

Capmatinib (TABRECTA) Criteria for Use November 2020

VA Pharmacy Benefits Management Services, Medical Advisory Panel, and VISN Pharmacist Executives

The following recommendations are based on medical evidence, clinician input, and expert opinion. The content of the document is dynamic and will be revised as new information becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. THE CLINICIAN SHOULD USE THIS GUIDANCE AND INTERPRET IT IN THE CLINICAL CONTEXT OF THE INDIVIDUAL PATIENT. INDIVIDUAL CASES THAT ARE EXCEPTIONS TO THE EXCLUSION AND INCLUSION CRITERIA SHOULD BE ADJUDICATED AT THE LOCAL FACILITY ACCORDING TO THE POLICY AND PROCEDURES OF ITS P&T COMMITTEE AND PHARMACY SERVICES.

The Product Information should be consulted for detailed prescribing information.

See the VA National PBM-MAP-VPE Monograph on this drug at www.pbm.va.gov or [PBM INTRANet](#) for further information.

Exclusion Criteria

If the answer to ANY item below is met, then the patient should NOT receive capmatinib.

- EGFR mutation (exon 19 or exon 21 mutation) or ALK rearrangement
- Neurologically unstable CNS metastases
- Unmanageable Strong or Moderate CYP3A4 inducer drug interaction identified
- Current interstitial lung disease or interstitial pneumonitis including radiation pneumonitis
- Creatinine clearance < 30 mL/min
- Pregnancy (i.e. known pregnancy or positive pregnancy test)
- Breastfeeding

Inclusion Criteria

The answers to ALL of the following must be fulfilled in order to meet criteria.

- Care is provided by a VA/VA purchased care oncology provider
- Eastern Cooperative Oncology Group (ECOG) performance status 0-2
- Goals of care and role of Palliative Care consult have been discussed and documented
- Female patients of child-bearing potential or male with female partner of child-bearing potential: counseling provided on contraception and risks vs. benefits of treatment. Use effective contraception during therapy and for 1 week after the last dose.

Additional Inclusion Criteria

The answer to one of the following must be fulfilled in order to meet criteria:

- Patient with metastatic non-small cell lung cancer whose tumor has a mutation that leads to MET exon 14 skipping as detected by an FDA-approved test.
- Patient-specific recommendation for capmatinib from the National Precision Oncology Program for the minimal duration needed to assess for efficacy (in most cases 8-12 weeks).

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