











Active substances set

Search phrase: Tracheal, bronchus, and lung cancer

Below you will find a list of active substances registered by the European Medical Agency (EMA) in the last 15 years, recommended by the European Society of Clinical Oncology (ESMO) and their reimbursement status in the country.

Tracheal, bronchus, and lung cancer

Nab-paclitaxel	Nab-Paclitaxel in combination with carboplatin is indicated for the first-line treatment of non-small cell lung cancer in adult patients who are not candidates for potentially curative surgery and/or radiation therapy.	 NO REIMBURSEMENT  ESMO
Ramucirumab	Ramucirumab in combination with erlotinib is indicated for the first-line treatment of adult patients with metastatic non-small cell lung cancer with activating epidermal growth factor receptor (EGFR) mutations. Ramucirumab in combination with docetaxel is indicated for the treatment of adult patients with locally advanced or metastatic non-small cell lung cancer with disease progression after platinum-based chemotherapy.	 NO REIMBURSEMENT  ESMO
Trametinib	Trametinib in combination with dabrafenib is indicated for the treatment of adult patients with advanced non-small cell lung cancer with a BRAF V600 mutation.	 NO REIMBURSEMENT  ESMO
Dabrafenib	Dabrafenib in combination with trametinib is indicated for the treatment of adult patients with advanced non-small cell lung cancer with a BRAF V600 mutation.	 NO REIMBURSEMENT  ESMO
Larotrectinib	Larotrectinib as monotherapy is indicated for the treatment of adult and paediatric patients with solid tumours that display a Neurotrophic Tyrosine Receptor Kinase (NTRK) gene fusion, - who have a disease that is locally advanced, metastatic or where surgical resection is likely to result in severe morbidity, and - who have no satisfactory treatment options.	 NO REIMBURSEMENT  ESMO

Selpercatinib

Selpercatinib as monotherapy is indicated for the treatment of adults with advanced RET fusion-positive non-small cell lung cancer (NSCLC) not previously treated with a RET inhibitor.

 **NO REIMBURSEMENT**
 **ESMO**

Pralsetinib

Pralsetinib is indicated as monotherapy for the treatment of adult patients with rearranged during transfection (RET) fusion-positive advanced non-small cell lung cancer (NSCLC) not previously treated with a RET inhibitor.

 **NO REIMBURSEMENT**
 **ESMO**

Tepotinib

Tepotinib as monotherapy is indicated for the treatment of adult patients with advanced non-small cell lung cancer (NSCLC) harbouring alterations leading to mesenchymal-epithelial transition factor gene exon 14 (METex14) skipping, who require systemic therapy following prior treatment with immunotherapy and/or platinum-based chemotherapy.

 **NO REIMBURSEMENT**
 **ESMO**

Capmatinib

Capmatinib as monotherapy is indicated for the treatment of adult patients with advanced non-small cell lung cancer (NSCLC) harbouring alterations leading to mesenchymal-epithelial transition factor gene exon 14 (METex14) skipping, who require systemic therapy following prior treatment with immunotherapy and/or platinum-based chemotherapy.

 **NO REIMBURSEMENT**
 **ESMO**

Gefitinib

Gefitinib is indicated as monotherapy for the treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating mutations of EGFR-TK.

 **REIMBURSEMENT WITH RESTRICTIONS**
 **ESMO**

Crizotinib

Crizotinib as monotherapy is indicated for: • The first-line treatment of adults with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC), • The treatment of adults with previously treated anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC), • The treatment of adults with ROS1-positive advanced non-small cell lung cancer (NSCLC).

 **REIMBURSEMENT WITH RESTRICTIONS**
 **ESMO**

Afatinib

Afatinib as monotherapy is indicated for the treatment of: • Epidermal Growth Factor Receptor (EGFR) TKI-naïve adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating EGFR mutation(s); • Adult patients with locally advanced or metastatic NSCLC of squamous histology progressing on or after platinum-based chemotherapy.

 **REIMBURSEMENT WITH RESTRICTIONS**
 **ESMO**

Ceritinib

Ceritinib as monotherapy is indicated for the first-line treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC). Ceritinib as monotherapy is indicated for the treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC) previously treated with crizotinib.

 **REIMBURSEMENT WITH RESTRICTIONS**
 **ESMO**

Nivolumab

Nivolumab in combination with ipilimumab and 2 cycles of platinum-based chemotherapy is indicated for the first-line treatment of metastatic non-small cell lung cancer in adults whose tumours have no sensitising EGFR mutation or ALK translocation. Nivolumab as monotherapy is indicated for the treatment of locally advanced or metastatic non-small cell lung cancer after prior chemotherapy in adults.



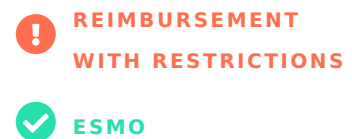
Osimertinib

Osimertinib as monotherapy is indicated for: • the adjuvant treatment after complete tumour resection in adult patients with stage IB-IIIa non small cell lung cancer (NSCLC) whose tumours have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations. • the first-line treatment of adult patients with locally advanced or metastatic NSCLC with activating EGFR mutations. • the treatment of adult patients with locally advanced or metastatic EGFR T790M mutation-positive NSCLC.



