Recommendation

The HTAC does not recommend the inclusion of Pazopanib as second-line treatment of metastatic soft tissue sarcoma (mSTS) in the Philippine National Formulary based on the following reasons:

- 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 WHO consideration on listing cancer medicine in its EML 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.*

- While the clinical guidelines NCCN, GEIS, and BSG have indicated pazopanib for STS and its subtypes, the evidence presented in this review are not sufficient to support pazopanib's claims in terms of efficacy/effectiveness and safety profile even when compared with placebo.

- While some of the HTA agencies reviewed cited that pazopanib demonstrated moderate benefit on progression free survival, it lacked benefit in terms of overall survival. In addition, improvement of quality of life studies were lacking. PBAC acknowledges that there is an unclear, potentially high incremental cost-effectiveness ratio for pazopanib, and unsupported claim for overall survival benefit.