

**BEWACYZUMAB W LECZENIU
PIERWSZEGO RZUTU CHORYCH NA
NABŁONKOWEGO RAKA JAJNIKA, RAKA
JAJOWODU I PIERWOTNEGO RAKA
OTRZEWNEJ W STADIUM
ZAAWANSOWANIA III LUB IV**

ANALIZA EKONOMICZNA

Wersja 1.0

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Warszawa, 25 maja 2012

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Konflikt interesów:

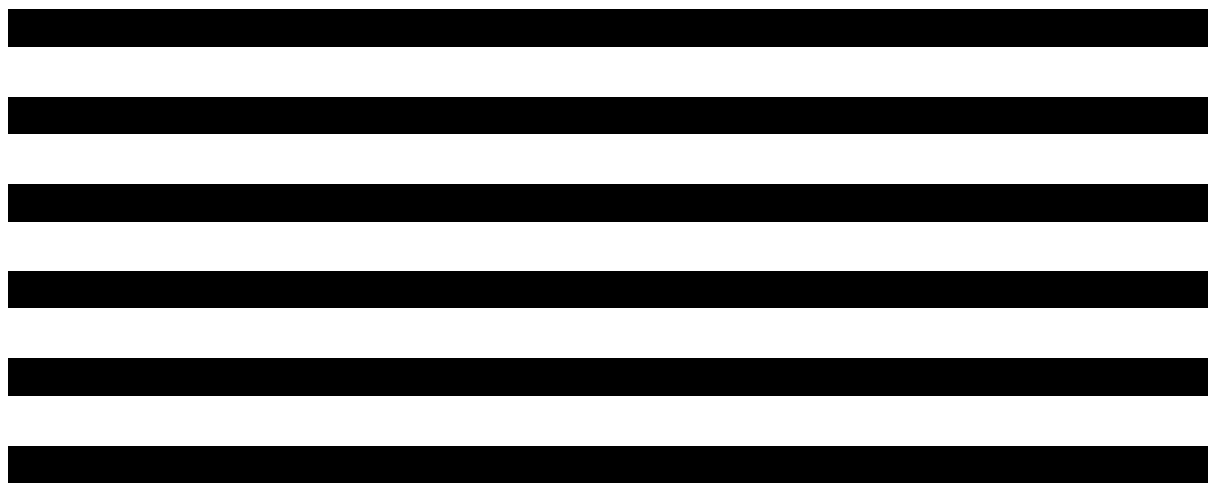
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Streszczenie

CEL I ZAKRES ANALIZY

Analiza została przygotowana w celu oceny opłacalności stosowania w Polsce bewacyzumabu (nazwa handlowa Avastin®):

- w dawce 15 mg/kg mc. w leczeniu pierwszego rzutu chorych na nabłonkowego raka jajnika, raka jajowodu, pierwotnego raka otrzewnej w stadium zaawansowania III lub IV;
- w dawce 7,5 mg/kg mc. (masy ciała) w leczeniu pierwszego rzutu chorych na nabłonkowego raka jajnika, raka jajowodu, pierwotnego raka otrzewnej w grupie chorych wysokiego ryzyka (tj. FIGO III po suboptymalnej cytoredukcji oraz IV po zabiegu chirurgicznym).

Doboru komparatorów dokonano w oparciu o *Analizę problemu decyzyjnego* [8] oraz *Analizę kliniczną* [9]. W związku z powyższym, w analizie ekonomicznej przeprowadzono porównanie opłacalności stosowania [REDACTED]

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- w dawce 15 mg/kg mc. w leczeniu pierwszego rzutu chorych na nabłonkowego raka jajnika, raka jajowodu, pierwotnego raka otrzewnej w stadium zaawansowania III lub IV;
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Doboru komparatorów dokonano w oparciu o *Analizę problemu decyzyjnego* [8] oraz *Analizę kliniczną* [9]. W *Analizie problemu decyzyjnego*

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⁴ Stopień dopasowania poszczególnych rozkładów do danych empirycznych oceniano na podstawie kryteriów informacyjnych AIC (ang. *Akaike Information Criterion* – kryterium informacyjne Akaike) i BIC (ang. *Bayesian Information Criterion* – Bayesowskie kryterium informacyjne).

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⁵ Ciężkie działania niepożądane zdefiniowano jako działania zagrażające życiu, działania związane ze stałym lub znaczącym upośledzeniem oraz działania prowadzące do hospitalizacji lub przedłużające czas hospitalizacji. Są to łącznie działania w stopniu nasilenia 3. i 4. [7]. Leczenie tych działań generować może koszty dla płatnika.

