

Need for national Canadian strategy for EGFR testing

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Significant advances have taken place in the management of patients with advanced and metastatic non–small-cell lung cancer (NSCLC) over the last 5 years. Traditionally, all advanced NSCLC patients were treated in a similar manner. More recently, the importance of pathologic subtype has been recognized. Data from several randomized trials demonstrate that epidermal growth factor (EGFR) mutation status is predictive of improved survival and quality of life with selected systemic therapies.

Researchers in Canada examined the barriers to the initial implementation of the national EGFR testing policy. In the September issue of the International Association for the Study of Lung Cancer's journal, the *Journal of Thoracic Oncology (JTO)*, researchers conclude that the uptake of EGFR [mutation testing](#) dropped substantially once funding from the pharmaceutical industry was discontinued.

The Canadian health care system is publicly funded through each province or territory. EGFR mutation testing was not available in Canada outside of research laboratories before March 2010. Five laboratories across the country undertook validation and quality-control processes to establish a network for EGFR mutation testing using reverse transcriptase– [polymerase chain reaction](#). Laboratories were reimbursed for testing by AstraZeneca Canada for an initial 12 months. Patients were eligible for EGFR mutation testing if they had advanced/metastatic NSCLC and non-squamous histology.

At the end of 12 months, when the EGFR mutation testing and associated compassionate [gefitinib](#) program supported by AstraZeneca were completed, there was a substantial drop in the number of EGFR test requests. Over the next 6 months, the number of tests performed monthly ranged from 50 to 120 in comparison to 200 to 250 tests per month in the first 12 months.

Researchers conclude, "there is a need for a national strategy to ensure resources are in place to implement molecular testing for new molecularly targeted agents."

Provided by International Association for the Study of Lung Cancer

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