

# U.S. FDA Approved Immune-Checkpoint Inhibitors<sup>1-7</sup>

Squamous Cell Head & Neck Cancer

Unresectable or Metastatic Melanoma

Merkel Cell Carcinoma  
Cutaneous Squamous Cell Carcinoma

Hepatocellular Carcinoma

Renal Cell Carcinoma

Colorectal or MSI-H or dMMR Cancers

Endometrial Carcinoma

Cervical Cancer

Oesophageal Squamous Cell Carcinoma

Small Cell Lung Cancer  
Non-Small Cell Lung Cancer

Triple-Negative Breast Cancer

Gastric & GEJ Carcinoma

Classical Hodgkin Lymphoma

PMBCL

Locally Adv. or Met. Urothelial Carcinoma  
BCG-unresponsive High-Risk NMIBC



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Name	Company	Target	Indications	Details
Pembrolizumab (Keytruda®) <sup>1</sup>	Merck (MSD)	PD-1	• Adj. treatment of melanoma	• Patients with lymph node involvement, and • Underwent complete resection
			• 1L inoperable or metastatic melanoma	• Single agent
			• 1L metastatic Merkel cell carcinoma	• Adult and paediatric patients
			• 1L metastatic <i>non-squamous</i> NSCLC	• In combination with pemetrexed and a platinum chemotherapy • No known EGFR/ALK tumour-driver mutations
			• 1L metastatic <i>squamous</i> NSCLC	• In combination with carboplatin and paclitaxel <i>or</i> nab-paclitaxel
			• 1L stage III or metastatic NSCLC	• No known EGFR/ALK tumour-driver mutations • TPS ≥ 1% • (Stage III only) Patients not candidates for surgical resection or definitive chemoradiation
			• 2L metastatic NSCLC with PD-L1 expression	• PD on or after platinum-containing chemotherapy • TPS ≥ 1%
			• 3L metastatic SCLC	• PD on or after platinum-based chemotherapy
			• 1L metastatic or unresectable, recurrent head and neck squamous cell carcinoma (HNSCC)	• In combination with platinum and FU
			• 1L metastatic or unresectable, recurrent HNSCC with PD-L1 expression	• As a single agent • CPS ≥ 1
			• 2L recurrent or metastatic HNSCC	• As a single agent • PD on or after platinum-containing chemotherapy
			• 4L refractory classical Hodgkin lymphoma	• Adult and paediatric patients with disease relapse after 3 prior treatments
			• 3L refractory PMBCL	• Adult and paediatric patients relapsed ≥ 2 or more prior lines of therapy. • <b>Limitation of use:</b> not recommended when PMBCL patient requires urgent cytoreductive therapy
• 1L locally advanced or metastatic urothelial carcinoma	• Ineligible for cisplatin chemotherapy and a CPS ≥ 10 • Ineligible for platinum chemotherapy irrespective of PD-L1 expression			
• 2L locally advanced or metastatic urothelial carcinoma	• PD during or following platinum-containing chemotherapy • PD within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy			