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⁷ Uwzględniono należny podatek od towarów i usług wynoszący 8%.

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⁹ Obliczono średnią ważoną, w której jako wagi przyjęto liczbę zakontraktowanych umów w poszczególnych ośrodkach

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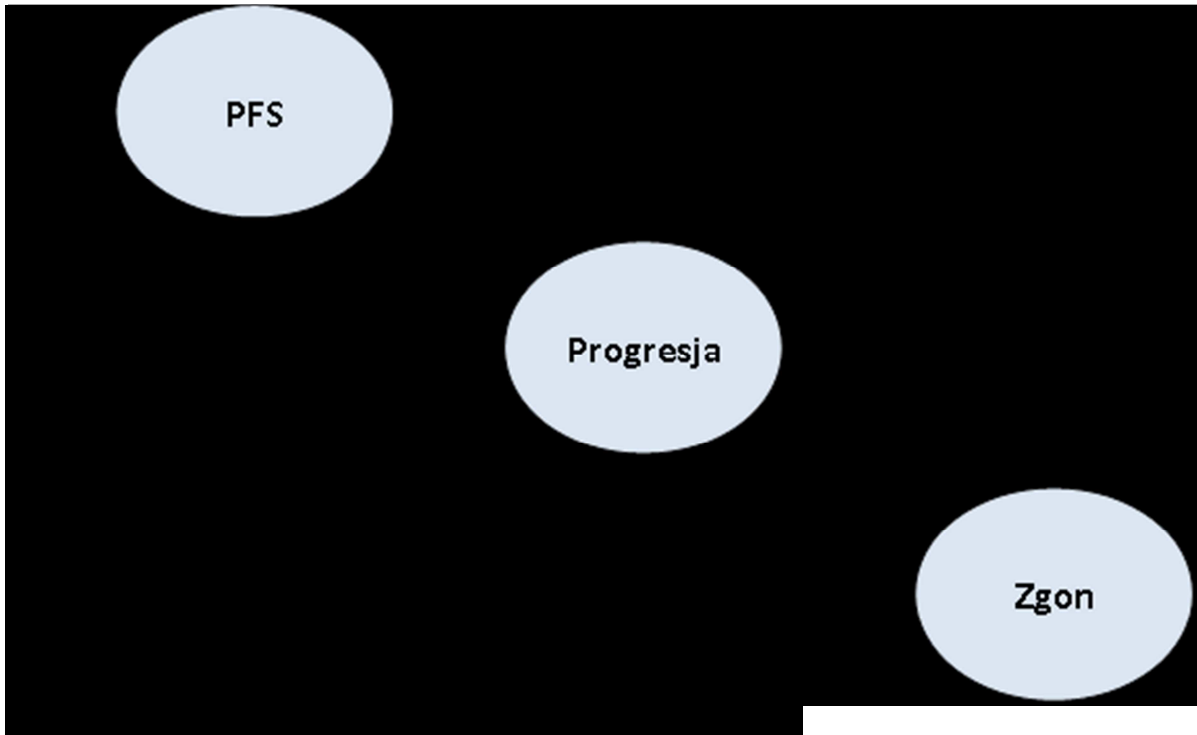
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¹⁰ Maksymalny czas modelowania w *Modelu 7,5* wynosi 25 lat, a w *Modelu 15* – 15 lat. Wpisanie okresu dłuższego spowoduje automatyczne ustawienie wartości na wartość maksymalną.

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¹¹ Założono, że stan opisany w badaniu *Grann 1998* dotyczący jakości życia chorych z rakiem jajnika (0,82) odpowiada stanowi bez progresji choroby.

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Nazwa choroby		Leczenie	Leczenie		Cena	Cena	Leczenie	
			Wzrost	Wzrost			Wzrost	Wzrost
Rak jajnika	1	1	1	1	1	1	1	1
	2	2	2	2	2	2	2	2
	3	3	3	3	3	3	3	3
	4	4	4	4	4	4	4	4
Rak jajowodu	1	1	1	1	1	1	1	1
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	6	6	6	6	6	6	6	6
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Rak otrzewnej	1	1	1	1	1	1	1	1
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Razem		1	1	1	1	1	1	1

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¹²Wartości procentowe przedstawione w analizie wrażliwości odnieść należy do wartości współczynnika ICUR oraz ICER z analizy podstawowej, przedstawionych w Rozdziale 11.

