



TECENTRIQ + BEVACIZUMAB REDEFINING TREATMENT EXPECTATIONS FOR 1L UNRESECTABLE HCC PATIENTS ACROSS THE WORLD¹⁻⁴

TECENTRIQ + BEVACIZUMAB:

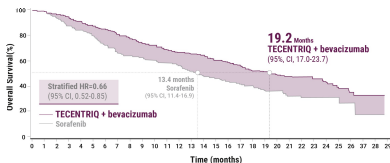
THE FIRST CANCER IMMUNOTHERAPY COMBINATION TO DEMONSTRATE A CLINICALLY MEANINGFUL AND SUSTAINED SURVIVAL BENEFIT VERSUS SORAFENIB¹⁻⁴

UNPRECEDENTED SURVIVAL IN 1L UNRESECTABLE HCC PATIENTS⁵⁻⁹

Significant reduced risk of death demonstrated with TECENTRIQ + bevacizumab vs sorafenib^{5,6}

IMbrave150: Updated analysis⁸ (Median follow-up: 15.6 months)

Overall Survival (OS)



TECENTRIQ + bevacizumab has shown OS superiority over sorafenib in 1L unresectable HCC in the primary analysis⁵. This descriptive analysis provides additional insights into the benefit of the combination.

IMbrave150: A GLOBAL LANDMARK FOR HCC WITH UNPRECEDENTED SURVIVAL BENEFIT VS SORAFENIB⁵⁻⁹

A global, open-label, phase III trial, comparing TECENTRIQ in combination with bevacizumab vs. sorafenib in patients with unresectable hepatocellular carcinoma who had not previously received systemic treatment.^{5,9}

- Updated efficacy results are consistent with the primary analysis, and confirm TECENTRIQ + bevacizumab as Standard of Care in 1L unresectable HCC
- Consistent safety profile of TECENTRIQ + bevacizumab vs. sorafenib with initial analysis
- Prolonged treatment duration with TECENTRIQ + bevacizumab without an associated increase in treatment-related AE rates

Abbreviations:

AE, adverse events; CI, confidence interval; HCC, hepatocellular carcinoma; HR, hazard ratio; OS, overall survival.

References:

1. Tecentriq (atezolizumab) Singapore Product Insert. Updated February 2022.
2. Chen L-T et al. Ann Oncol 2020;31(3):334-351.
3. ESMO Guidelines Committee. ESMO eUpdate – Hepatocellular Carcinoma Treatment Recommendations, March 2021. [Internet; cited 2022 June] Available from: <https://www.esmo.org/guidelines/guidelines-by-topic/gastrointestinal-cancers/hepatocellular-carcinoma/eupdate-hepatocellular-carcinoma-treatment-recommendations>
4. National Comprehensive Cancer Network Guidelines - HCC v1 2022. [Internet; cited 2022 June] Available from: https://www.nccn.org/professionals/physician_gls/default.aspx
5. Finn RS, et al. N Engl J Med 2020;382:1894-1905.
6. Cheng AL, et al. Ann Oncol 2019;30(suppl 9):IX186-IX187.
7. Galle PR, et al. J Clin Oncol 2020;38(suppl 4):476-476.
8. Finn RS et al. J Clin Oncol 2021;39(suppl 3): Abstr 267.
9. Cheng AL et al. J Hepatol 2022;76(4):862-873.



Before prescribing Tecentriq, please consult the full local prescribing information by visiting <https://www.roche.com.sg/en/pharma/tecentriq.html> or by scanning the following QR code.

SAFETY REPORTING FOR POTENTIAL UNDESIRABLE EFFECTS: Please report any adverse events to the local Roche Adverse Event email at singapore.drugsafety@roche.com or call (65) 6735 0550. This will enable Roche to better understand the safety of Tecentriq and to provide appropriate information to Health Authorities, Healthcare Providers and patients.

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