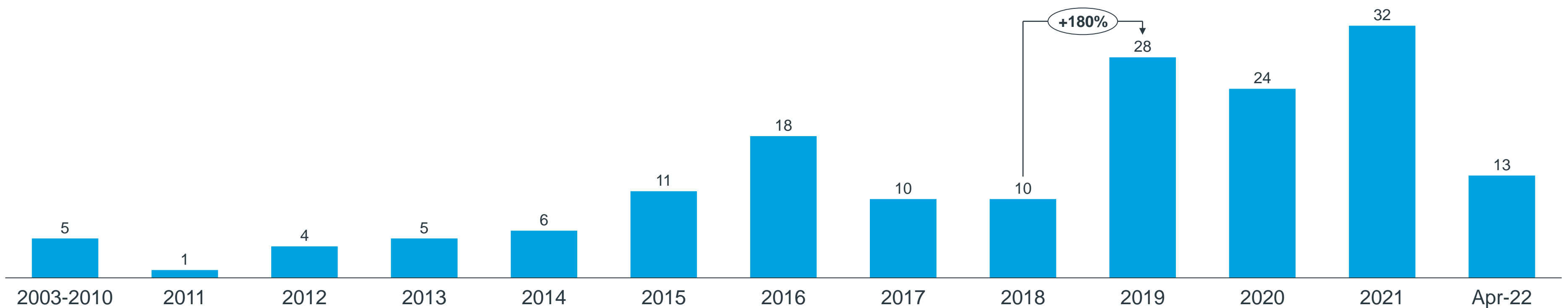
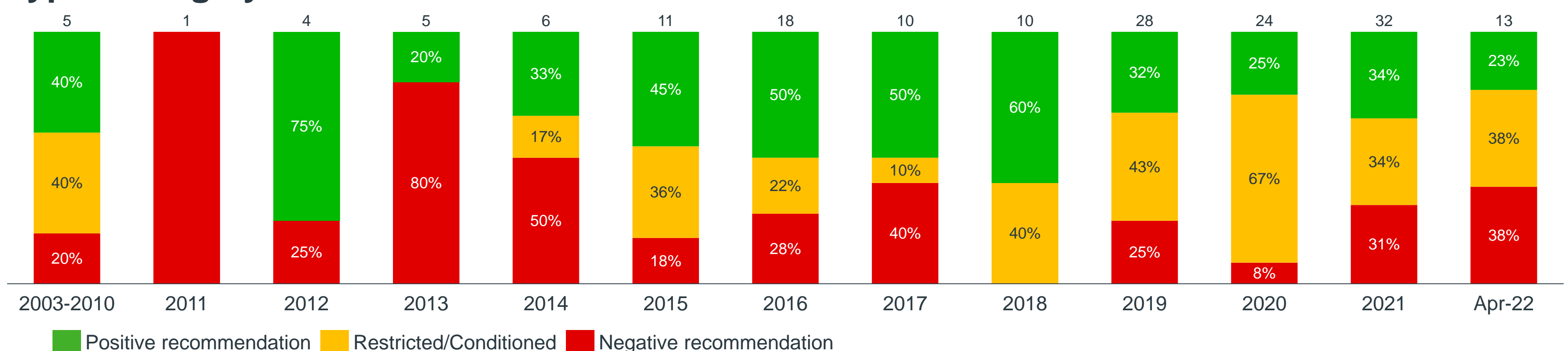


## Number of single drug assessments in ovarian cancer until April 2022 by years



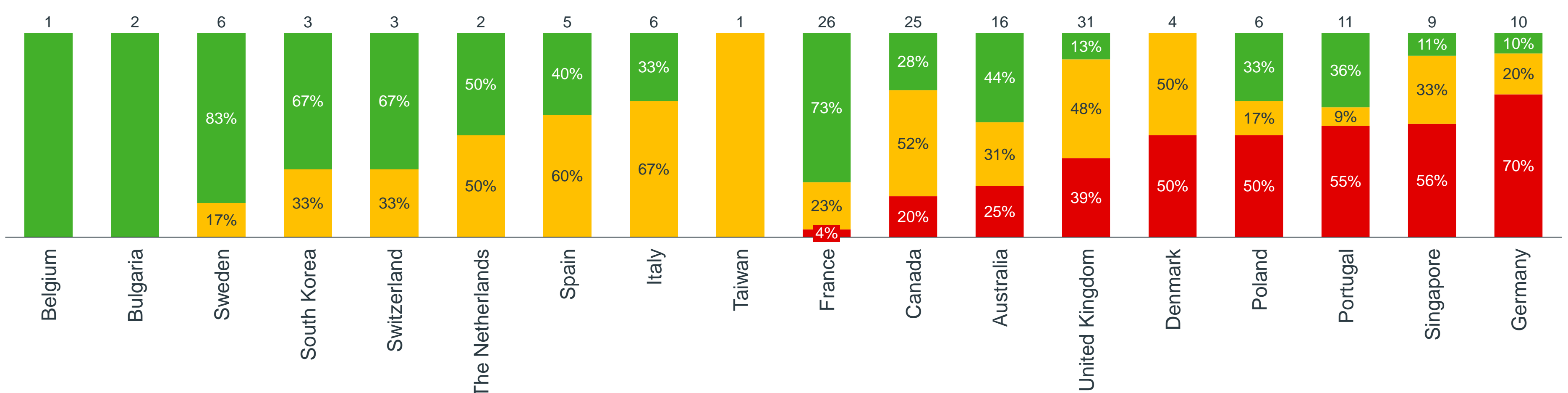
- There is a trend in increasing the volume of single drug assessments (SDAs) reviewed by the HTA bodies in the last 4 year.
- The highest increased is marked in 2019 vs 2018, where the SDAs are +180% more and the peak is in 2021 reaching the number of 32 SDAs.

## Number of single drug assessments in ovarian cancer until April 2022 by recommendation type through years



- From 2018 onwards restricted or conditional recommendations have increased for different reasons France restricted to specific subgroups, in the UK funding is via the Cancer Drug Fund and Canada limited the indication

## Number of single drug assessments in ovarian cancer until April 2022 grouped by recommendation types in the countries



- 73% (122 out of 167 assessments) were positive, half of them being restricted.
- The UK, Canada and France have highest number of assessments of products for threatening the ovarian cancer.
- In the UK most of the rejections were due to non-robust economic analysis or treatment cost.
- In Germany, Portugal and Poland negative recommendations were mainly due to insufficient clinical benefit or inappropriate comparator and patient population while positive recommendations recognized high unmet need. Multiple agencies plan to reassess more mature data

Source: IQVIA HTA Accelerator.

All SDAs from 2003 till the end of April 2022 are included.

This analysis includes only reports with clear positive, restricted/conditioned or negative recommendations; Positive recommendation = The technology has been recommended without any restrictions to the full licensed indication. Restricted/Conditioned = The technology has been recommended but with restrictions to specific patient populations; Negative recommendation = The technology has not been recommended

Abbreviations: HTA = Health technology assessment; SDA = Single drug assessment

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