

Country & Condition Card



Why this resource?

The availability of precision medicine (PM) is very different from country to country, making it hard to make comparisons, and to identify and share best practices between countries. Even within one country, the PM situation can be complex and hard to understand, and the environment is quickly changing.

Advocates who are working towards better access for PM in their country need to have facts depicted in a simple way at their disposal and these cards aim to fill that gap by giving a snapshot of the current situation of PM availability in a given country and for different conditions.

Information is presented in a comprehensive and visual way to make it easier for the advocate to take action, and to provide help to patients who need support.

How is this resource addressing the issue?

The Cards start with an overview of criteria that has been identified as the first information that advocates and patients typically look for. These include reimbursement of testing and treatment, as well as when testing is offered. For advocates who wish to have more information, each condition has a hyperlink to a more extensive chapter on the respective condition. These chapters have additional information for your research.

There are also links to the available Molecular Tumor Boards (MTBs) as well as Comprehensive Cancer Centers in your country, which have been identified as being an important factor in enabling patient access to PM. You will also find additional resources for more extensive information.



The information provided in this card depicts what should be happening in theory. However, many factors influence the actual delivery of PM to the patient and the reality on the ground may be different.



Pakistan

How to navigate in this resource: clicking on the various elements will either take you to an external resource or to another section of the document with more information

