NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Health Technology Appraisal

Avelumab for treating metastatic Merkel cell carcinoma (CDF review of TA517)

Final scope

Remit/Appraisal objective

To appraise the clinical and cost effectiveness of avelumab within its marketing authorisation for treating metastatic Merkel cell carcinoma.

Background

Merkel cell carcinoma is a rare cancer of the skin. Merkel cell carcinoma occurs when Merkel cells (cells present in the top layer of the skin that help us respond to touch) start to grow out of control. It usually presents as a lump of unbroken skin, similar to a boil or an infectious lump, often in areas of the body that receives direct sun exposure. Merkel cell carcinoma is otherwise symptomless in the initial stages making it difficult to diagnose.

The tumour node metastases system is used to grade Merkel cell carcinoma into stages I to IV. Metastatic Merkel cell carcinoma, in which the tumour has spread beyond the regional lymph nodes to other parts of the body, is generally defined as stage IV. Merkel cell carcinoma occurs more commonly in older people and in people with fairer skin. In 2010, the incidence rate was estimated to be 0.1-0.2 per 100,000 in England, equating to between 53 and 106 people per yearⁱ. Merkel cell carcinomas typically has a poor prognosis with a 5 year survival rate of 64%, dependent upon stage (stage I: 81%; stage II: 67%; stage III: 52%; stage IV: 11%)ⁱⁱ

Avelumab is recommended for previously treated metastatic Merkel cell carcinoma, and it is recommended for use within the Cancer Drugs Fund for untreated metastatic Merkel cell carcinoma (TA517). Untreated metastatic Merkel cell carcinoma is treated with chemotherapy (usually carboplatin or cisplatin with etoposide).

The technology

Avelumab (Bavencio, Merck Serono/Pfizer) is an anti-PD-L1 monoclonal antibody with a dual mechanism of action. It aims to bind and block the inhibitory signalling through PD-1/PD-L1 resulting in the activation of T-cells and cell-mediated immune responses against tumour cells or pathogens. Avelumab is administered by IV infusion.

Avelumab is indicated as monotherapy for the treatment of adult patients with metastatic Merkel cell carcinoma.

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Issue Date: February 2020

| Intervention(s) | Avelumab |
|--|---|
| Population(s) | People with untreated metastatic Merkel cell carcinoma |
| Comparators | Chemotherapy (such as cisplatin or carboplatin with or without etoposide) Best supportive care |
| Outcomes | The outcome measures to be considered include: overall survival progression-free survival response rate adverse effects of treatment health-related quality of life. |
| Economic analysis | The reference case stipulates that the cost effectiveness of treatments should be expressed in terms of incremental cost per quality-adjusted life year. The reference case stipulates that the time horizon for estimating clinical and cost effectiveness should be sufficiently long to reflect any differences in costs or outcomes between the technologies being compared. Costs will be considered from an NHS and Personal Social Services perspective. |
| Other considerations | Guidance will only be issued in accordance with the marketing authorisation. Where the wording of the therapeutic indication does not include specific treatment combinations, guidance will be issued only in the context of the evidence that has underpinned the marketing authorisation granted by the regulator. |
| Related NICE recommendations and NICE Pathways | Related Technology Appraisals: Avelumab for treating metastatic Merkel cell carcinoma (2018) NICE Technology appraisal 517. Next review: Recommendation 1.1 will be considered for review in April 2021. Related Interventional Procedures: None Related Public Health Guidance/Guidelines: |

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| | None |
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| | Related Quality Standards: |
| | 'Skin cancer' (2016). NICE quality standard 130. |
| | Related NICE Pathways: |
| | Skin cancer (updated February 2015) NICE pathway. http://pathways.nice.org.uk/pathways/skin-cancer |
| Related National Policy | Department of Health, 2011, <u>Improving outcomes: a strategy for cancer</u> . |
| | Department of Health, 2009, <u>Cancer commissioning</u> <u>guidance</u> . |
| | NHS England Manual for Prescribed Specialised Services 2016/17. Chapter 105. Specialist cancer services (adults) https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2016/06/pss-manual-may16.pdf |
| | Department of Health, NHS Outcomes Framework 2015-2016, Dec 2014. Domains 1-5. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/385749/NHS_Outcomes_Framew_ork.pdf |

References

¹ National Cancer Intelligence Network (2010) Rare skin cancer in England. Accessed November 2016

Medscape (2010) Merkel Cell Carcinoma: What we know now. Accessed January 2016