Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

12 July 2021

DEPARTMENT MEMORANDUM
No. 2021 - 0317

FOR: **ALL DIRECTORS OF CENTRAL OFFICE BUREAUS AND CENTERS FOR HEALTH DEVELOPMENT, BARMM MINISTER OF HEALTH; CHIEFS OF MEDICAL CENTERS, HOSPITALS AND SANITARIA, AND OTHERS CONCERNED**

SUBJECT: **Non-inclusion of Pazopanib as a Second-line Treatment for Metastatic Soft Tissue Sarcoma (mSTS) in the Philippine National Formulary (PNF)**

By virtue of Republic Act 11223, otherwise known as the Universal Health Care (UHC) Act, health technology assessment (HTA) shall be institutionalized as a fair and transparent priority-setting mechanism to provide financing and coverage recommendations on health technologies to be funded by the Department of Health and the Philippine Health Insurance Corporation.

This has reference to the application to include **Pazopanib as a second-line treatment for metastatic soft tissue sarcoma (mSTS)** in the Philippine National Formulary (PNF). Please be informed that the Secretary of Health approved the final recommendation of the Health Technology Assessment Council (HTAC), to wit:

- **Non-inclusion** of **Pazopanib as a second-line treatment for mSTS** in the PNF due to the following:

    - Only studies comparing pazopanib with placebo were found. These studies were limited in number and of very low-quality evidence to establish strong evidence for better efficacy/ effectiveness when compared to placebo. While the World Health Organization (WHO) consideration on listing cancer medicine in its Essential Medicines List applies for first-line treatments, the HTAC deems that the consideration for overall survival can be used for second-line treatments as well. As such, the median overall survival (OS) difference of two months between the pazopanib (median OS: 12.6 months) and placebo group (median OS: 10.7 months), may be marginal and is likely to be clinically and ethically irrelevant. In terms of safety, there is an increased risk of some adverse events based on moderate quality of evidence, when compared to placebo.

    - International clinical guidelines (e.g., *National Comprehensive Cancer Network, Spanish Group for Research on Sarcoma, and British Sarcoma Group*) have indicated pazopanib for soft-tissue sarcoma and its subtypes. However, the evidence presented in the review was not found to be sufficient to support the evidence.

- Some HTA agencies cited that pazopanib demonstrated moderate benefit in terms of progression-free survival. However, the drug lacked benefit in terms of the more clinically relevant outcome which is overall survival. In addition, improvement of quality of life studies were lacking. The Pharmaceutical Benefits Advisory Committee of Australia acknowledges that there is an unclear, potentially high incremental cost-effectiveness ratio for pazopanib, and an unsupported claim for overall survival benefit.

Kindly disseminate to all concerned officials in your areas of responsibility, so they may be appropriately guided in their procurement activities. All are enjoined to ensure rational procurement, distribution, and use of health technologies in all government and private facilities.

Your full cooperation in this endeavor is expected and highly appreciated.

By Authority of the Secretary of Health:

GERARDO V. BAYUGO, MD, MPH, CESO I
Undersecretary of Health
Health Regulation Team