Pembrolizumab

Pembrolizumab as monotherapy is indicated for the first-line treatment of metastatic non-small cell lung carcinoma in adults whose tumours express PD-L1 with a $\geq 50\%$ tumour proportion score (TPS) with no EGFR or ALK positive tumour mutations. Pembrolizumab, in combination with pemetrexed and platinum chemotherapy, is indicated for the first-line treatment of metastatic non-squamous non-small cell lung carcinoma in adults whose tumours have no EGFR or ALK positive mutations. Pembrolizumab, in combination with carboplatin and either paclitaxel or nab-paclitaxel, is indicated for the first-line treatment of metastatic squamous non-small cell lung carcinoma in adults. Pembrolizumab as monotherapy is indicated for the treatment of locally advanced or metastatic non-small cell lung carcinoma in adults whose tumours express PD-L1 with a $\geq 1\%$ TPS and who have received at least one prior chemotherapy regimen. Patients with EGFR or ALK positive tumour mutations should also have received targeted therapy before receiving Pembrolizumab.



Alectinib

Alectinib as monotherapy is indicated for the first-line treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC). Alectinib as monotherapy is indicated for the treatment of adult patients with ALK-positive advanced NSCLC previously treated with crizotinib.



Durvalumab

Durvalumab as monotherapy is indicated for the treatment of locally advanced, unresectable non-small cell lung cancer (NSCLC) in adults whose tumours express PD-L1 on $\geq 1\%$ of tumour cells and whose disease has not progressed following platinum-based chemoradiation therapy. Durvalumab in combination with etoposide and either carboplatin or cisplatin is indicated for the first-line treatment of adults with extensive-stage small cell lung cancer (ES-SCLC).

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Brigatinib

Brigatinib is indicated as monotherapy for the treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC) previously not treated with an ALK inhibitor. Brigatinib is indicated as monotherapy for the treatment of adult patients with ALK-positive advanced NSCLC previously treated with crizotinib.

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Atezolizumab

Atezolizumab as monotherapy is indicated as adjuvant treatment following complete resection and platinum-based chemotherapy for adult patients with NSCLC with a high risk of recurrence whose tumours have PD-L1 expression on $\geq 50\%$ of tumour cells (TC) and who do not have EGFR mutant or ALK-positive NSCLC. Atezolizumab, in combination with bevacizumab, paclitaxel and carboplatin, is indicated for the first-line treatment of adult patients with metastatic non-squamous NSCLC. In patients with EGFR mutant or ALK-positive NSCLC, Atezolizumab, in combination with bevacizumab, paclitaxel and carboplatin, is indicated only after failure of appropriate targeted therapies. Atezolizumab, in combination with nab-paclitaxel and carboplatin, is indicated for the first-line treatment of adult patients with metastatic non-squamous NSCLC who do not have EGFR mutant or ALK-positive NSCLC. Atezolizumab as monotherapy is indicated for the first-line treatment of adult patients with metastatic NSCLC whose tumours have a PD-L1 expression $\geq 50\%$ TC or $\geq 10\%$ tumour-infiltrating immune cells (IC) and who do not have EGFR mutant or ALK-positive NSCLC. Atezolizumab as monotherapy is indicated for the treatment of adult patients with locally advanced or metastatic NSCLC after prior chemotherapy. Patients with EGFR mutant or ALK-positive NSCLC should also have received targeted therapies before receiving Atezolizumab. Atezolizumab, in combination with carboplatin and etoposide, is indicated for the first-line treatment of adult patients with extensive-stage small cell lung cancer (ES-SCLC).

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Dacomitinib

Dacomitinib, as monotherapy, is indicated for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR)-activating mutations.

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Lorlatinib

Lorlatinib as monotherapy is indicated for the treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC) previously not treated with an ALK inhibitor. Lorlatinib as monotherapy is indicated for the treatment of adult patients with ALK-positive advanced NSCLC whose disease has progressed after: • alectinib or ceritinib as the first ALK tyrosine kinase inhibitor (TKI) therapy; or • crizotinib and at least one other ALK TKI.

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Entrectinib

Entrectinib as monotherapy is indicated for the treatment of adult and paediatric patients 12 years of age and older with solid tumours expressing a neurotrophic tyrosine receptor kinase (NTRK) gene fusion, • who have a disease that is locally advanced, metastatic or where surgical resection is likely to result in severe morbidity, and • who have not received a prior NTRK inhibitor • who have no satisfactory treatment options. Entrectinib as monotherapy is indicated for the treatment of adult patients with ROS1-positive, advanced non-small cell lung cancer (NSCLC) not previously treated with ROS1 inhibitors.

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Ipilimumab

Ipilimumab in combination with nivolumab and 2 cycles of platinum-based chemotherapy is indicated for the first-line treatment of metastatic non-small cell lung cancer in adults whose tumours have no sensitising EGFR mutation or ALK translocation.

 **REIMBURSEMENT WITH RESTRICTIONS**

 **ESMO**

Nintedanib

Nintedanib is indicated in combination with docetaxel for the treatment of adult patients with locally advanced, metastatic or locally recurrent non-small cell lung cancer (NSCLC) of adenocarcinoma tumour histology after first-line chemotherapy.

 **FULL REIMBURSEMENT**

 **ESMO**