, the combination of durvalumab plus platinum-etoposide is not included in the national service choices in the treatment of extensive-stage small-cell lung cancer. In accordance with the assessment of the Council for Choices in Health Care in Finland, the effectiveness of the combination therapy is low and costs high in proportion to its therapeutic value.

Durvalumab is an immunotherapy for cancer (PD-L1 antibody) that increases the ability of the immune system to attack cancer cells and slows down the progress of the disease. The combination of durvalumab plus platinum-etoposide is indicated for first-line treatment of extensive-stage small-cell lung cancer. The recommendation is based on the open-label phase III CASPIAN study of durvalumab combination therapy (durvalumab + platinum-etoposide, n=268) versus platinum-etoposide (n=269).

In patients who received durvalumab combination therapy, the median overall survival was 2.7 months longer than in patients who received platinum-etoposide alone (12.9 vs. 10.5 months). The one-year overall survival was 53% in the patients in the durvalumab group and 39% in the control group. The two-year overall survival rates were 22% and 14%, respectively. Moreover, progression-free survival was slightly longer in patients who received durvalumab combination therapy. It appears that the differences between the groups emerged during the durvalumab maintenance phase, or approximately six months after the start of the treatment. Durvalumab might therefore provide additional benefit in particular to patients that proceed to the maintenance phase. For the time being, no obvious factors

predictive of treatment efficacy have been identified. The study subjects were young and in good health compared to Finnish lung cancer patients.

The additional cost of the treatment compared with the currently used platinum-etoposide therapy is significant, approximately EUR 78,000 for each treatment cycle of approximately seven months. According to Fimea's estimate, there are annually 114–145 patients in Finland eligible for the treatment.

Small-cell lung cancer is a rapidly progressing subtype of lung cancer that metastasises in an early phase. In more than one in two patients, the disease has already metastasised when it is diagnosed. Approximately 370 new cases are diagnosed annually in Finland. According to the Finnish Cancer Registry, the median overall survival of patients diagnosed in 2014–2018 was 4.5 months.

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](#).