

Active substances set

Search phrase: Liver 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.

Liver cancer

Regorafenib

Regorafenib is indicated as monotherapy for the treatment of adult patients with hepatocellular carcinoma (HCC) who have been previously treated with sorafenib.



NO REIMBURSEMENT



ESMO

Cabozantinib

Cabozantinib is indicated as monotherapy for the treatment of hepatocellular carcinoma (HCC) in adults who have previously been treated with sorafenib.



NO REIMBURSEMENT



ESMO

Ramucirumab

Ramucirumab monotherapy is indicated for the treatment of adult patients with advanced or unresectable hepatocellular carcinoma who have a serum alpha fetoprotein (AFP) of ≥ 400 ng/ml and who have been previously treated with sorafenib.



NO REIMBURSEMENT



ESMO

Durvalumab

Durvalumab in combination with gemcitabine and cisplatin is indicated for the first-line treatment of adults with unresectable or metastatic biliary tract cancer (BTC). Durvalumab as monotherapy is indicated for the first line treatment of adults with advanced or unresectable hepatocellular carcinoma (HCC). Durvalumab in combination with tremelimumab is indicated for the first line treatment of adults with advanced or unresectable hepatocellular carcinoma (HCC).



NO REIMBURSEMENT



ESMO

Lenvatinib

Lenvatinib as monotherapy is indicated for the treatment of adult patients with advanced or unresectable hepatocellular carcinoma (HCC) who have received no prior systemic therapy.



**REIMBURSEMENT
WITH RESTRICTIONS**



ESMO

Atezolizumab

Atezolizumab, in combination with bevacizumab, is indicated for the treatment of adult patients with advanced or unresectable hepatocellular carcinoma (HCC) who have not received prior systemic therapy.



**REIMBURSEMENT
WITH RESTRICTIONS**



ESMO

Pembrolizumab

Pembrolizumab, in combination with gemcitabine and cisplatin, is indicated for the first-line treatment of locally advanced unresectable or metastatic biliary tract carcinoma (BTC) in adults. Pembrolizumab as monotherapy is indicated for the treatment of the following microsatellite instability high (MSI-H) or mismatch repair deficient (dMMR) tumours in adults with unresectable or metastatic gastric, small intestine, or biliary cancer, who have disease progression on or following at least one prior therapy.



**FULL
REIMBURSEMENT**



ESMO