

Pembrolizumab (new therapeutic indication: small intestine cancer with MSI-H or dMMR, pretreated)

Resolution of:19 January 2023Entry into force on:19 January 2023Federal Gazette, BAnz AT 23 02 2023 B1

until: unlimited

New therapeutic indication (according to the marketing authorisation of 25 April 2022):

Keytruda as monotherapy is indicated for the treatment of the following MSI-H or dMMR tumours in adults with:

- unresectable or metastatic gastric, small intestine, or biliary cancer, who have disease progression on or following at least one prior therapy.

Therapeutic indication of the resolution (resolution of 19 January 2023):

Keytruda as monotherapy is indicated for the treatment of the following MSI-H or dMMR tumours in adults with:

- unresectable or metastatic small intestine cancer with disease progression on or following at least one prior therapy.
- **1.** Additional benefit of the medicinal product in relation to the appropriate comparator therapy

Adults with unresectable or metastatic small intestine cancer with microsatellite instabilityhigh (MSI-H) or with mismatch repair deficiency (dMMR) and disease progression on or following at least one prior therapy

Appropriate comparator therapy:

Therapy according to doctor's instructions

Extent and probability of the additional benefit of pembrolizumab compared to the appropriate comparator therapy:

An additional benefit is not proven.

Study results according to endpoints:¹

Adults with unresectable or metastatic small intestine cancer with microsatellite instabilityhigh (MSI-H) or with mismatch repair deficiency (dMMR) and disease progression on or following at least one prior therapy

¹ Data from the dossier assessment of the Institute for Quality and Efficiency in Health Care (IQWiG) (A22-78) unless otherwise indicated.

No adequate data are available to allow an assessment of the additional benefit.

Summary of results for relevant clinical	endpoints
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Endpoint category	Direction of effect/ risk of bias	Summary				
Mortality	n.c.	There are no assessable data.				
Morbidity	n.c.	There are no assessable data.				
Health-related quality of life	n.c.	There are no assessable data.				
Side effects	n.c.	There are no assessable data.				
 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 ↓↓ statistically significant and relevant negative effect with high reliability of data ↓↓ statistically significant or relevant difference Ø: There are no usable data for the benefit assessment. 						
n.c.: not calculable						

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

Adults with unresectable or metastatic small intestine cancer with microsatellite instabilityhigh (MSI-H) or with mismatch repair deficiency (dMMR) and disease progression on or following at least one prior therapy

approx. 40 – 380 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 Keytruda (active ingredient: pembrolizumab) at the following publicly accessible link (last access: 3 January 2023):

https://www.ema.europa.eu/en/documents/product-information/keytruda-epar-productinformation_en.pdf

Treatment with pembrolizumab should only be initiated and monitored by specialists in internal medicine, haematology and oncology as well as specialists in internal medicine and gastroenterology and other specialists participating in the Oncology Agreement, all of whom are experienced in the treatment of patients with small intestine cancer.

Before initiation of therapy with pembrolizumab, the presence of microsatellite instabilityhigh (MSI-H) or mismatch repair deficiency (dMMR) should be confirmed by a validated test in a tumour sample.

In accordance with the EMA requirements regarding additional risk minimisation measures, the pharmaceutical company must provide training material that contains information for medical professionals and patients. The training material contains, in particular, instructions on the management of immune-mediated side effects potentially occurring with pembrolizumab as well as on infusion-related reactions.

4. Treatment costs

Annual treatment costs:

Adults with unresectable or metastatic small intestine cancer with microsatellite instabilityhigh (MSI-H) or with mismatch repair deficiency (dMMR) and disease progression on or following at least one prior therapy

Designation of the therapy	Annual treatment costs/ patient				
Medicinal product to be assessed:					
Pembrolizumab	€ 93,522.22				
Appropriate comparator therapy:					
Therapy according to doctor's instructions ²					
Best supportive care ³	Different from patient to patient				

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 1 January 2023)

Costs for additionally required SHI services: not applicable

Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Pembrolizumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1	8.7 - 17.4	€ 870 - € 1,740

 $^{^{2}}$ In addition to BSC, the following treatment options are also considered suitable comparators in a clinical study: 5-fluorouracil + folinic acid + irinotecan (FOLFIRI), irinotecan, nab-paclitaxel, nivolumab ± ipilimumab. However, the active ingredients mentioned are not approved in the therapeutic indication, which is why the costs are not presented.

³ In the case of a comparison with best supportive care, also to be used additionally for the medicinal product to be assessed.

5. Medicinal products with new active ingredients according to Section 35a, paragraph 3, sentence 4 SGB V that can be used in a combination therapy with Pembrolizumab

Medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V are medicinal products with the following new active ingredients that can be used in a combination therapy with pembrolizumab for the treatment of unresectable or metastatic small intestine cancer with microsatellite instability-high (MSI-H) or with a mismatch repair deficiency (dMMR) and progression of the disease on or following at least one previous therapy:

Adults with unresectable or metastatic small intestine cancer with microsatellite instabilityhigh (MSI-H) or with mismatch repair deficiency (dMMR) and disease progression on or following at least one prior therapy

 No active ingredient that can be used in a combination therapy that fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.