New oncology reimbursements in Belgium

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Overview of Belgian reimbursement news

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Afatinib, Giotrif®

Afatinib is now reimbursed as monotherapy for patients with locally advanced or metastatic non-small-cell lung cancer (NSCLC) expressing an activating mutation of the EGFR tyrosine kinase and who have not recieved a prior treatment with a EGFR tyrosine kinase inhibitor. Afatinib is reimbursed for a maximum of six months. In absence of disease progression on CT or MRI, the reimbursement can be prolonged for additional periods of six months.

Treatment with afatinib should be stopped immediately once signs of RECIST disease progression are seen with medical imaging. The treating physician should evaluate this every three months, or sooner should the clinical situation require this.

Subcutaneous trastuzumab, Herceptin®

The subcutaneous formulation of Herceptin® is reimbursable for the treatment of HER2 positive breast cancer. The criteria for reimbursement of this subcutaneous formulation of the drug are similar to the reimbursement criteria for the intravenous formulation in breast cancer.

Panitumumab, Vectibix® and cetuximab, Erbitux®

Recently, the reimbursement criteria for panitumumab and cetuximab in the treatment of metastatic colorectal cancer have been restricted. In order to be eligible for reimbursement, patients should now have RAS wild type tumors (KRAS and NRAS), instead of just KRAS-wildtype. The rest of the reimbursement criteria for these agents remain the same.

Dabrafenib, Tafinlar®

Dabrafenib is reimbursable as monotherapy for adult patients with metastatic or unresectable melanoma presenting a BRAF V600 mutation. The treating physician should perform a CT or MRI scan every eight weeks in order to evaluate the response to the treatment. imaging reveals disease progression (according to RECIST 1.1), or when unacceptable toxicity is observed. The reimbursement takes into account a maximal posology of 300 mg per day.

Aromatase inhibitors

The reimbursement criteria of the aromatase inhibitors in the adjuvant treatment of women with hormone-receptor positive early breast cancer have been slightly modified. The most recent reimbursement criteria for these agents can be consulted at the following links:

http://www.riziv.fgov.be/inami_prd/ssp/cns2/Pdf/Form_Dem/6570000_FormDem_A_nl.pdf

http://www.inami.fgov.be/inami_prd/ssp/cns2/Pdf/Form_Dem/6570000_FormDem_A_fr.pdf

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