

Jun 15, 2016

Maria Rivas, SVP  
Merck & Co., Inc.  
CRB-210  
600 Corporate Drive  
Lebanon, NJ 08833  
908-236-1120  
[maria.rivas1@merck.com](mailto:maria.rivas1@merck.com)

#### **NCCN Guidelines Panel: Head and Neck Cancers**

On behalf of Merck & Co., Inc., I respectfully request the NCCN Head and Neck Cancers Panel to review the enclosed information for KEYTRUDA (pembrolizumab), in reference to NCCN Guidelines V1.2016 for Head and Neck Cancers.

#### Specific changes requested:

We respectfully request that KEYTRUDA (pembrolizumab) be added as Immunotherapy for patients with recurrent or metastatic head and neck squamous cell carcinoma in the sections ADV-1 to ADV-4 (pages 64-67) and CHEM-A (pages 99-100).

#### FDA approval:

KEYTRUDA (pembrolizumab) is not approved for the treatment of patients with recurrent or metastatic head and neck squamous cell carcinoma. For additional information on FDA-approved indications, please see enclosed prescribing information (PI).<sup>1</sup>

#### Rationale:

Patients with recurrent or metastatic head and neck squamous cell carcinoma (R/M HNSCC) have a poor prognosis and few treatment options. In a phase 1b study (KEYNOTE-012, initial cohort) published by Seiwert *et al*, pembrolizumab was well tolerated and showed clinically meaningful antitumor activity with overall response rate (ORR) of 18% (8/45 patients; 95% CI: 8–32) in heavily pretreated R/M HNSCC patients irrespective of HPV status.<sup>2</sup>

In addition to this publication, results of the pooled analyses of initial (PD-L1+) and expansion (PD-L1+/PD-L1-) cohorts from KEYNOTE-012 were recently presented at ASCO 2016 showing ORR of 18% (34/192 patients; 95% CI: 13-24) in heavily pretreated R/M HNSCC patients regardless of PD-L1 status, with 65% (22/34 patients) of responders having ongoing responses at the time of analysis (85% of responses lasted for ≥6 months; 71% of responses lasted for ≥12 months). The median overall survival (OS) was 8 months (95% CI: 6-10) with 6-month OS rate of 58% and 12-month OS rate of 38%. Most common treatment-related AEs were fatigue (22%), hypothyroidism (10%), rash (9%), pruritus (8%), decreased appetite (8%), pyrexia (6%) and nausea (6%) with 6% of patients discontinuing due to a treatment-related AE and no treatment-related deaths.<sup>3</sup>

The following resources are submitted to assist the committee with their review:

1. KEYTRUDA (pembrolizumab) prescribing information. Merck & Co., Inc.
2. Seiwert TY *et al*. Safety and clinical activity of pembrolizumab for treatment of recurrent or metastatic squamous cell carcinoma of the head and neck (KEYNOTE-012): an open-label, multicentre, phase 1b trial. *Lancet Oncol* 2016. Published Online May 27, 2016 [http://dx.doi.org/10.1016/S1470-2045\(16\)30066-3](http://dx.doi.org/10.1016/S1470-2045(16)30066-3)

3. Mehra R *et al.* Efficacy and safety of pembrolizumab in recurrent/metastatic head and neck squamous cell carcinoma (R/M HNSCC): pooled analyses after long-term follow-up in KEYNOTE-012. J Clin Oncol 2016; 34 (suppl; abstr 6012). Presented at American Society of Clinical Oncology Annual Meeting; June 3-7, 2016; Chicago, IL.

Thank you for considering this request. Below is my contact information should you need to contact me for additional information.

Sincerely,

A handwritten signature in black ink, appearing to read "Maria Rivas".

Maria Rivas, SVP  
Merck & Co., Inc.  
CRB-210  
600 Corporate Drive  
Lebanon, NJ 08833  
908-236-1120 [maria.rivas1@merck.com](mailto:maria.rivas1@merck.com)