



Codes ATC: **L01FD01**


Indication	Carcinoma of breast, specialised type <span style="float: right;">Code ICD11: <b>2D10</b></span>
INN	Trastuzumab
Type de médicament	Biological agent
Type de liste	Liste complémentaire
Additional notes	Including quality-assured biosimilars
Formulations	Parenteral > General injections > IV: 60 mg in vial powder for injection ; 150 mg in vial powder for injection ; 440 mg in vial powder for injection
Historique des statuts LME	Ajouté pour la première fois en 2015 ( <b>TRS 994</b> ) Modifié en 2019 ( <b>TRS 1021</b> )
Sexe	Tous
Âge	Adolescents et adultes
Équivalence thérapeutique	La recommandation concerne ce médicament spécifique
Renseignements sur le brevet	Main patents have expired but secondary patents might remain active in some jurisdictions. For more information on specific patents and license status for developing countries visit <a href="http://www.MedsPal.org">www.MedsPal.org</a>  Lire la suite <a href="#">sur les brevets.</a> 

#### Balises


Cancer

Biological

#### Wikipédia

[Trastuzumab](#) 

#### DrugBank

[Trastuzumab](#) 

## Résumé des preuves et recommandation du comité d'experts

The Committee noted the correspondence from the European Society for Medical Oncology (ESMO) requesting recognition of biosimilars of rituximab and trastuzumab on the EML. The Committee agreed that quality-assured biosimilars of these monoclonal antibodies represent an opportunity for expanding affordable access to cancer medicines for health systems. To help improve access, the Committee recommended the current listing for intravenous rituximab on the EML should indicate that quality-assured biosimilars of rituximab should also be considered as essential medicines. In addition, the Expert Committee recommended that WHO continue to facilitate access to biosimilars through the Prequalification programme and WHO Collaborative Registration Procedure.

[Rapport du comité d'experts](#) 

