

## PROVINCIAL FUNDING SUMMARY

Panitumumab (Vectibix) for Metastatic Colorectal Cancer

pERC Recommendation: Recommends with conditions For further details, please see <u>pERC Final Recommendation</u>

Notification to Implement Issued by pCODR: December 18, 2016

This information is current as of March 8, 2018.

Note: Funding criteria as listed on the decision date. Please refer to the provincial drug programs for the most recent funding criteria and program eligibility.

PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
BC	Funded	Nov 1, 2017	First line treatment of metastatic colorectal adenocarcinoma not suitable for bevacizumab therapy. Note: Patient treated with this regimen would not be eligible for:  • second-line bevacizumab therapy, including those who have undergone resection of metastasis and therefore were not suitable for first-line bevacizumab therapy, or  • third-line panitumumab therapy (GIAVPANI)  o Wild type RAS (tested on primary or metastatic tumour*)  o ECOG performance status 0-2.  o Adequate marrow reserve (ANC greater than or equal to 1.2 x 109 /L, platelets greater than 100 x 109 /L.)  o Adequate renal (Creatinine less than or equal to 1.5 x ULN) and liver function (bilirubin less than or equal to 26 mmol/L; AST/ Alkaline Phosphatase less than or equal to 5 x ULN.)  o A BCCA "Compassionate Access Program" or "Undesignated Indication" request with appropriate clinical information for each patient must be approved prior to treatment.  o Caution in patients with: 1) previous pelvic radiotherapy; 2) recent MI; 3) uncontrolled angina, hypertension, cardiac arrhythmias, congestive heart failure, or other serious medical illness.  o Caution in patients with baseline greater than 3 loose BM per day (in patients without colostomy or ileostomy.)  o Caution in patients with symptomatic peripheral neuropathy.  *www.bccancer.bc.ca/health-professionals/professional-resources/laboratory-services/pathology.



PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
AB	Under provincial consideration		
SK	Funded	Aug 2, 2017	In addition to combination chemotherapy for the treatment of patients with wild-type RAS metastatic colorectal cancer in the first-line treatment setting who have a contraindication or intolerance to Bevacizumab, and who would otherwise be treated only with combination chemotherapy. Patients should have good performance status. Treatment should continue until unacceptable toxicity or disease progression.
МВ	Funded	Nov 1, 2017	In addition to combination chemotherapy for the treatment of patients with wild type RAS metastatic colorectal cancer in the first-line treatment setting who have a contraindication or intolerance to bevacizumab and who would otherwise be treated with combination therapy. Patients should have good performance status.
ON	Funded	Sept 1, 2017	Panitumumab is used in addition to combination chemotherapy for the treatment of patients with wild-type RAS metastatic colorectal, small bowel, or appendiceal cancer in the first line treatment setting who have a contraindication or intolerance to bevacizumab and who would otherwise be treated only with combination therapy. Patients should have good performance status.
NS	Funded	Feb 1, 2018	In addition to combination chemotherapy for the treatment of patients with wild-type RAS MCRC in the first line treatment setting who have a contraindication or intolerance to bevacizumab and who would otherwise be treated only with combination chemotherapy. Patients should have a good performance status. Treatment should continue until unacceptable toxicity or disease progression.
NB	Funded	Dec 20, 2017	In addition to combination chemotherapy, as first line treatment for patients with wild type (WT) RAS metastatic colorectal cancer who have a contraindication or intolerance to bevacizumab and who otherwise would be treated only with combination chemotherapy. Patients must have a good performance status. Treatment should be discontinued upon disease progression or unacceptable toxicity.



PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
NL	Funded	Aug 3, 2017	In addition to combination chemotherapy for the treatment of patients with wild-type RAS mCRC in the first-line treatment setting who have a contraindication or intolerance to bevacizumab and who would otherwise be treated only with combination therapy. Patients should have good performance status. Treatment should continue until unacceptable toxicity or disease progression. A contraindication or intolerance to bevacizumab, defined as: – High risk of bleeding or wound healing issues due to temporal proximity to surgery – recently received or planned for resectable/potentially resectable liver metastases. – A history of cardiovascular disease, or established class-specific side effects to bevacizumab such as hypertension, thromboembolic events, atrial fibrillation, as well as, proteinuria, risk of or presence of fistulae, risk of or current GI perforation, primary tumour in place, active bleeding, non-healing wound, ulcer, recent trauma, etc.
PEI	Under provincial consideration		

Under provincial consideration means that the province is reviewing pCODR's recommendation. This may include the province working with the drug manufacturer to reach an agreement for a drug product that both parties can accept, in particular in cases where the pCODR Expert Review Committee has recommended that the drug be funded only on the condition of cost-effectiveness being improved to an acceptable level. This may occur before or after the pan-Canadian Pharmaceutical Alliance negotiations. Please contact the specific provincial drug program and/or cancer agency in your province for information about the status of a given drug product.