merative

Micromedex

COMPENDIA TRANSPARENCY TRACKING FORM

DATE: July 29, 2022

OFF-LABEL ID #: 2396

DRUG NAME: Palbociclib

OFF-LABEL USE: Malignant tumor of breast; Metastatic, HER2-negative, hormone receptor-positive, in combination with fulvestrant as initial endocrine-based therapy

COMPENDIA TRANSPARENCY REQUIREMENTS	
1	Provide criteria used to evaluate/prioritize the request (therapy)
2	Disclose evidentiary materials reviewed or considered
3	Provide names of individuals who have substantively participated in the review or disposition of the request and disclose their potential direct or indirect conflicts of interest
4	Provide meeting minutes and records of votes for disposition of the request (therapy)

EVALUATION/PRIORITIZATION CRITERIA: C, *to meet requirement 1

CODE	EVALUATION/PRIORITIZATION CRITERIA
A	Treatment represents an established standard of care or significant **advance** over current therapies
C	**Cancer** or cancer-related condition
E	Quantity and robustness of **evidence** for use support consideration
L	**Limited** alternative therapies exist for condition of interest
P	**Pediatric** condition
R	**Rare** disease
S	**Serious**, life-threatening condition

Note: a combination of codes may be applied to fully reflect points of consideration [eg, therapy may represent an advance in the treatment of a life-threatening condition with limited treatment alternatives (ASL)]

EVIDENCE CONSIDERED:

*to meet requirements 2 and 4

CITATION	STUDY-SPECIFIC COMMENTS	LITERATURE CODE
Burstein, HJ, Somerfield, MR, Barton, DL, et al: Endocrine Treatment and Targeted Therapy for Hormone Receptor-Positive, Human Epidermal Growth Factor Receptor 2-Negative Metastatic Breast Cancer: ASCO Guideline Update. J Clin Oncol Dec 10, 2021; Vol 39, Issue 35; pp. 3959-3977.		S
Llombart-Cussac, A, Perez-Garcia, JM, Bellet, M, et al: Fulvestrant-Palbociclib vs Letrozole-Palbociclib as Initial Therapy for Endocrine-Sensitive, Hormone Receptor-Positive, ERBB2-Negative Advanced Breast Cancer: A Randomized Clinical Trial. JAMA Oncol Dec 01, 2021; Vol 7, Issue 12; pp. 1791-1799.	This was an international, open-label, phase II randomized clinical trial that investigated the combination of palbociclib with either fulvestrant or letrozole in women with HR-positive, HER2-negative advanced breast cancer. The risk of bias associated with randomization, allocation concealment, performance, and attrition were deemed low risk. The risk of bias associated with detection and selective reporting were deemed moderate risk due to the primary outcome being based on unblinded investigator-assessed progression.	S
Albanell, J, Martinez, MT, Ramos, M, et al: Randomized phase II study of fulvestrant plus palbociclib or placebo in endocrine-sensitive, hormone receptor-positive/HER2-advanced breast cancer: GEICAM/2014-12 (FLIPPER). Eur J Cancer Jan 2022; Vol 161, pp. 26-37.	This was a double-blind, placebo-controlled randomized clinical trial that investigated the combination of fulvestrant with either palbociclib or placebo in women with HR-positive, HER2-negative advanced breast cancer. The risk of bias associated with randomization, allocation concealment, performance, detection, attrition, and selective reporting were all deemed low risk.	S

Literature evaluation codes: S = Literature selected; 1 = Literature rejected = Topic not suitable for scope of content; 2 = Literature rejected = Does not add clinically significant new information; 3 = Literature rejected = Methodology flawed/Methodology limited and unacceptable; 4 = Other (review article, letter, commentary, or editorial)

CONTRIBUTORS:

*to meet requirement 3

PACKET PREPARATION	DISCLOSURES	EXPERT REVIEW	DISCLOSURES
Megan Smith	None		
Stacy LaClaire, PharmD	None		
Catherine Sabatos, PharmD	None		
		Todd Gersten	None
		Jeffrey Klein	None
		Richard LoCicero	Incyte Corporation Local PI for REVEAL. Study is a multicenter, non-interventional, non-randomized, prospective, observational study in an adult population for patients who have been diagnosed with clinically overt PV and are being followed in either community or academic medical centers in the US who will be enrolled over a 12-month period and observed for 36 months.

ASSIGNMENT OF RATINGS:

*to meet requirement 4

	EFFICACY	STRENGTH OF RECOMMENDATION	COMMENTS	STRENGTH OF EVIDENCE
IBM MICROMEDEX	Evidence Favors Efficacy	Class IIa: Recommended, in Most Cases		B
Todd Gersten	Evidence Favors Efficacy	Class IIb: Recommended, in Some Cases	In the randomized Phase II FLIPPER trial, the addition of palbociclb to fulvestrant improved median PFS in patients with de novo metastatic disease, but not in those relapsing after prior adjuvant hormonal treatment.	
Jeffrey Klein	Evidence Favors Efficacy	Class IIa: Recommended, in Most Cases	The combination of Palbociclib with Fulvestrant in the first line treatment of HER2-, HR+ metastatic breast cancer showed a good degree of effectiveness when compared to placebo with Fulvestrant. No advantage was seen however when compared to the letrozole and fulvestrant combination.The high incidence of neutropenia associated with Plabociclib needs to be considered before therapy is initiated.	

Richard LoCicero	Effective	Class I: Recommended	The combination of palbociclib and fulvestrant has been studied efficacy placebo controlled randomized clinical trials demonstrating efficacy as the initial endocrine-based therapy for metastatic hormone receptor-positive breast cancer. Its use is also supported by evidence based treatment guidelines.	