

Resolution



of the Federal Joint Committee (G-BA) on an Amendment of the Pharmaceuticals Directive (AM-RL):

Annex XII – Benefit Assessment of Medicinal Products with New Active Ingredients According to Section 35a SGB V Entrectinib (ROS1-positive, Advanced Non-small Cell Lung Cancer)

of 18 February 2021

At its session on 18 February 2021 the Federal Joint Committee (G-BA) resolved to amend the Pharmaceuticals Directive (AM-RL) in the version dated 18 December 2008/22 January 2009 (Federal Gazette, BAnz. No. 49a of 31 March 2009), as amended on DD Month YYYY (Federal Gazette, BAnz AT DD MM YYYY BX), as follows:

- I. Annex XII shall be amended in alphabetical order to include the active ingredient entrectinib as follows:**

Entrectinib

Resolution of: 18 February 2021

Entry into force on: 18 February 2021

Federal Gazette, BAnz AT DD MM YYYY Bx

Therapeutic indication (according to the marketing authorisation of 31 July 2020):

Rozlytrek as monotherapy is indicated for the treatment of adult patients with ROS1-positive, advanced non-small cell lung cancer (NSCLC) not previously treated with ROS1 inhibitors.

Rozlytrek as monotherapy is indicated for the treatment of adult and paediatric patients 12 years of age and older with solid tumours expressing a neurotrophic tyrosine receptor kinase (NTRK) gene fusion,

- who have a disease that is locally advanced, metastatic or where surgical resection is likely to result in severe morbidity, and
- who have not received a prior NTRK inhibitor
- who have no satisfactory treatment options

Therapeutic indication of the resolution (resolution of 18 February 2021):

Rozlytrek as monotherapy is indicated for the treatment of adult patients with ROS1-positive, advanced non-small cell lung cancer (NSCLC) not previously treated with ROS1 inhibitors.

1. Additional benefit of the medicinal product in relation to the appropriate comparator therapy

Adult patients with ROS1-positive, advanced non-small cell lung cancer (NSCLC) not previously treated with ROS1 inhibitors

Appropriate comparator therapy:

Crizotinib

Extent and probability of the additional benefit of entrectinib compared with crizotinib:

An additional benefit is not proven.

Study results according to endpoints:

There are no suitable data that would allow for the assessment of the additional benefit.

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ Risk of bias	Summary
Mortality	n.a.	There are no suitable data available.
Morbidity	n.a.	There are no suitable data available.
Health-related quality of life	n.a.	There are no suitable data available.
Side effects	n.a.	There are no suitable data available.
Explanations: ↑: statistically significant and relevant positive effect with low/unclear reliability of data ↓: statistically significant and relevant negative effect with low/unclear reliability of data ↑↑: statistically significant and relevant positive effect with high reliability of data ↓↓: statistically significant and relevant negative effect with high reliability of data ↔: no statistically significant or relevant difference ∅: There are no usable data for the benefit assessment. n.a.: not assessable		

2. Number of patients or demarcation of patient groups eligible for treatment

approx. 462–1274 patients

3. Requirements for a quality-assured application

The requirements in the product information are to be taken into account. The European Medicines Agency (EMA) provides the contents of the product information (summary of product characteristics, SmPC) for Rozlytrek (active ingredient: entrectinib) at the following publicly accessible link (last access: 11 January 2021):

https://www.ema.europa.eu/en/documents/product-information/rozlytrek-epar-product-information_de.pdf

Treatment with entrectinib should only be initiated and monitored by specialists in internal medicine, haematology, and oncology, specialists in internal medicine and pneumology, specialists in pulmonary medicine, and specialists participating in the Oncology Agreement who are experienced in the treatment of adult patients with non-small cell lung cancer.

A validated test is required for the selection of patients with ROS1-positive NSCLC. ROS1-positive status must be confirmed before initiating therapy with entrectinib.

This medicinal product was approved under “special conditions”. This means that further evidence of the benefit of the medicinal product is anticipated. The European Medicines Agency (EMA) will assess new information on this medicinal product at a minimum once per year and update the product information where necessary.

4. Treatment costs

Annual treatment costs:

Designation of the therapy	Annual treatment costs/patient
Medicinal product to be assessed:	
Entrectinib	€ 111,758.62
Appropriate comparator therapy:	
Crizotinib	€ 65,994.19

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 1 February 2021

Costs for additionally required SHI services: not applicable

II. The resolution will enter into force with effect from the day of its publication on the internet on the website of the G-BA on 18 February 2021.

The period of validity of the resolution is limited to 31 December 2027.

The justification to this resolution will be published on the website of the G-BA at www.g-ba.de.

Berlin, 18 February 2021

Federal Joint Committee
in accordance with Section 91 SGB V
The Chair

Prof. Hecken