## Lorlatinib for previously treated ALK-positive advanced non-small-cell lung cancer [ID1338]

## Second addendum to the main ERG report

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Following submission of the ERG report for this appraisal, the NICE technical team asked the ERG to replicate the results of the ERGs exploratory analysis (contained in Table 17 and Table 18 of the main ERG report), using list prices for comparators and subsequent treatments, rather than the company-estimated cPAS prices which the ERG used in the original tables for comparability with the company's base case results. These results are provide below as requested.

Table 17 Summary sensitivity analyses undertaken by the ERG

	Description		Incremental	Incremental	Incremental	ICER
			costs	LYs	QALYs	(£/QALY)
Com	Company Base-case					£46,033
1	Alternative PDC PFS and OS survival cure methods	a) Method 1: MAIC HR EXP-2:3A b) Method 2: MAIC HR EXP-3B:5				£42,416 £53,915
		c) Method 3: Unadjusted HR EXP-2:3A  d) Method 4: Unadjusted HR EXP-3B:5				£40,728 £46,184
2	Hazard ratios for	e) Method 6: Independent curves & population adjustment a) 0.9				£40,520 £46,615
	upward adjustments to PFS and OS in the PDC arm	b) 0.8 c) 0.7				£47,338 £48,290
		d) 0.6				£49,710
3	Treatment waning	a) Hazard of death on lorlatinib equal to PCD from three years b) Hazard of death on lorlatinib equal to PCD from five years				£50,863 £46,948
4	Mean time on	a)				£49,819
	lorlatinib following progression	b)				£55,378
5	Lorlatinib time on treatment	Generalised gamma				£52,758

6	Utilities	a) PF utility on lorlatinib = PF utility on PDC (0.72) + 0.02		£48,319
		b) PF utility on lorlatinib = PF utility on PDC (0.72) + 0.08		£45,327
		c) PD utility is 0.59 (Chouaid et al)		£47,633
		d) PD utility is 0.46 (Chouaid et al)		£51,511
		e) a and d combined		£54,390
7	Subsequent	a) Fixed dose regimen for pembrolizumab		£43,371
	therapies	b) proportion of treated patients receiving atezolizumab and pembrolizumab following progression on PDC ( and and respectively)		£43,264
		c) a and b combined		£42,068
		d) Proportion of subsequently treated patients who receive PDC and pemetrexed alone following progression on lorlatinib (80% and 20%)		£46,102
		e) 50% receive subsequent therapy following PDC		£48,424
8	Combination	Combines 2b), 5), 6c), 7a), and 7e)		£57,114
		Probabilistic ICER for scenario 8		£55,057

Abbreviations: ERG = Evidence Review Group; EXP = expansion; HR = hazard ratio; ICER = incremental cost-effectiveness ratio; LY = life year; MAIC = match adjusted indirect comparison; NHS = National Health Service; OS = overall survival; PDC = platinum doublet chemotherapy; PFS = progression free survival; QALY = quality-adjusted life year; ToT = time on treatment

 $Table\ 18\ Summary\ sensitivity\ analyses\ undertaken\ by\ the\ ERG$ 

	Description		Incremental	Incremental	Incremental	ICER
			costs	LYs	QALYs	(£/QALY)
C	Company Base-case					£8,955
1	Reducing population	a) By 25% (HR for PFS = 1.53; HR for OS = 2.86) b) By 50% (HR for PFS = 1.33; HR for OS = 2.01)				£1,197  Dominant
	adjustment hazard ratios (on log scale)	o, 2, 0, 0, (1102) 110 1100, 11110, 02 2101,			_	
2	Treatment	a) Hazard of death on lorlatinib equal to ABCP from three years				Dominant
	waning	b) Hazard of death on lorlatinib equal to ABCP from five years				Dominant
3	Mean time on	a)				£13,091
	lorlatinib following progression	b)				£19,163
4	Lorlatinib time on treatment	Generalised gamma curve				£16,301
5	Utilities	a) PF utility on lorlatinib = PF utility on PDC $(0.72) + 0.02$				£9,443
		b) PF utility on lorlatinib = PF utility on PDC (0.72) + 0.08				£8,806
		c) PD utility is 0.59 (Chouaid et al)				£9,388
		d) PD utility is 0.46 (Chouaid et al)				£10,485
		e) a and d combined				£11,160

6	Subsequent	a) 80% of subsequently treated patients who progress on		£9,031
	therapies	lorlatinib receive PDC		
		b) 40% receive subsequent treatment with docetaxel following		£9,147
		progression on ABCP		
7	Combination	Combines 1b), 4), 5c), and 6b),		£30

Abbreviations: ERG = Evidence Review Group; EXP = expansion; HR = hazard ratio; ICER = incremental cost-effectiveness ratio; LY = life year; MAIC = match adjusted indirect comparison; NHS = National Health Service; OS = overall survival; PDC = platinum doublet chemotherapy; PFS = progression free survival; QALY = quality-adjusted life year; ToT = time on treatment