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Lp. porządkowa	Nazwa choroby	Leczenie	Leczenie standardowe		Leczenie badane	Leczenie badane	Wartość	
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			Opis	Opis			Lp. choroby	Lp. choroby	
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Lp.	Nazwa choroby	Leczenie	Leczenie 1		Leczenie 2		Leczenie 3	
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¹³Wartości procentowe przedstawione w analizie wrażliwości odnieść należy do wartości współczynnika ICUR oraz ICER z analizy podstawowej, przedstawionych w Rozdziale 11.

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		Lp. choroby	Wzrost		Ciężar ciała		Ciepłota ciała	Ciężar krwi		Ciężar serca
			cm	kg	g	g		g	g	
I	1	1	160	65	36,5	100	70	100	100	100
	2	2	160	65	36,5	100	70	100	100	100
	3	3	160	65	36,5	100	70	100	100	100
	4	4	160	65	36,5	100	70	100	100	100
	5	5	160	65	36,5	100	70	100	100	100
	6	6	160	65	36,5	100	70	100	100	100
	7	7	160	65	36,5	100	70	100	100	100
II	8	8	160	65	36,5	100	70	100	100	100
	9	9	160	65	36,5	100	70	100	100	100
	10	10	160	65	36,5	100	70	100	100	100
	11	11	160	65	36,5	100	70	100	100	100
	12	12	160	65	36,5	100	70	100	100	100
	13	13	160	65	36,5	100	70	100	100	100
	14	14	160	65	36,5	100	70	100	100	100

Nazwa choroby		Leczenie	Leczenie		Leczenie		Leczenie	Leczenie		Leczenie
			Wzrost	Wzrost	Wzrost	Wzrost		Wzrost	Wzrost	
Rak jajnika	III	1	1	1	1	1	1	1	1	1
	IV	1	1	1	1	1	1	1	1	1
Rak jajowodu	III	1	1	1	1	1	1	1	1	1
	IV	1	1	1	1	1	1	1	1	1
	III	1	1	1	1	1	1	1	1	1
	IV	1	1	1	1	1	1	1	1	1
	III	1	1	1	1	1	1	1	1	1
	IV	1	1	1	1	1	1	1	1	1
	III	1	1	1	1	1	1	1	1	1
Rak otrzewnej	III	1	1	1	1	1	1	1	1	1
	IV	1	1	1	1	1	1	1	1	1

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¹⁴Wartości procentowe przedstawione w analizie wrażliwości odnieść należy do wartości współczynnika ICUR oraz ICER z analizy podstawowej, przedstawionych w Rozdziale 11.

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¹⁵Wartości procentowe przedstawione w analizie wrażliwości odnieść należy do wartości współczynnika ICUR oraz ICER z analizy podstawowej, przedstawionych w Rozdziale 11.

