

Plain English Summary

Durvalumab with or without olaparib for treating primary advanced or recurrent endometrial cancer

What does the guidance say?

Durvalumab, used in combination with chemotherapy, followed by durvalumab alone or with olaparib, is not recommended for government funding for patients with primary advanced or recurrent endometrial cancer. It is not subsidised and not claimable under MediShield Life.

Why was it not recommended for funding?

ACE evaluates how well a treatment works in relation to how much it costs compared to other treatments. Durvalumab treatment (with or without olaparib) was not recommended for government funding because its benefits for patients with primary advanced or recurrent endometrial cancer do not justify its cost. If you need durvalumab treatment for endometrial cancer, you can speak to a medical social worker to find out if there is other financial assistance available to help with the cost.

What is primary advanced or recurrent endometrial cancer?

The uterus has two layers, an outer muscular lining and an inner lining (endometrium). Endometrial cancer occurs when abnormal cells grow uncontrollably in the inner lining of the uterus. Symptoms of endometrial cancer can include abnormal vaginal bleeding, discharge, pelvic pain and unintended weight loss.

Primary cancer refers to the original, or first tumour in the body. When the cancer spreads from the primary site to other parts of the body, this is known as advanced disease. If the cancer comes back after a period of time when it was undetected, this is known as recurrent cancer.

What is dMMR or pMMR endometrial cancer?

In our body, cells have a set of instructions called DNA that tells them how to grow and function. In normal cells, a process called mismatch repair (MMR) helps to fix errors (mutations) that can occur when DNA replicates. However, in some cases, the repair system may not work properly, leading to the build up of errors which causes the DNA to become unstable. This is known as mismatch repair deficient (dMMR). If the repair system is working properly, it is known as mismatch repair proficient (pMMR). Doctors may order tests to determine if you have dMMR or pMMR endometrial cancer to decide which drug treatment is likely to work best for your condition.



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What are durvalumab and olaparib?

Durvalumab belongs to a group of medicines called PD-1/PD-L1 checkpoint inhibitors that help the immune system find and destroy cancer cells. It is given as a slow drip into a vein (intravenously) either on its own, or in combination with chemotherapy or olaparib.

Olaparib belongs to a group of medicines called PARP (poly-ADP-ribose polymerase) inhibitors. PARP is a protein (enzyme) that helps damaged cells repair themselves. PARP inhibitors stop PARP from working and cause cancer cells to die. It is taken orally.

Is this the right treatment for me?

There are different types of treatments available for primary advanced or recurrent endometrial cancer. Your doctor may recommend you have durvalumab if other drugs cannot adequately control your condition. Your doctor should give you clear information, listen to your views and concerns, and talk to you about your treatment options. Some of the questions you may want to ask your doctor when making decisions about your care are:

- How will the treatment affect my day-to-day activities?
- How well does it work compared to other treatments?
- What are the side effects and risks of treatment, and how likely are they?
- How much does the treatment cost, and who can I approach if I want to find out whether there is financial assistance available to help with the cost of treatment?
- How long will I need to be on the treatment for?
- What happens if the treatment stops working?
- What happens if I do not want to have treatment?

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This summary is not, and should not be regarded as, a substitute for professional or medical advice.

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