## Reimbursement News

## New oncology reimbursements in Belgium

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Overview of Belgian reimbursement news

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Some generics of docetaxel have been transferred from chapter IV to chapter I, meaning that attestation is no longer required. However, some forms of docetaxel still remain in chapter IV and consequently reimbursement is still restricted to the formerly reimbursable indications.

The reimbursement criteria for the tyrosine kinase inhibitors used in chronic myelocytic leukaemia patients who are Philadelphia positive and for the aromatase inhibitors, and the corresponding attestation forms have been slightly modified.

## Xtandi (enzalutamide)

Xtandi (enzalutamide) can be reimbursed in patients with castration resistant metastatic prostate cancer who failed prior antiandrogen treatment, who are asymptomatic or have few symptoms, and for whom chemotherapy is not yet indicated. Required criteria include serum testosterone <50 ng/dl or <1.7 nmol/l,

pain score 0-3 during the past 24 hours according to the Brief Pain Inventory Short form, and at least one of the following signs of tumour progression: three consecutive increases in serum PSA with at least two PSA values >2 ng/ml and a 50% increase from the nadir PSA, or progression of the osseous lesions, or progression of soft tissue metastases according to RECIST. The patient should not be eligible for further change in hormone treatment and not yet eligible for docetaxel due to a PSA doubling time of >6 months or to other reasons.

## Gazyvaro® (obinutuzumab)

Gazyvaro® (obinutuzumab) can be reimbursed when administered in combination with chlorambucil in patients with Rai stage III/IV (Binet C) or Rai stage 0/I/II (Binet A/B, with one additional criterion) chronic lymphocytic leukaemia who have not received prior treatment and are not fit to receive full dose fludarabine due to co-morbidity.

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Conflict of interest: The author has nothing to disclose and indicates no potential conflict of interest.