

COMPENDIA TRANSPARENCY TRACKING FORM

DATE: September 27, 2023

OFF-LABEL ID #: 1413

DRUG NAME: Ceritinib

OFF-LABEL USE: Non-small cell lung cancer ROS1-rearrangement, locally advanced or metastatic, in patients previously treated with non-targeted standard 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, L, S, R *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	LITERATURE CODE
Lim, SM, Kim, HR, Lee JS, et al: Open-label, multicenter, phase II study of ceritinib in patients with non-small-cell Lung cancer harboring ROS1 rearrangement. J Clin Oncol Aug 10, 2017; Vol 35, Issue 23; pp. 2613-2618. Pubmed ID: 28520527	S
Owen DH, Singh N, Ismaila N, Masters G, Riely GJ, Robinson AG, Schneider BJ, Jaiyesimi IA. Therapy for Stage IV Non-Small-Cell Lung Cancer With Driver Alterations: ASCO Living Guideline, Version 2023.2. J Clin Oncol. 2023 Aug 20;41(24):e63-e72. doi: 10.1200/JCO.23.01055. Epub 2023 Jul 11. PMID: 37433095.	S
Parisi, F, Rossi, G, Biello, F, et al: Current state of the art on the diagnosis and the role of target therapy for treatment of ROS1-rearranged non-small cell lung cancer: a narrative review. Precis Cancer Med 2022; Vol 5, p. 25.	4

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
Stacy LaClaire, PharmD	None		
Catherine Sabatos, PharmD	None		
		John D Roberts	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
MERATIVE MICROMEDEX	Evidence Favors Efficacy	Class IIa: Recommended, in Most Cases		B
Jeffrey Klein	Evidence Favors Efficacy	Class IIb: Recommended, in Some Cases	The use of Ceritinib in previously treated NSCLC ROS-1 rearrangement patients demonstrated a favorable overall response and duration of response. The study was small and the majority of the patients were female. The degree of adverse effects of the grade 1 and 2 level were high.	
Richard LoCicero	Evidence Favors Efficacy	Class IIa: Recommended, in Most Cases	A single-arm phase II trial established efficacy of ceritinib in previously treated patients with ROS1 rearranged advanced non-small cell lung cancer. Additionally, American Society of Clinical Oncology guidelines support the use of ceritinib in this population	

Todd Gersten	Effective	Class IIa: Recommended, in Most Cases	In a small Asian study, ceritinib demonstrated robust and durable responses in ROS1-rearranged NSCLC in the second line after previous non-targeted treatment.	
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