

Plain English Summary

Treatments for advanced ovarian cancer

What does the guidance say?

Olaparib is recommended for listing on the Medication Assistance Fund (MAF) for government funding from 1 September 2022 for patients with advanced ovarian, fallopian tube or primary peritoneal cancer who meet certain criteria.

Bevacizumab reference biologic (Avastin) and niraparib are not recommended for subsidy for these conditions. Bevacizumab biosimilar (Mvasi) has previously been recommended for listing on the Standard Drug List (SDL) for all approved conditions, including ovarian cancer.

What is advanced ovarian cancer?

Ovarian cancer occurs when abnormal cells grow uncontrollably in one or both of the ovaries, forming a mass (tumour). In rare cases, cancer cells can grow in the fallopian tubes which link the ovaries to either side of the womb (uterus). Cancer cells can also grow in the peritoneum, a layer of tissue that covers the surface of all organs in the abdomen such as the stomach, liver and bowel. When cancer starts in the peritoneum, this is called primary peritoneal cancer.

Ovarian, fallopian tube and primary peritoneal cancer are all treated the same way. Some people can have surgery to remove the tumour from the affected area. If the tumour cannot be removed (unresectable) or has spread to other parts of the body, this is known as advanced or metastatic disease.

Doctors test cancer cells to see if they have any biomarkers or genetic mutations that might help some treatments work better than others. Cancer cells that have a homologous recombination deficiency (HRD-positive) or a mutation in the BRCA 1/2 genes can be treated with targeted therapies. About half of patients with advanced ovarian cancer have HRD-positive cells.

What is olaparib?

Olaparib belongs to a group of targeted medicines called PARP inhibitors. PARP (poly-ADP-ribose polymerase) is a protein (enzyme) that helps damaged cells repair themselves.

PARP inhibitors stop PARP from working in cancer cells that are HRD-positive or have BRCA mutations and cause the cells to die.

Olaparib is used as maintenance treatment after chemotherapy to stop or delay the cancer from coming back. It is taken orally, either alone or in combination with bevacizumab.

Your doctor will tell you how much you need to take and how long you need to take it for.

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What is bevacizumab?

Bevacizumab belongs to a group of biologic medicines called vascular endothelial growth factor (VEGF) inhibitors that stop cells from growing blood vessels and can slow or shrink cancer growth. It is given as a drip into a vein (intravenously) in combination with olaparib as maintenance treatment in patients with HRD-positive advanced ovarian cancer.

Mvasi is a biosimilar of bevacizumab (Avastin). Biosimilars are highly similar but not identical to their reference biologics (i.e., the first biologic developed). Biosimilars have similar effectiveness, safety and quality records compared to their reference biologics and can be used to treat the same diseases.

Who can have olaparib?

Olaparib is used for maintenance treatment in patients with ovarian, fallopian tube or primary peritoneal cancer if:

- their condition has responded to initial treatment with chemotherapy; and
- they have a BRCA 1/2 genetic mutation or HRD biomarker confirmed by a diagnostic test.

Olaparib can be taken until the cancer worsens, or for up to 24 months. Your doctor can advise if olaparib is a suitable treatment for you.

Why was olaparib recommended for funding?

ACE evaluates how well a treatment works in relation to how much it costs compared to other treatments. Olaparib was recommended because its benefit in improving survival for certain patients with advanced ovarian cancer justifies its cost.

Bevacizumab reference biologic (Avastin) and niraparib were not recommended for subsidy because their benefits do not justify their costs. If you need one of these treatments for ovarian cancer, you can speak to a medical social worker to find out if there is other financial assistance available to help with the cost of treatment.

Bevacizumab biosimilar (Mvasi) has already been recommended for listing on SDL for ovarian cancer. Drugs on SDL are subsidised at 50% for all Singaporean citizens who are treated in a public healthcare institution. Patients from lower to middle income households may receive a higher subsidy up to 75%.

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What does listing on the MAF mean for me?

The MAF helps people pay for expensive treatments that are clinically necessary. If your doctor prescribes olaparib for you for ovarian cancer, and you meet the MAF criteria, your treatment cost will be subsidised by 40% to 75%.

Olaparib has also been included on the Cancer Drug List (CDL) and are claimable under MediShield Life. The subsidy class and MediShield Life claim limits are available at go.gov.sg/moh-cancer-drug-list.

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The Agency for Care Effectiveness (ACE) was established by the Ministry of Health (Singapore) to drive better decision-making in healthcare through health technology assessment (HTA), clinical guidance and education. It publishes guidances on diagnosing, treating, and preventing different medical conditions based on the latest research information available worldwide.

This summary is not, and should not be regarded as, a substitute for professional or medical advice. Please seek the advice of a qualified healthcare professional about any medical condition.

To find out more about ACE visit www.ace-hta.gov.sg