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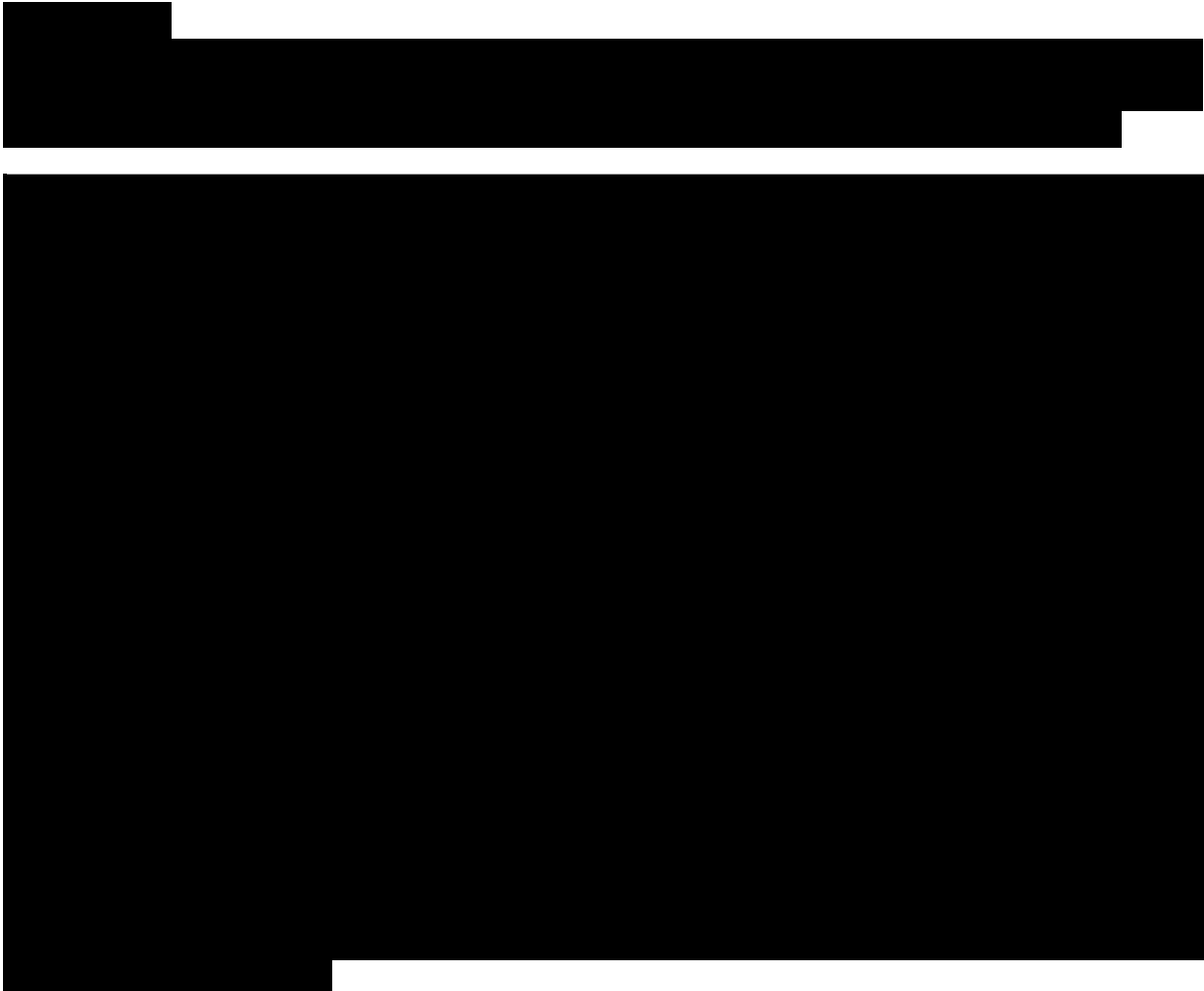
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	III	III	I	I	I	I	I	I	I	I	I	I
			I	I	I	I	I	I	I	I	I	I
	IV	IV	I	I	I	I	I	I	I	I	I	I
			I	I	I	I	I	I	I	I	I	I
	V	V	I	I	I	I	I	I	I	I	I	I
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	VI	VI	I	I	I	I	I	I	I	I	I	I
			I	I	I	I	I	I	I	I	I	I
	VII	VII	I	I	I	I	I	I	I	I	I	I
			I	I	I	I	I	I	I	I	I	I
VIII	VIII	I	I	I	I	I	I	I	I	I	I	
		I	I	I	I	I	I	I	I	I	I	
IX	IX	I	I	I	I	I	I	I	I	I	I	
		I	I	I	I	I	I	I	I	I	I	
X	X	I	I	I	I	I	I	I	I	I	I	
		I	I	I	I	I	I	I	I	I	I	

Lp.	Nazwa choroby	Leczenie	Leczenie standardowe		Wariant I	Wariant II	Wariant III	Wariant IV	Wariant V	Wariant VI	
			1	2	1	1	1	1	1	1	
1	Rak jajnika	Bewacyzumab	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	
			3	3	3	3	3	3	3	3	
			4	4	4	4	4	4	4	4	
2	Rak jajowodu	Bewacyzumab	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	
		Bewacyzumab + paclitaxel	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2
		Bewacyzumab + paclitaxel + carboplatin	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2
		Bewacyzumab + paclitaxel + carboplatin + bevacizumab	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2
		Bewacyzumab + paclitaxel + carboplatin + bevacizumab + ramipril	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2
		Bewacyzumab + paclitaxel + carboplatin + bevacizumab + ramipril + aspirin	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2
Bewacyzumab + paclitaxel + carboplatin + bevacizumab + ramipril + aspirin + celecoxib	1	1	1	1	1	1	1	1	1		
	2	2	2	2	2	2	2	2	2		
Bewacyzumab + paclitaxel + carboplatin + bevacizumab + ramipril + aspirin + celecoxib + aspirin	1	1	1	1	1	1	1	1	1		
	2	2	2	2	2	2	2	2	2		

