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Section:	Prescription Drugs	**Effective Date:**	October 2, 2026
Subsection:	Antineoplastic Agents	**Original Policy Date:**	October 2, 2026
Subject:	Etcamah	**Page:**	1 of 5

Last Review Date: December 11, 2026

Etcamah

Description

Etcamah (camizestrant)

Background
Etcamah is an estrogen receptor (ER) antagonist. In vitro, Etcamah binds to the ligand binding domain of estrogen receptor-alpha (ERα), antagonizing the activity of ERα encoded by both wild-type *ESR1* and mutated *ESR1* and inducing proteasome-dependent degradation of ERα, without agonizing ERα. Etcamah demonstrated anti-tumor activity in ER-positive cell lines, in vitro, and patient derived xenograft (PDX) models, in vivo, including those with wild-type or mutated *ESR1* genes. Treatment with Etcamah and CDK4/6 inhibitors (abemaciclib, palbociclib, or ribociclib) demonstrated greater anti-tumor activity than single agent treatment in ER-positive cell lines and PDX models (1).

Regulatory Status
FDA-approved indication: Etcamah is an estrogen receptor antagonist indicated: (1)

- in combination with a CDK4/6 inhibitor (abemaciclib, palbociclib, or ribociclib) for the treatment of adult patients with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer upon detection of *ESR1* mutation during aromatase inhibitor and CDK4/6 inhibitor therapy, based on an FDA-authorized test.

Etcamah carries a boxed warning regarding arrhythmia risk with concomitant use of QTc interval prolonging drugs. Monitor electrocardiogram (ECG) prior to initiating Etcamah, then

every week for the first 2 weeks of treatment, and periodically during treatment as clinically indicated. Etcamah in combination with ribociclib, a QTc interval prolonging drug and a strong CYP3A inhibitor, or in combination with other QTc interval prolonging drugs, can increase the risk of Torsades de Pointes, other ventricular arrhythmias, and sudden death. Avoid concomitant use of Etcamah with products (other than ribociclib) known to prolong the QTc interval and/or have known risk of Torsades de Points. If concomitant use with other products cannot be avoided, monitor the QTc interval more frequently. Obtain ECG prior to initiation and monitor heart rate and QTc interval during treatment. Assess and correct electrolyte abnormalities prior to initiation and during treatment. Withhold Etcamah until resolution of QTc interval prolongation and resume or permanently discontinue Etcamah based on severity (1).

Etcamah has been associated with bradycardia. Monitor heart rate more frequently during the first 30 days. Avoid concomitant use of Etcamah with other products known to cause bradycardia. Withhold or permanently discontinue Etcamah based on severity (1).

Etcamah can cause fetal harm when administered to a pregnant woman. Females of reproductive potential should be advised to use effective non-hormonal contraception during treatment with Etcamah and for 4 weeks after the last dose. Male patients with female partners of reproductive potential should be advised to use effective contraception during treatment with Etcamah and for 1 week after the last dose (1).

The safety and effectiveness of Etcamah in pediatric patients less than 18 years of age have not been established (1).

Related policies
Inluriyo, Orserdu

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Etcamah may be considered **medically necessary** if the conditions indicated below are met.

Etcamah may be considered **investigational** for all other indications.

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Locally advanced or metastatic breast cancer
    a. HR-positive, HER2-negative
    b. Presence of *ESR1* mutation in plasma specimen using an FDA-authorized test
    c. Patient has received at least 6 months of an aromatase inhibitor and CDK4/6 inhibitor therapy
    d. Used in combination with a CDK4/6 inhibitor Ibrance (palbociclib), Kisqali (ribociclib), or Verzenio (abemaciclib)

AND ALL of the following:

a. Prescriber agrees to monitor electrocardiograms (ECGs) prior to initiation, weekly for first 2 weeks of treatment, and as clinically indicated during treatment
b. Females of reproductive potential **only**: patient will be advised to use effective non-hormonal contraception during treatment with Etcamah and for 4 weeks after the last dose
c. Males with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Etcamah and for 1 week after the last dose

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Advanced or metastatic breast cancer
    a. Used in combination with a CDK4/6 inhibitor Ibrance (palbociclib), Kisqali (ribociclib), or Verzenio (abemaciclib)

AND ALL of the following:

a. **NO** disease progression or unacceptable toxicity
b. Prescriber agrees to monitor electrocardiograms (ECGs) as clinically indicated
c. Females of reproductive potential **only**: patient will be advised to use effective non-hormonal contraception during treatment with Etcamah and for 4 weeks after the last dose
d. Males with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Etcamah and for 1 week after the last dose

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Quantity 75 mg daily

Duration 12 months

Prior – Approval *Renewal* Limits

Same as above

Rationale

Summary

Etcamah is an estrogen receptor antagonist indicated for the treatment of HR-positive, HER2-negative, *ESR1*-mutated locally advanced or metastatic breast cancer. Etcamah carries a boxed warning regarding arrhythmia risk with concomitant use of QTc interval prolonging drugs. Etcamah also contains warnings regarding bradycardia and embryo-fetal toxicity. The safety and effectiveness of Etcamah in pediatric patients less than 18 years of age have not been established (1).

Prior approval is required to ensure the safe, clinically appropriate, and cost-effective use of Etcamah while maintaining optimal therapeutic outcomes.

References

1. Etcamah [package insert]. Wilmington, DE: AstraZeneca Pharmaceuticals LP; September 2026.
2. NCCN Drugs & Biologics Compendium® Camizestrant 2026. National Comprehensive Cancer Network, Inc. Accessed on September 9, 2026.

Policy History

Date	Action
October 2026	Addition to PA

Keywords

This policy was effective with interim approval on October 2, 2026 and will be reviewed by the FEP® Pharmacy and Medical Policy Committee on December 11, 2026.