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<b>Pembrolizumab (Keytruda®)</b> <sup>1</sup>	<b>Merck (MSD)</b>	<b>PD-1</b>	<ul style="list-style-type: none"> <li>• BCG-unresponsive, high-risk, non-muscle invasive bladder cancer</li> </ul>	<ul style="list-style-type: none"> <li>• Carcinoma in situ with or without papillary tumours</li> <li>• Ineligible for or have elected not to undergo cystectomy</li> </ul>
			<ul style="list-style-type: none"> <li>• MSI-H or dMMR cancers</li> </ul>	<ul style="list-style-type: none"> <li>• Adult and paediatric patients</li> <li>• PD in solid tumours following prior treatment and no other, satisfactory alternative treatment options</li> <li>• Colorectal cancer progressed following fluoropyrimidine, oxaliplatin, and irinotecan</li> <li>• <b>Limitation of use:</b> safety and effectiveness not established in paediatric patients with MSI-H CNS cancers</li> </ul>
			<ul style="list-style-type: none"> <li>• Recurrent locally advanced or metastatic gastric or GEJ adenocarcinoma</li> </ul>	<ul style="list-style-type: none"> <li>• CPS<math>\geq</math>1</li> <li>• Disease progression <math>\geq</math>2 prior lines of therapy, including fluoropyrimidine- and platinum-containing chemotherapy</li> <li>• PD following HER2-targeted therapy, if indicated</li> </ul>
			<ul style="list-style-type: none"> <li>• 2L recurrent locally advanced or metastatic squamous cell carcinoma of the oesophagus</li> </ul>	<ul style="list-style-type: none"> <li>• CPS<math>\geq</math>10</li> </ul>
			<ul style="list-style-type: none"> <li>• Recurrent or metastatic cervical cancer</li> </ul>	<ul style="list-style-type: none"> <li>• CPS<math>\geq</math>1 and PD on or after chemotherapy</li> </ul>
			<ul style="list-style-type: none"> <li>• 2L hepatocellular carcinoma</li> </ul>	<ul style="list-style-type: none"> <li>• Previously treated with sorafenib</li> </ul>
			<ul style="list-style-type: none"> <li>• Recurrent locally advanced or metastatic Merkel cell carcinoma</li> </ul>	<ul style="list-style-type: none"> <li>• Adult and paediatric patients</li> </ul>
			<ul style="list-style-type: none"> <li>• 1L advanced renal cell carcinoma</li> </ul>	<ul style="list-style-type: none"> <li>• In combination with axitinib</li> </ul>
			<ul style="list-style-type: none"> <li>• 2L advanced endometrial carcinoma</li> </ul>	<ul style="list-style-type: none"> <li>• In combination with Lenvatinib</li> <li>• Not MSI-H or dMMR</li> <li>• PD following prior systemic therapy</li> <li>• Not candidates for curative surgery or radiation</li> </ul>
			<ul style="list-style-type: none"> <li>• Additional recommended dosage regimen for adults</li> </ul>	<ul style="list-style-type: none"> <li>• 400mg every 6 weeks for all adult indications</li> </ul>

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Name	Company	Target	Indications	Details
<b>Nivolumab (Opdivo®)<sup>2</sup></b>	<b>Bristol-Myers Squibb</b>	<b>PD-1</b>	• Adj./1L Inoperable or metastatic melanoma	• Single agent <i>or</i> in combination with ipilimumab
			• Adj. treatment of melanoma	• Patients with lymph node involvement or metastatic disease, and • Underwent complete resection
			• 1L metastatic NSCLC	• In combination with ipilimumab • PD-L1 ≥1% • No EGFR or ALK genomic tumour aberrations
			• 1L metastatic or recurrent NSCLC	• In combination with ipilimumab and 2 cycles of platinum-doublet chemotherapy • No EGFR or ALK genomic tumour aberrations
			• 2L metastatic NSCLC	• PD on or after platinum-based chemotherapy • Patients with EGFR or ALK genomic tumour aberrations should have disease progression on FDA-approved therapy for these aberrations prior to receiving nivolumab
			• 3L metastatic SCLC	• Progression on at least two lines of prior treatment • Including: one line of platinum-based therapy
			• 1L intermediate or poor risk renal cell carcinoma	• In combination with ipilimumab
			• 2L advanced renal cell carcinoma	• After prior treatment with anti-angiogenic drug
			• 3L/4L classical Hodgkin lymphoma	• Adult patients • After prior auto-HSCT and (3L-only) brentuximab vedotin (BV)
			• 1L recurrent or metastatic head and neck squamous cell carcinoma	• PD on <i>or</i> after (adjuvant) platinum chemotherapy
			• 1L/2L locally advanced or metastatic urothelial carcinoma	• Failure on prior platinum chemotherapy • PD<12 months after (neo)adjuvant platinum chemotherapy
			• MSI-H or dMMR metastatic colorectal cancer	• Single agent <i>or</i> in combination with ipilimumab • Adult and paediatric patients (≥12 years) • PD following fluoropyrimidine, oxaliplatin, and irinotecan
			• 2L hepatocellular carcinoma	• PD on prior sorafenib • Single agent <i>or</i> in combination with ipilimumab

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Name	Company	Target	Indications	Details
<b>Ipilimumab (Yervoy®)</b> <sup>3</sup>	<b>Bristol-Myers Squibb</b>	<b>CTLA4</b>	• 1L inoperable or metastatic melanoma	• Adult and paediatric patients ( $\geq 12$ years) • Single agent or in combination with nivolumab (see Opdivo® USPI)
			• Adj. treatment of cutaneous melanoma	• Patients with pathological involvement of the regional lymph nodes >1 mm who underwent complete resection, including total lymphadenectomy
			• 1L advanced, intermediate or poor risk renal cell carcinoma	• In combination with nivolumab
			• MSI-H or dMMR metastatic colorectal cancer	• Single agent or in combination with nivolumab • Adult and paediatric patients ( $\geq 12$ years) • PD following fluoropyrimidine, oxaliplatin, and irinotecan
			• 2L hepatocellular carcinoma	• In combination with nivolumab • PD with sorafenib
			• 1L metastatic NSCLC	• PD-L1 $\geq 1\%$ • No EGFR or ALK genomic tumour aberrations
			• 1L metastatic or recurrent NSCLC	• In combination with nivolumab and cycles of platinum-doublet chemotherapy • No EGFR or ALK genomic tumour aberrations

