Minutes – Cancer Medicines Forum

December 16, 2024, 1:00pm – 3:00 pm CET; Teams Meeting

Chairperson: Denis Lacombe (European Organisation for Research and Treatment of Cancer, EORTC)

Co-chairperson: Caroline Voltz-Girolt (European Medicines Agency, EMA), on behalf of Francesco Pignatti

Cancer Medicines Forum members: European Organisation for Research and Treatment of Cancer (EORTC), European Society of Medical Oncology (ESMO), European Haematology Association (EHA) and International Society of Geriatric Oncology (SIOG)

Observers: Organisation for Economic Co-operation and Development (OECD), HTA body (Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen, IQWiG), patient representative (Patvocates), industry representative, European Society of Paediatric Oncology (SIOPE), International Association of Mutual Benefit Societies (AIM) and European Social Insurance Platform (ESIP)

Guests: Oncology Center of Excellence, Food and Drugs Administration (FDA), USA; Zorginstituut Nederland, The Netherlands

Welcome and adoption of the minutes of the previous meeting

The Chairs welcomed the members, observers and the guests. The minutes from the previous meeting were adopted without comments.

Summary of CMF objectives and achievements

The EORTC presented a summary of the CMF's activities and achievements. Currently, the clinical research and drug development framework lacks a structured approach to promote and prioritise treatment optimisation research. To address this gap, the EMA and EORTC established the CMF in 2022.

The CMF objectives include:

- To serve as a direct and official communication channel with the academic community in oncology.
- To identify key research questions and best methodological approaches to improve the clinical use of cancer medicines.
- To discuss the uptake of academic work in the wider context of regulatory decision-making in oncology.

In April 2024, a public workshop was held at the EMA headquarters (report available here). During the workshop, participants discussed next steps and concrete actions, including:

- Integrating the CMF into existing processes and systems to promote and prioritise treatment optimisation research.
- Exploring policy actions to support optimisation in broader contexts while fostering collaboration among stakeholders—including payers, academia, and regulators—to transition from national approaches to effective international partnerships.

At the most recent meeting, stakeholders deliberated on methodologies and processes for identifying treatment optimisation priorities, as well as potential pathways for implementing these studies (meeting minutes available here).

Identification of treatment optimisation questions and priorities

CMF members were invited to propose treatment optimisation research questions and priorities. Several proposals were presented by the EHA, ESMO, and EORTC, including both general study ideas and specific study concepts.

The general study concepts included:

- Identifying very low-risk patient groups that could potentially forgo medical treatment in the adjuvant setting through biomarker-based risk stratification.
- Determining the optimal treatment duration in advanced disease phases when long-term disease control is achieved.
- Exploring low-dose immunotherapy strategies.

Furthermore, the specific study concepts included:

- A de-escalation study on the new T-cell-engaging bispecific antibodies in multiple myeloma.
- A trial on optimising first-line use of Cereblon (CRBN) binders in multiple myeloma.
- Optimising the treatment schedule of a B-cell lymphoma 2 (BCL-2) inhibitor in acute myeloid leukaemia.

- A de-escalation strategy for elderly glioblastoma patients according to the O6-methylguanine-DNA methyltransferase (MGMT) methylation status.
- Optimising the treatment schedule of androgen deprivation therapy in newly diagnosed metastatic prostate cancer.
- Determining the optimal treatment duration of an antibody-drug conjugate in patients with previously untreated advanced urothelial cancer.
- A de-escalation strategy that omits neoadjuvant treatment in unfit and elderly breast cancer patients.
- An intensified first-line treatment strategy for oligometastatic esophagogastric cancer patients.
- A study to determine the optimal duration of immunotherapy for melanoma treatment.

During the discussion, stakeholders highlighted key considerations for conducting these studies, including the need for trials that generate robust and conclusive evidence, the importance of involving relevant decision-making stakeholders from the outset, and the value of fostering international collaborations. Additionally, participants noted that further collaboration routes could be explored, for example with stakeholders involved in the Oncology European Specialised Expert Community (ESEC).

FDA guidance on dose optimisation

The FDA was invited to provide an overview and share insights from its recently launched guideline on optimising the dosage of human prescription drugs and biologic products in oncology (final guidance document available here).

This guidance aims to contribute to reforming the dosing paradigm in oncology drug development, recognising that optimisation is critical for ensuring both efficacy and safety. The early adoption of dose optimisation principles is seen as essential, as it enhances decision-making, reduces avoidable toxicity, and improves efficiency and feasibility.

The key principles of the final guidance include:

- Prioritising dose optimisation in the pre-marketing phase.
- Using the totality of available data for dosage selection.
- Employing randomised comparisons to determine the optimal dosage.
- Considering safety assessments that include low-grade symptomatic toxicities.

Beyond the final guidance document, additional supportive tools have been developed, including the oncology dosing toolkit. This resource assists stakeholders in making informed decisions about dosage optimisation throughout clinical development.

Stakeholders acknowledged the significant progress and efforts made by the FDA in this field, noting that substantial advancements have been achieved in recent years.

Next CMF meetings

The CMF will meet on a quarterly basis and below an overview of the remaining dates for 2025:

- 31 March at 10am CET
- 17 June at 2pm CET
- 4 September at 2pm CET
- 2 December at 2pm CET