Quick overview

Reimbursement of molecular testing

Lung Cancers: Not available

CUP: Not available

Breast cancers: Not available

Digestive Cancers: Not available

Reimbursement of treatment

Lung Cancers: Limited

CUP: Not available

Breast cancers: Limited

Digestive Cancers: Limited

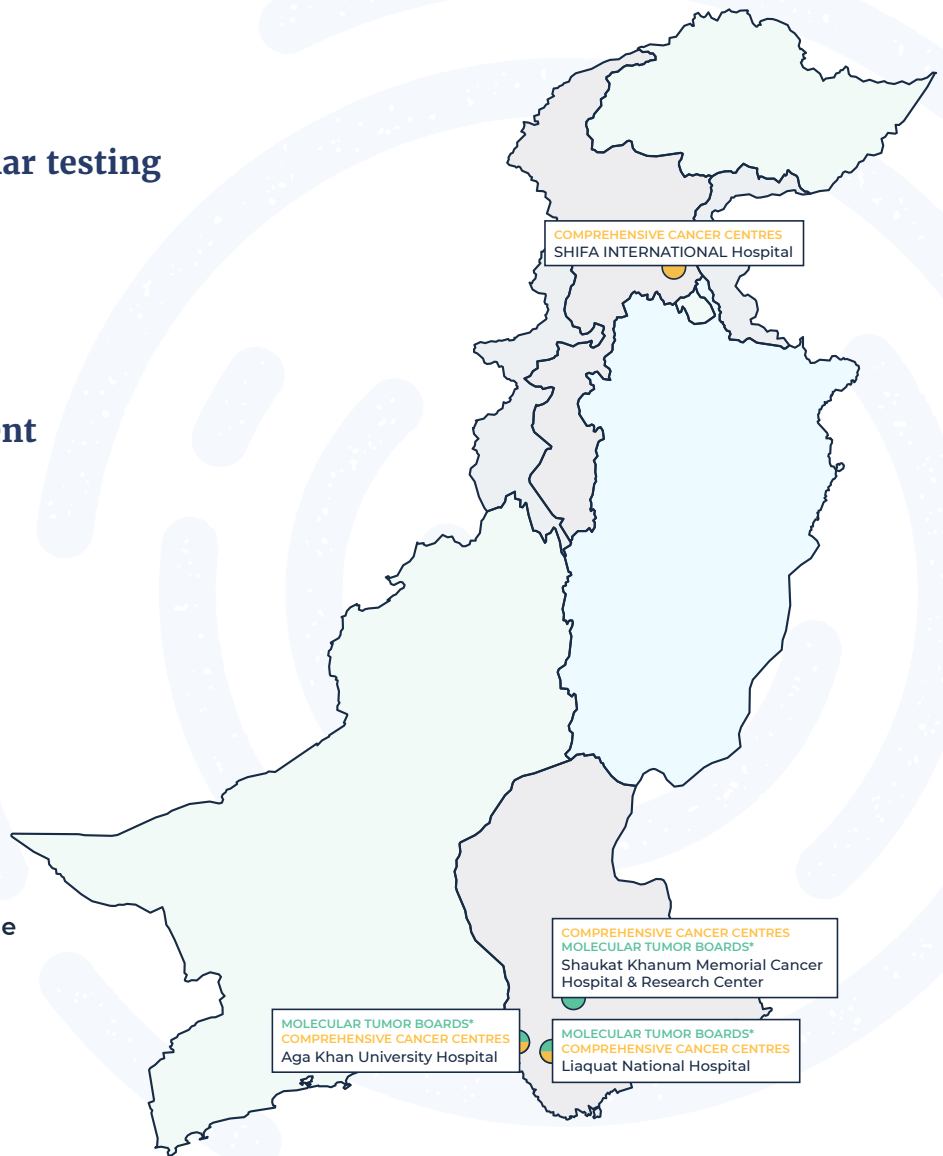
When testing is offered to the patient

Lung Cancers: Advanced stage

CUP: Advanced stage

Breast cancers: Advanced stage

Digestive Cancers: Advanced stage



* Molecular tumor boards (MTBs), unlike tumor boards, discuss patients with all types of cancer whose tumors have been analyzed with advanced genomic diagnostic tests, in order to make recommendations for individual patient treatments. MTBs typically include cancer genomicists and bioinformatics experts as well as medical oncologists, surgeons, radiation therapists, researchers and pathologists.¹⁴

Lung Cancer

Average diagnoses per year 2020: **10,538**

Deaths (2020): **9,288**

Testing	
Country-specific guidelines for biomarker testing of advanced or recurrent NSCLC	NCCN guidelines are followed and no specific guidelines are in place
Access to molecular testing (offered when)	Metastatic disease when out of treatment options
Testing types	Single molecular tests Hotspot Comprehensive genomic sequencing

Financial Access	
Reimbursement of molecular testing	No reimbursement
Reimbursement of lung cancer drugs	Some Targeted therapies are partially funded in Public sector and by the philanthropic organizations

Treatment	
Availability of clinical trials	No clinical trials available
Expertises centres for rare lung cancer (ALK, ROS-1 and BRAF)	Aga Khan University Hospital, Liaquat National Hospital, Shaukat Khanum Memorial Cancer Hospital & Research Center, SHIFA INTERNATIONAL Hospital

Other
Multidisciplinary approach is increasing in tertiary care hospitals especially in the area of cancer.

Cancer of Unknown Primary

Diagnoses:

Deaths:

Testing	
Country-specific guidelines for biomarker testing	NCCN guidelines are followed and no specific guidelines are in place
Access to molecular testing (offered when)	Metastatic disease when out of treatment options
Testing types	Hotspot Comprehensive genomic sequencing

Financial Access	
Reimbursement of molecular testing	No reimbursement
Reimbursement of treatment	No specific treatment

Treatment	
Approved treatment by regulatory authorities	No
Availability of clinical Trials	No clinical trials available
Centres of excellence	Aga Khan University Hospital, Liaquat National Hospital, Shaukat Khanum Memorial Cancer Hospital & Research Center, SHIFA INTERNATIONAL Hospital

Breast Cancers

Diagnoses (2020): 25,928




Deaths (2020): 13,725

Testing	
Country-specific guidelines for biomarker testing	NCCN guidelines are followed and no specific guidelines are in place
Access to molecular testing (offered when)	TNBC Metastatic disease Out of treatment options
Testing types	Single molecular tests Hotspot Comprehensive genomic sequencing

Financial Access	
Reimbursement of molecular testing	No reimbursement
Reimbursement of treatment	Some Targeted therapies are partially funded in Public sector and by the philanthropic organizations

Treatment	
Approved treatment by regulatory authorities	Trastuzumab, Pertuzumab, Emtansine, trastuzumab, Lipatinib,
Availability of clinical Trials	No

Other parameters:

 Turnaround times	Report may take 3-4 weeks
 Innovative clinical trials	No trials available
 Reimbursement time of innovative oncology treatments after PK market authorization	No reimbursement but funding may take 2-3 months

Methodology

This resource is a co-created effort from a multi-stakeholder working group within the “From Testing to Targeted Treatments” Program. This group includes patient organization representatives and advocates as well as representatives from the pharma and diagnostics companies, enabling a more nuanced and comprehensive view on the content and the needs of potential advocates.

This version of the cards is the result of multiple rounds of discussion, brainstorming, literature review and feedback. Initially, 75 parameters were identified and in subsequent rounds prioritized to include these final criteria, having been assessed as being the most important by the group. The content pulls together various publications, reports and other sources identified by working group contributors, and aims to display facts and information in a simple way with references to further readings.

Standards

All resources used for the cards should be from reliable and credible sources. Any information must be referenced to a publicly available resource, e.g

- Resources should be up-to-date and not published more than five years ago;
- Taken from websites belonging to educational and governmental institutions;
- Published in academic databases; from medical societies

References



This country and condition card has been completed internally by Foundation Medicine and Roche Pakistan