

COMPENDIA TRANSPARENCY TRACKING FORM

DRUG: Pemetrexed

INDICATION: Ovarian cancer, recurrent

COMPENDIA TRANSPARENCY REQUIREMENTS

1	Provide criteria used to evaluate/prioritize the request (therapy)
2	Disclose evidentiary materials reviewed or considered
3	Provide names of individuals who have substantively participated in the review or disposition of the request and disclose their potential direct or indirect conflicts of interest
4	Provide meeting minutes and records of votes for disposition of the request (therapy)

EVALUATION/PRIORITIZATION CRITERIA: C, E, L, R, S

*to meet requirement 1

CODE	EVALUATION/PRIORITIZATION CRITERIA
A	Treatment represents an established standard of care or significant advance over current therapies
C	Cancer or cancer-related condition
E	Quantity and robustness of evidence for use support consideration
L	Limited alternative therapies exist for condition of interest
P	Pediatric condition
R	Rare disease
S	Serious , life-threatening condition

Note: a combination of codes may be applied to fully reflect points of consideration [eg, therapy may represent an advance in the treatment of a life-threatening condition with limited treatment alternatives (ASL)]

EVIDENCE CONSIDERED:

*to meet requirements 2 and 4

CITATION	STUDY-SPECIFIC COMMENTS	LITERATURE CODE
<p>Vergote,I., Calvert,H., Kania,M., et al: A randomised, double-blind, phase II study of two doses of pemetrexed in the treatment of platinum-resistant, epithelial ovarian or primary peritoneal cancer. European Journal of Cancer May 2009; Vol 45, Issue 8; pp. 1415-1423</p>	<p><u>Study methodology comments:</u> This was an open-label, single-arm, phase II clinical trial. There was low risk of bias associated with selection of cohorts and assessment of outcomes. Data was gathered prospectively for objective outcomes. The subjects lost to follow up were unlikely to introduce bias. The results should be interpreted with caution since the study lacked a control group.</p>	<p>S</p>
<p>Miller,D.S., Blessing,J.A., Krasner,C.N., et al: Phase II Evaluation of Pemetrexed in the Treatment of Recurrent or Persistent Platinum-Resistant Ovarian or Primary Peritoneal Carcinoma: A Study of the Gynecologic Oncology Group. Journal of Clinical Oncology Jun 01, 2009; Vol 27, Issue 16; pp. 2686-2691</p>	<p><u>Study methodology comments:</u> This was an open-label, single-arm, phase II clinical trial. There was low risk of bias associated with selection of cohorts and assessment of outcomes. Data was gathered prospectively for objective outcomes. All subjects were included in the analyses. The results should be interpreted with caution since the study lacked a control group.</p>	<p>S</p>
<p>Sehouli,J., Alvarez,A.M., Manouchehrpour,S., et al: A phase II trial of pemetrexed in combination with carboplatin in patients with recurrent ovarian or primary peritoneal cancer. Gynecologic oncology Feb 2012; Vol 124, Issue 2; pp. 205-209</p>	<p><u>Study methodology comments:</u> This was an open-label, single-arm, phase II clinical trial. There was low risk of bias associated with selection of cohorts and assessment of outcomes. Data was gathered prospectively for objective outcomes. All subjects were included in the analyses. The results should be interpreted with caution since the study lacked a control group.</p>	<p>S</p>
<p>Matulonis,U.A., Horowitz,N.S., Campos,S.M., et al: Phase II study of carboplatin and pemetrexed for the treatment of platinum-sensitive recurrent ovarian cancer. Journal of Clinical Oncology Dec 10, 2008; Vol 26, Issue 35; pp. 5761-5765</p>	<p><u>Study methodology comments:</u> This was an open-label, single-arm, phase II clinical trial. There was low risk of bias associated with selection of cohorts and assessment of outcomes. Data was gathered prospectively for objective outcomes. The subjects lost to follow up were unlikely to introduce bias. The results should be interpreted with caution since the study lacked a control group.</p>	<p>S</p>

<p>Gasent Blesa,J.M., Alberola,Candel,V, Provencio,Pulla M., et al: Management of platinum-resistant ovarian cancer with the combination of pemetrexed and gemcitabine. Clinical and Translational Oncology 2009; Vol 11, Issue 1; pp. 35-40.</p>		<p>2</p>
<p>Sehouli,J., Camara,O., Mahner,S., et al: A phase-I trial of pemetrexed plus carboplatin in recurrent ovarian cancer. Cancer Chemotherapy and Pharmacology 2010; Vol 66, Issue 5; pp. 861-868</p>		<p>3</p>

Literature evaluation codes: S = Literature selected; 1 = Literature rejected = Topic not suitable for scope of content; 2 = Literature rejected = Does not add clinically significant new information; 3 = Literature rejected = Methodology flawed/Methodology limited and unacceptable; 4 = Other (review article, letter, commentary, or editorial)

CONTRIBUTORS:

*to meet requirement 3

PACKET PREPARATION	DISCLOSURES	EXPERT REVIEW	DISCLOSURES
Margi Schiefelbein, PA	None	Edward P. Balaban, DO	None
Stacy LaClaire, PharmD	None	Thomas McNeil Beck, MD	None
		James E. Liebmann, MD	None
		Jeffrey A. Bubis, DO	None
		John M. Valgus, PharmD	None

ASSIGNMENT OF RATINGS:

*to meet requirement 4

	EFFICACY	STRENGTH OF RECOMMENDATION	COMMENTS	STRENGTH OF EVIDENCE
MICROMEDEX	---	---		B
Edward P. Balaban, DO	Evidence favors efficacy	Class IIb - Recommended, In Some Cases	Appears to be a reasonable alternative. There are a number of chemotherapy treatment alternatives in recurrent ovarian cancer. All seem to provide the same response rates as Pemetrexed.	N/A
Thomas McNeil Beck, MD	Evidence favors efficacy	Class IIb - Recommended, In Some Cases	Active in platinum resistant disease	N/A

James E. Liebmann, MD	Evidence is inconclusive	Class IIb - Recommended, In Some Cases	For clarity, this review should distinguish between platinum sensitive and platinum resistant disease. It is not clear what effect pemetrexed has in platinum sensitive disease, since it has only been used with platinum and not been compared with other “doublets.” In platinum-resistant disease, the 10-20% RR (response rate) is in the ball park of RR seen with other agents. Alimta is well tolerated and doesn’t add to neurotoxicity. It may be a reasonable option in some cases.	N/A
Jeffrey A. Bubis, DO	Evidence favors efficacy	Class IIb - Recommended, In Some Cases	Data supports its use- primarily in platinum-resistant cases. No OS benefit.	N/A
John M. Valgus, PharmD	Evidence favors efficacy	Class IIa - Recommended, In Most Cases	Multiple phase II studies demonstrate activity of Pemetrexed in this setting as demonstrated by partial responses as well as stable disease. Phase III studies comparing pemetrexed to alternative therapies in this setting are lacking.	N/A