

CADTH Reference List

# Encorafenib for Small Bowel Adenocarcinoma or Appendiceal Adenocarcinoma With BRAF V600E Mutation

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**Authors:** Thyna Vu, Camille Santos, Hannah Loshak

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## Key Messages

- No evidence was identified regarding the clinical or cost-effectiveness of encorafenib in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma with *BRAF V600E* mutation.
- No evidence-based guidelines were identified regarding the use of encorafenib in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma with *BRAF V600E* mutation.

## Research Questions

1. What is the clinical effectiveness of encorafenib in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma with *BRAF V600E* mutation?
2. What is the cost- effectiveness of encorafenib in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma with *BRAF V600E* mutation?
3. What are the evidence-based guidelines regarding the use of encorafenib for the treatment of patients with small bowel adenocarcinoma or appendiceal adenocarcinoma with *BRAF V600E* mutation?

## Methods

### Literature Search Methods

A limited literature search was conducted by an information specialist on key resources including MEDLINE and Embase via OVID, the Cochrane Database of Systematic Reviews, the international HTA database, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy comprised both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concept was encorafenib. No filters were applied to limit the retrieval by study type. Comments, newspaper articles, editorials, conference abstracts, and letters were excluded. Where possible, retrieval was limited to the human population. The search was also limited to English-language documents published between January 1, 2016 and August 17, 2021. Internet links were provided, where available.

### Selection Criteria

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in Table 1. Full texts of study publications were not reviewed. Open-access, full-text versions of evidence-based guidelines were reviewed when abstracts were not available.

### Results

No health technology assessments, systematic reviews, randomized controlled trials, non-randomized studies, or economic evaluations were identified regarding the clinical or

**Table 1: Selection Criteria**

Criteria	Description
<b>Population</b>	Adult patients with small bowel adenocarcinoma and appendiceal adenocarcinoma with <i>BRAF V600E</i> mutation who received prior therapy
<b>Intervention</b>	Encorafenib with cetuximab, encorafenib with panitumumab
<b>Comparator</b>	Q1, Q2: Chemotherapy with or without cetuximab, chemotherapy with or without panitumumab, regorafenib, trifluridine plus tipiracil, oxaliplatin- and irinotecan-based chemotherapies, single-agent cetuximab, single-agent panitumumab, no comparator, no treatment Q3: Not applicable
<b>Outcomes</b>	Q1: Clinical effectiveness (overall survival, progression-free survival, response rate, duration of response, quality of life, safety [i.e., adverse events of Grade 3 and higher, and Grade 4, deaths]) Q2: Cost-effectiveness (e.g., cost per quality-adjusted life-years gained, incremental cost-effectiveness ratios) Q3: Recommendations regarding the use of encorafenib for small bowel adenocarcinoma and appendiceal adenocarcinoma with <i>BRAF V600E</i> mutation
<b>Study designs</b>	HTAs, systematic reviews, RCTs, non-randomized studies, evidence-based guidelines, economic evaluations

HTA = health technology assessment; Q = Question; RCT = randomized controlled trial.

cost-effectiveness of encorafenib with cetuximab or panitumumab in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma. No evidence-based guidelines were identified regarding the use of encorafenib with cetuximab or panitumumab in patients with small bowel adenocarcinoma or appendiceal adenocarcinoma.

References of potential interest that did not meet the inclusion criteria are provided in Appendix 1.

## References

### Health Technology Assessments

No literature identified.

### Systematic Reviews and Meta-analyses

No literature identified.

### Randomized Controlled Trials

No literature identified.

### Non-Randomized Studies

No literature identified.

### Economic Evaluations

No literature identified.

### Guidelines and Recommendations

No literature identified.

## Appendix 1: References of Potential Interest

### Previous CADTH Reports

1. CADTH. encorafenib (Braftovi); 2021: <https://cadth.ca/encorafenib>. Accessed 2021 Aug 17.

### Review Articles

#### *Not Specific to Small Bowel Cancer*

2. Monteiro AR, Conde RS, Basto R, et al. Targeted agents in older patients with gastrointestinal cancers - an overview. *J Geriatr Oncol*. 2021;02:02. [PubMed](#)
3. Jin J, Wu X, Yin J, et al. Identification of genetic mutations in cancer: challenge and opportunity in the new era of targeted therapy. *Front Oncol*. 2019;9:263. [PubMed](#)

### Additional References

#### *Not Specific to Small Bowel Cancer*

4. Cole P, Bofill X. 2018 Gastrointestinal Cancers Symposium. San Francisco, California, USA - January 18-20, 2018. *Drugs Future*. 2018;43(2):143-151.