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Nazwa choroby		Leczenie	Leczenie		Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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Rak jajnika	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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Rak jajowodu	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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Nazwa choroby		Leczenie	Leczenie		Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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Rak jajnika	Leczenie	Leczenie	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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Rak jajowodu	Leczenie	Leczenie	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost	Wzrost
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¹⁷Wartości procentowe przedstawione w analizie wrażliwości odnieść należy do wartości współczynnika ICUR oraz ICER z analizy podstawowej, przedstawionych w Rozdziale 11.

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¹⁸ Zgodnie z art. 5 ust. 2 pkt 2-3 *Rozporządzenia Ministra Zdrowia z dnia 2 kwietnia 2012* [21]

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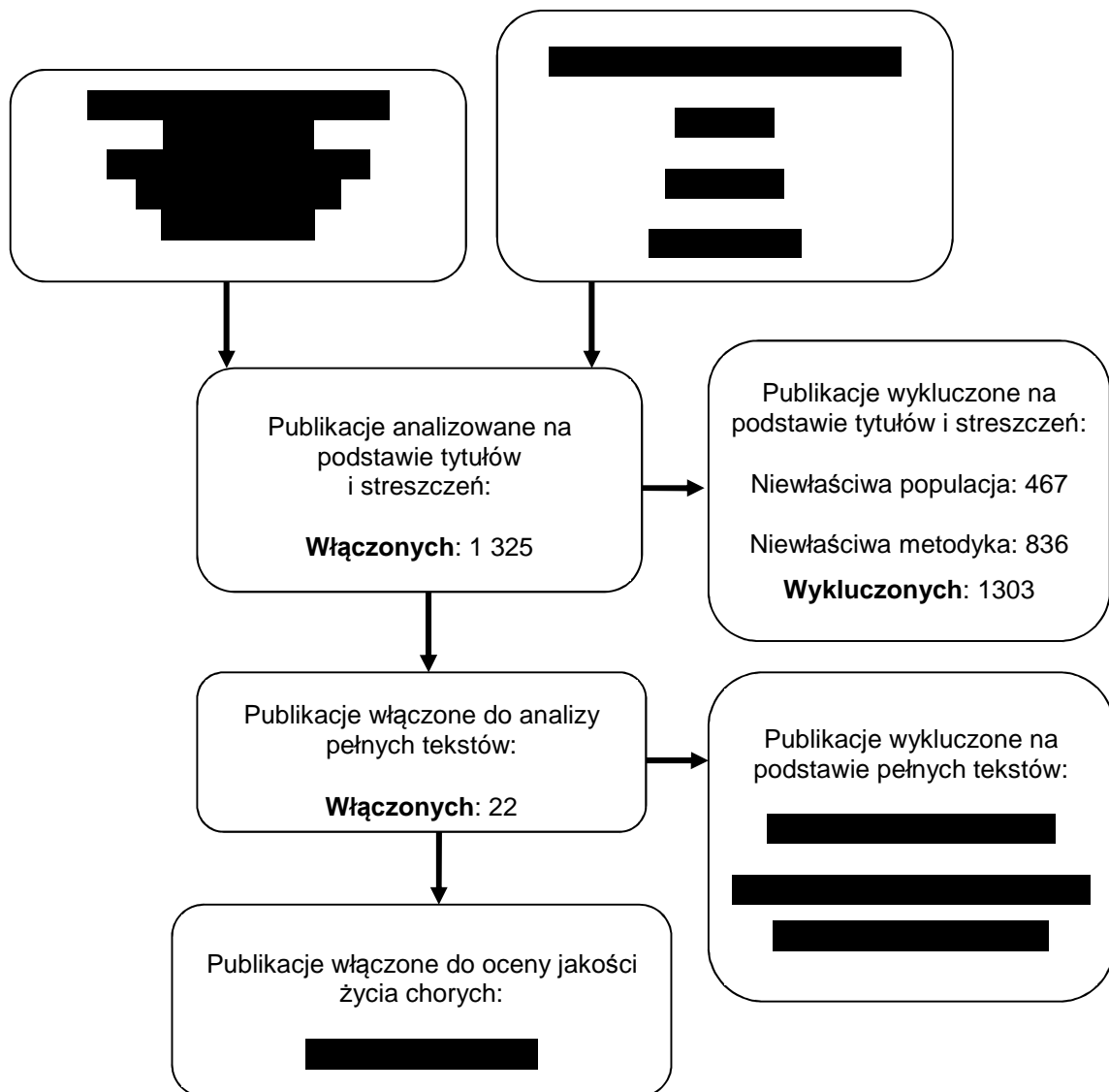
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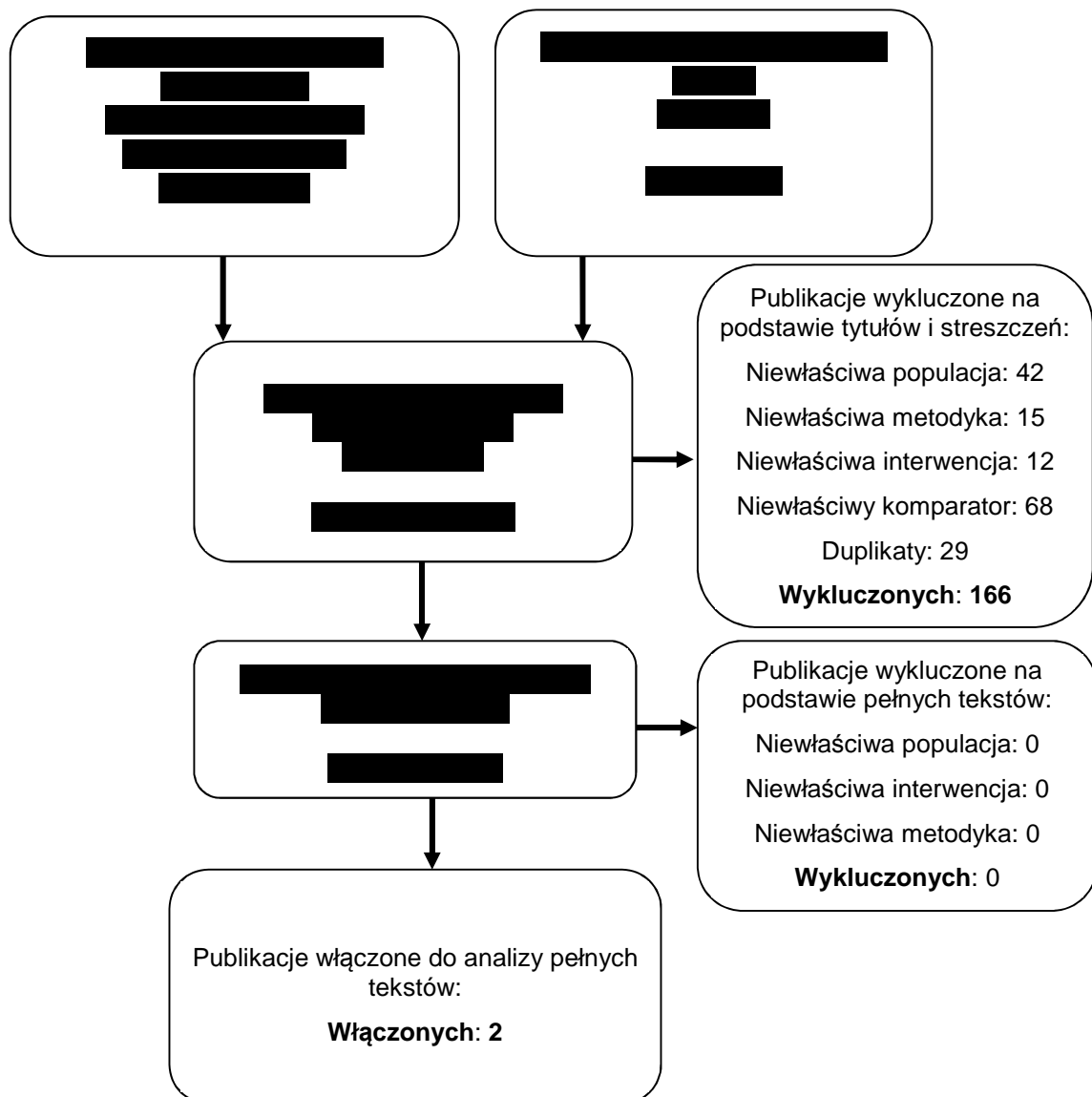
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National Institute for Health and Clinical Excellence, *Trabectedin for the*

treatment of relapsed ovarian cancer, April 2011

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