Health Outcomes and Cost-Effectiveness of Atezolizumab in Small Cell Lung Cancer (CO98)

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OBJECTIVES

To describe the effectiveness of atezolizumab (ATE) in patients with previously untreated extensive-stage small cell lung cancer (ES-SCLC).
To analyse the cost-effectiveness of treatment in the context of a risk-sharing agreement (RSA) between hospital and pharmaceutical company.

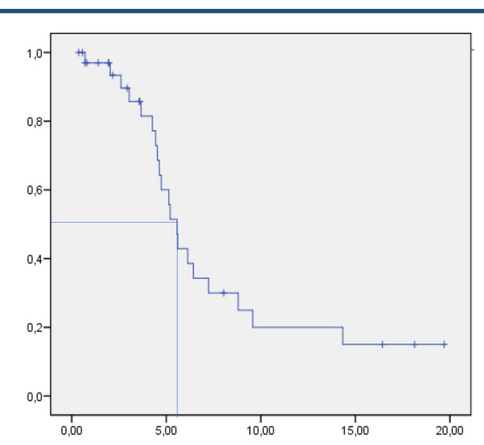
METHODS

- Study retrospective observational study.
- Population: ATE treatments for ES-SCLC initiated between August 2021 and April 2023 in a hospital area in southern Spain. Data were collected from the RSA follow-up registry.
- The effectiveness variables collected were overall survival (OS) and progression-free survival (PFS). Kaplan-Meier analysis was performed.
- The economic variable was the cost of treatment and applicable discounts according to effectiveness, for which OS was categorised into 4 values: (1)-less than 10 months, (2)-between 11-13 months, (3)-between 14-17 months, (4)-18 or more months.
- The cost per life year gained (LYG) was calculated

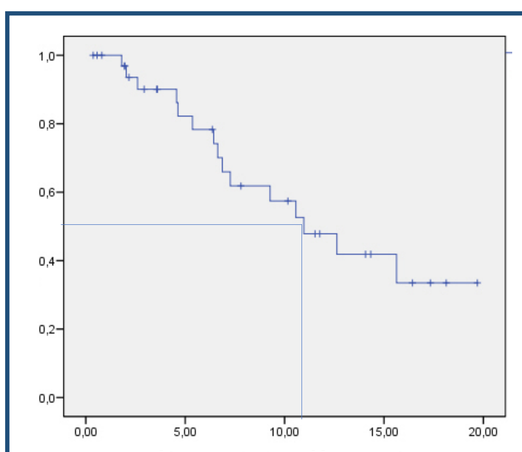
RESULTS

PATIENT DEMOGRAFIC DATA
- 35 patients (69% male)
- Age: mean 62 y (range 44-76)
- PS: ECOG 0 (43%), ECOG 1 (54%), ECOG 2 (3%).
- Brain metastases baselin: 26% patients.

TREATMENT DATA
-Median of doses administered/patient: 7 (range 1-29).
-23 patients discontinued treatment at the cut-off date,
-16 due to progression,
-4 due to death,
-2 due to adverse events and
-1 due to loss to follow-up.



Median PFS all patients
5.6 m [95% [CI 4.8-6.3]

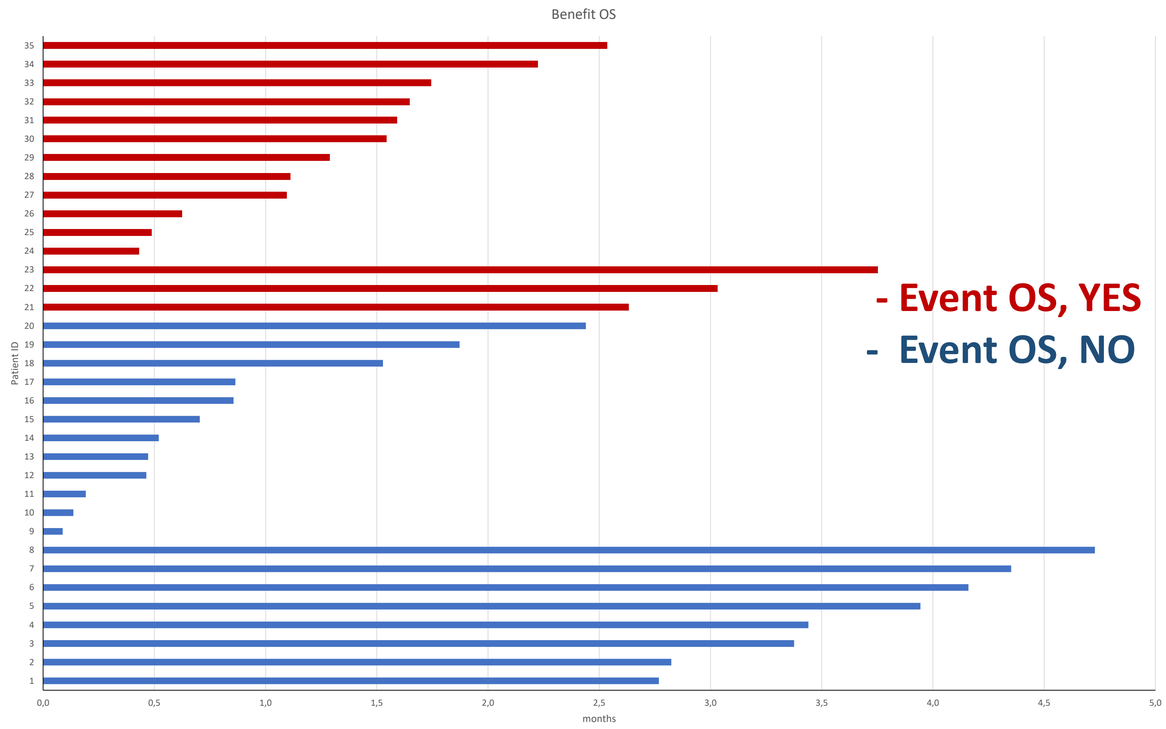


Median OS all patients
11.0 m [95% [CI 6.6-15.3]

Sixteen patients had died at the study cut-off date, 12 with OS of 10 months or less, 2 with 11-13 months, 1 with 14-17 months and 1 with 18 months or more.

OS Benefit for each patient (m) = [OS with ATE] – [OS without ATE]
[OS with ATE] = OS of this study
[OS without ATE] = [OS of this study] x [HR 0.76; 95% CI 0.60–0.95]
[OS benefit for all patients] (years) = ∑ [OS benefit for each patient]

Cost LYG = [OS benefit for all patients] / [Incremental cost of ATE therapy for all patients].



The estimated OS benefit was 65.5 months.

With applicable RSA discounts,
the calculated cost per LYG was €27,189 [95% CI: 16,692-133,535].

CONCLUSIONS

The real-world outcomes of atezolizumab in our population were similar to those reported in the pivotal Impower 133 trial.
The cost per LYG after applying risk-sharing discounts did not reach the willingness-to-pay threshold in our setting, and we considered the therapy to be cost-effective