

## **PROVINCIAL FUNDING SUMMARY**

Bevacizumab (Avastin) for Ovarian Cancer

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

## Notification to Implement Issued by pCODR: June 19, 2015

This information is current as of January 11, 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	STATUS	FUNDING DATE	FUNDING CRITERIA
BC	Funded	Oct 1, 2017	<ul> <li>Epithelial ovarian cancer, primary peritoneal, or fallopian tube carcinoma</li> <li>Platinum resistant disease (progression within six months of completing a platinum-containing treatment protocol)</li> <li>Any number of prior lines of treatment</li> </ul>
AB	Funded	Dec 18, 2015	Bevacizumab in combination with carboplatin and a taxane in the front line treatment of patients with advanced stage "high risk for progression" epithelial ovarian cancer, primary peritoneal cancer, or fallopian tube cancer that has good performace status. (High risk for progression defined as Stage III with > microscopic residual disease, Stage III unresectable or Stage IV). Dosing limited to 7.5 mg/kg and for a maximum of 17 cycles (in combination with chemotherapy for cycles 2 to 6 and as a single agent in maintenance therapy for up to 12 additional cycles). Definition of high risk changed November 28, 2017 (above edited)
SK	Funded	Dec 28, 2015	In combination with platinum and Paclitaxel for the front-line treatment of patients with epithelial ovarion, fallopian tube or primary peritoneal cancer who are at high risk of relapse [Stage III suboptimally debulked ( $\geq 1$ cm residual disease), Stage III unresectable or Stage IV] and who have an ECOG performance status of $\leq 2$ . Bevacizumab is approved at a dose of 7.5 mg/kg for 5 cycles (if chemotherapy is initiated $\leq 4$ weeks from surgery) or for 6 cycles (if chemotherapy is initiated > 4 weeks from surgery), then for up to 12 additional cycles, or until disease progression.

## CADTH PAN-CANADIAN ONCOLOGY DRUG REVIEW

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
MB	Funded	Nov 16, 2015	For the first line treatment of patients with: - Advanced stage epithelial ovarian cancer, primary peritoneal cancer or fallopian tube cancer patients with high risk for progression (stage III with greater than 1 cm or residual disease, stage III unresectable or stage IV) AND - An Eastern Cooperative Oncology Group performance status of 2 or less.
ON	Funded	Mar 30, 2016	In combination with paclitaxel and carboplatin for the front-line treatment of epithelial ovarian, fallopian tube or primary peritoneal cancer patients with high risk of relapse (stage III sub- optimally debulked, or stage III unresectable, or stage IV patients); AND - Patient has ECOG ≤2. Dosing Regimen: 7.5mg/kg of body weight given once every 3 weeks as an intravenous infusion - To be eligible for funding, patients must be able to start bevacizumab in combination with carboplatin and paclitaxel - Funding will be for bevacizumab in combination with carboplatin and paclitaxel in cycle 2-6 and will continue as a maintenance treatment for up to 12 additional cycles or until disease progression On a time limited basis, o Patients who started initial treatment of epithelial ovarian, fallopian tube, or primary peritoneal cancer prior to March 30, 2016 and are still on chemotherapy will be eligible for the addition of bevacizumab to the treatment regimen for the remaining chemotherapy cycles and maintenance therapy.
NS	Funded	Feb 1, 2016	As a first line treatment of patients with advanced stage ovarian cancer at a high risk of progression (stage III with > 1 cm residual disease, stage III unresectable or stage IV) epithelial ovarian, primary peritoneal or fallopian tube cancer and good performance status. This would include initial treatment in combination with chemotherapy and maintenance therapy for up to 12 additional cycles or until disease progression whichever occurs first.

## CADTH **PAN-CANADIAN** ONCOLOGY DRUG REVIEW

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
NB	Funded	Dec 15, 2016	In combination with paclitaxel and carboplatin for the front-line treatment of patients with advanced epithelial ovarian, fallopian tube or primary peritoneal cancer at high risk of relapse (stage III sub-optimally debulked*, or stage III unresectable, or stage IV) and who have an ECOG performance status of less than or equal to 2. The funded dose is bevacizumab 7.5 mg/kg intravenously every 3 weeks in combination with carboplatin and paclitaxel in cycles 2-6 followed by single agent maintenance treatment for up to 12 cycles or until disease progression, whichever occurs first. * Sub-optimal debulking is defined as patients who have greater than or equal to 1 cm of residual disease after debulking surgery.
NL	Funded	Nov 5, 2015	In combination with paclitaxel and carboplatin for the front-line treatment of epithelial ovarian, fallopian tube or primary peritoneal cancer patients with high risk of relapse (stage III sub- optimally debulked, or stage III unresectable, or stage IV patients) with an ECOG performance status $\leq 2$
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.