

INDIRECT COMPARISON OF NIVOLUMAB, PEMBROLIZUMAB AND CAMRELIZUMAB IN PATIENTS WITH UNRESECTABLE AND/OR ADVANCED SQUAMOUS CELL CARCINOMA OF ESOPHAGUS IN SECOND-LINE SETTING

ATC code: 3
 Literature reviews

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BACKGROUND AND IMPORTANCE

Established treatment for advanced, recurrent or unresectable **oesophageal squamous cell cancer (ESCC)** includes systemic therapy, definitive chemotherapy, and/or palliative treatment depending on the stage of the cancer. These drugs increase the therapeutic options available.

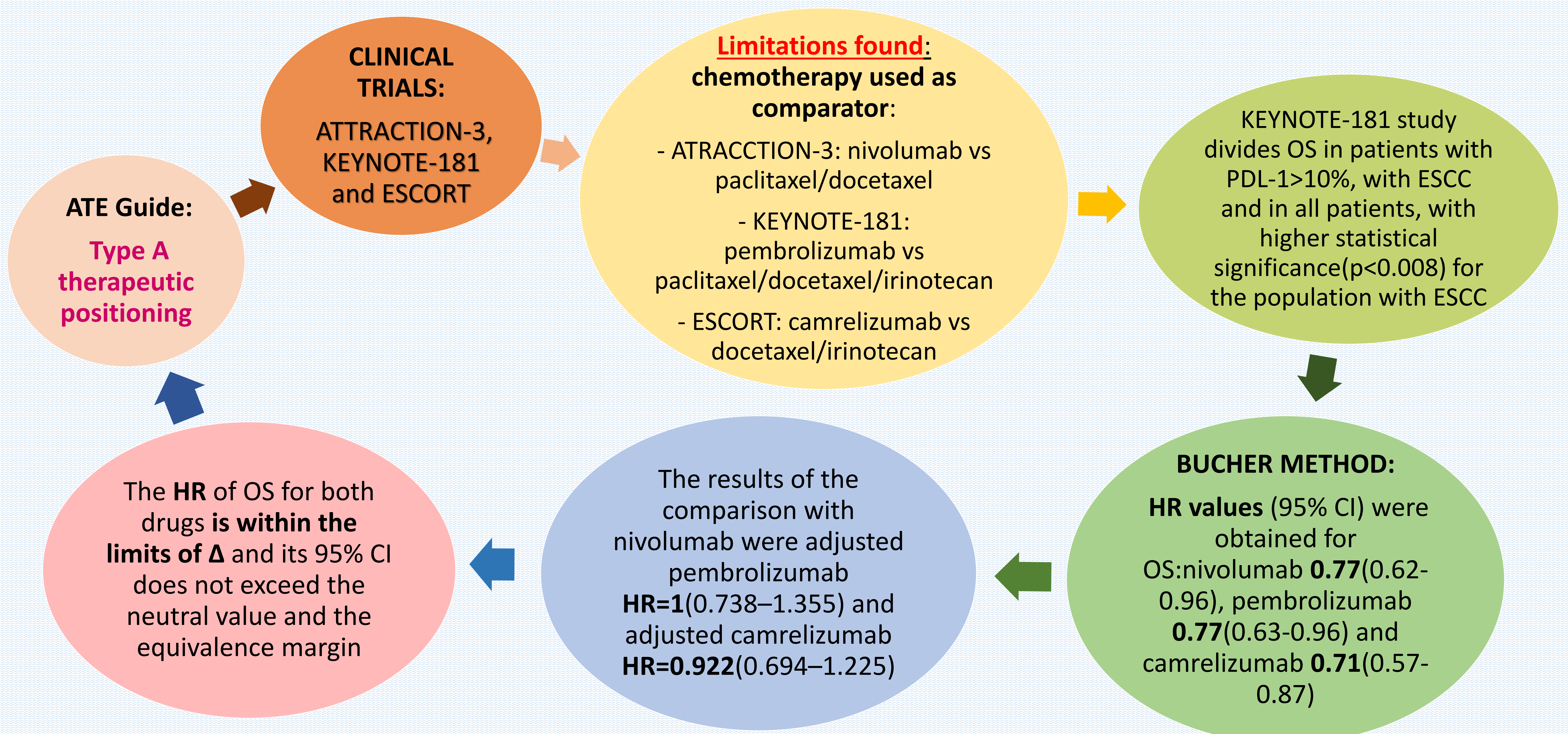
AIM AND OBJECTIVES

To determine if **nivolumab, pembrolizumab and camrelizumab** can be considered **equivalent second-line therapeutic alternatives (ATE)** by using a common comparator, for patients with unresectable and/or advanced ESCC.

MATERIAL AND METHODS

- ✓ A **bibliographic search** was conducted to select **phase III randomised clinical trials** of second-line treatments for ESCC.
- ✓ **Indirect comparisons** were made by using the **Bucher method** using nivolumab as the reference drug and overall survival (OS) as the main variable.
- ✓ The **maximum acceptable difference** as a clinical non-inferiority standard Delta (Δ), and its inverse were set at **0.65** and **1.54**, respectively. They were established by **ESMO-Magnitude of Clinical Benefit Scale**.

RESULTS



CONCLUSION AND RELEVANCE

Nivolumab, pembrolizumab and camrelizumab could be considered ATE. It is necessary to take into account that there is a certain degree of uncertainty in this positioning result.