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Name	Company	Target	Indications	Details
<b>Atezolizumab (Tecentriq®)</b> <sup>4</sup>	<b>Roche &amp; Genentech</b>	<b>PD-L1</b>	• 1L/2L locally advanced or metastatic urothelial carcinoma	• Ineligible for cisplatin chemotherapy and PD-L1 expression (PD-L1 stained tumour-infiltrating immune cells [IC] covering ≥ 5% of the tumor area)
			• 1L metastatic <i>non-squamous</i> NSCLC	• Ineligible for platinum chemotherapy regardless of PD-L1 expression
			• 2L metastatic NSCLC	• Failure on prior platinum chemotherapy
			• 1L unresectable locally advanced or metastatic triple-negative breast cancer	• PD < 12 months after (neo)adjuvant platinum chemotherapy
			• 1L extensive-stage small cell lung cancer	• In combination with bevacizumab, paclitaxel, and carboplatin
			• 1L unresectable or metastatic HCC	• No EGFR or ALK genomic tumour aberrations
<b>Avelumab (Bavencio®)</b> <sup>5</sup>	<b>Merck Serono &amp; Pfizer</b>	<b>PD-L1</b>	• 1L metastatic Merkel cell carcinoma	• Irrespective of PD-L1 expression
			• 1L/2L locally advanced or metastatic urothelial carcinoma	• Failure on platinum chemotherapy
			• 1L advanced renal cell carcinoma	• Failure on targeted agent (if applicable)
<b>Durvalumab (Imfinzi®)</b> <sup>6</sup>	<b>AstraZeneca</b>	<b>PD-L1</b>	• 1L/2L locally advanced or metastatic urothelial carcinoma	• In combination with paclitaxel protein-bound
			• Maintenance for unresectable, stage III NSCLC	• PD-L1 stained tumour-infiltrating immune cells (IC) of any intensity covering ≥ 1% of the tumour area
			• 1L extensive-stage small cell lung cancer	• In combination with carboplatin and etoposide
<b>Cemiplimab (Libtayo®)</b> <sup>7</sup>	<b>Sanofi</b>	<b>PD-L1</b>	• 1L metastatic cutaneous squamous cell carcinoma (CSCC)	• In combination with bevacizumab

# Abbreviations and Citations

## Abbreviations

1L: first-line  
2L: second-line  
3L: third-line  
4L: fourth-line  
Adv: advanced  
ALK: anaplastic lymphoma kinase  
auto-HSCT: autologous haematopoietic stem cell transplantation  
BV: brentuximab vedotin  
CNS: central nervous system  
CPS: combined proportion score  
dMMR: mismatch-repair deficient  
EGFR: epidermal growth factor receptor  
GEJ: gastroesophageal junction  
HER2: human epidermal growth factor receptor 2  
Met: metastatic  
MSI-H: microsatellite instability-high  
Mu: mutation  
NMIBC: non-muscle invasive bladder cancer  
NSCLC: non-small cell lung cancer  
PMBCL: primary mediastinal B-cell lymphoma  
PD: progression disease  
PD-1: programmed death 1  
PD-L1: programmed death ligand 1  
TPS: tumour proportion score  
WT: wild-type

## Citations

- 1 Prescribing information pembrolizumab (Keytruda®), revised: 04/2020. Available at: [https://www.merck.com/product/usa/pi\\_circulars/k/keytruda/keytruda\\_pi.pdf](https://www.merck.com/product/usa/pi_circulars/k/keytruda/keytruda_pi.pdf) (Accessed 5<sup>th</sup> June 2020).
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- 3 Prescribing information ipilimumab (Yervoy®), revised: 05/2020. Available at: [https://packageinserts.bms.com/pi/pi\\_yervoy.pdf](https://packageinserts.bms.com/pi/pi_yervoy.pdf) (Accessed 5<sup>th</sup> June 2020).
- 4 Prescribing information atezolizumab (Tecentriq®), revised: 05/2020. Available at: [https://www.gene.com/download/pdf/tecentriq\\_prescribing.pdf](https://www.gene.com/download/pdf/tecentriq_prescribing.pdf) (Accessed 5<sup>th</sup> June 2020).
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