



of the Federal Joint Committee (G-BA) on an Amendment of the Pharmaceuticals Directive (AM-RL):

Appendix XII – Resolutions on the benefit assessment of medicinal products with new active ingredients in accordance with Section 35a SGB V – Insulin degludec (Reassessment based on new scientific (Reassessment based on new scientific knowledge)

- 1. The information under "insulin degludec" is amended as follows:
 - a. The information "16 October 2014" under "Resolution from:" is replaced by the following information: "16 October 2014 / 16 May 2019".
 - b. The information "16 October 2014" under "entered into force on:" is replaced by the following information: "16 October 2014 / 16 May 2019".
- 2. The information under "Approved therapeutic indication" is amended as follows:

"Therapeutic indication (according to the product information of November 2018):

Treatment of diabetes mellitus in adults, young persons, and children aged 1 year and older.

The following information relates exclusively to the therapeutic indication for the treatment of adult patients with diabetes mellitus." 3. Number 1. is amended as follows: a. The information on a), b), and c) is replaced by the following information:

3. Number 1. is amended as follows:

"In the mono- or combination therapy

a) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with at least two hypoglycaemic agents (apart from insulin) do not sufficiently control the blood sugar

Appropriate comparator therapy

- Agents (a Agents (a) Agen Human insulin if the particular combination partners in accordance with the product information are incompatible or contraindicated or not sufficiently effective because of an advanced type 2 diabetes mellitus

Extent and probability of the additional benefit of Insulin degludec compared to the appropriate comparator therapy:

An additional benefit is not proven.

b) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with insulin (with or without another hypoglycaemic agent) do not sufficiently control the blood sugar

Appropriate comparator therapy

The optimisation of the human insulin regimen (possibly + metformin or empagliflozin¹ or liraglutide¹)

Extent and probability of the additional benefit of Insulin degludec compared to the appropriate comparator therapy:

An additional benefit is not proven.

¹ Empagliflozin or liraglutide only for patients with manifest cardiovascular disease who receive further medication for the treatment of cardiovascular risk factors, in particular anti-hypertensive drugs, anticoagulants, and/or lipidreducers (for the operationalisation, see study protocols: Zinman et al. Empagliflozin, cardiovascular outcomes, and mortality in type 2 diabetes. N Engl J Med 2015; 373: 2117-28. DOI 10.1056/NEJMoa1504720 or Marso et al. Liraglutide and Cardiovascular Outcomes in Type 2 Diabetes, N Engl J Med 2016; 375: 311-322. DOI: 10.1056/NEJMoa1603827).

b. Letter d) is replaced by letter c).

c. The following information is added at the end after the information referred to in point (c)

"Study results according to endpoints ² of the DEVOTE study for patient groups a) and b) in adult patients with insufficiently controlled type 2 diabetes mellitus and manifest cardiovascular disease:

Endpoint category		ervention		<u>Control</u>	Intervention vs
Endpoint		in degludec		ulin glargin	control
	N	Patients with event n (%)	N	Patients with event n (%)	HRª [95% CI]; p value
Mortality					
Overall mortality	3818	202 (5.3)	3819	221 (5.8)	0.91 [0 .76; 1.11]; 0.352
Morbidity					
Cardiovascular events (MACE)	3818	325 (8.5)	3819	356 (9.3)	0.91 [0.78; 1.06]; 0.209
Cardiovascular death ^b	3818	136 (3.6)	3819	142 (3.7)	0.96 [0.76; 1.21]; 0.714
Non-fatal stroke	3818	71 (1.9)	3819	579 (2.19	0.90 [0.65; 1.23]; 0.502
Non-fatal myocardial infarction	3818	144 (3.8)	3819	69 (4.4)	0.85 [0.68; 1.06]; 0.150
Hospitalisation because of cardiac insufficiency	3818	296 (7.8)	3819	322 (8.4)	0.91 [0.78; 1.07]; 0.251
Health-related quality of lit	fe				
		do the	Endpoin	t not recorded	
Side effects					
AEs (additionally shown)	3818	1832 (48.0)	3819	1845 (48.3)	-
SAEs	3818	147 3 (38.6)	3819	1517 (39.7)	RR: 0.97 [0.92; 1.03]; 0.313
Withdrawal because of AEs	3818	200 (5.2)	3819	222 (5.8)	RR: 0.90 [0.75; 1.09]; 0.293
Non-severe, symptomatic, confirmed hypoglycaemias	Endpoir	nt not recorded			
Severe hypoglycaemias in total (SAE)	3818	84 (2.2)	3819	78 (2.0)	RR: 1.08 [0.79; 1.46]; 0.635
Severe hypoglycaemias in total (SAE; in combination with glucose /glucagon; severe neuroglycopenic	3818	157 (4.1)	3819	210 (5.5)	RR: 0.75 [0.61; 0.92]; 0.005
symptoms)					

b: also takes into account 75 deaths with unknown cause

c: Calculation by the IQWiG, exact unconditional test (CSZ method according to Andrés)

Abbreviations:

² Data from the dossier assessment by the Institute for Quality and Efficiency in Health Care (IQWiG) (A18-84) of 27 February 2019 unless indicated otherwise.

CI: Confidence interval; MACE: Major adverse cardiovascular events; n: Number of patients with (at least one) event; N: Number of patients evaluated; RCT: Randomised Controlled Study; RR: Relative Risk; SOC: System Organ Class; SAE: Serious Adverse Event; AE: Adverse Event; vs: versus

	I	Intervent nsulin deg			<u>Contro</u> Insulin gl		Intervention vs control	
	N ^a	Values at the start of study MV (SD)	Change at the end of study MV ^b (SD)	N ^a	Values at the start of study MV (SD)	Change at the end of study MV ^b (SD)	MD [95% CI]; p value	Η.
HbA1c (%)	3818	8.35 (1.59)	-0.86 (0.02)	3819	8.31 (1.62)	-0.87 (0.02)	0.01 [−0.05; 0.07]; 0.779°	
Body weight	3818	96.1 (22.9)	2.2 (7.3)	3819	96.1 22.9)	1.9 (7.3)	ectil	

Additionally presented endpoints of the DEVOTE study

a: Number of patients who were taken into account in the evaluation for the caculation of the estimation of the effect; the values at the start of the study can be based on other patient figures.

c: MMRM with interactions between medical rounds and treatment and between medical rounds and baseline value as fixed effects

Abbreviations:

HbA1c: Glycohaemoglobin; ITT: Intention to Treat; CI: Confidence Interval; MD: Mean Value Difference; MMRM: mixed model with repeated measurements; MV: Mean Value; N: Number of evaluated patients; RCT: Randomised Controlled Study; SD: Standard Deviation; vs: versus

a) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with at least two hypoglycaemic agents (apart from insulin) do not sufficiently control the blood sugar

Study results according to endpoints of the studies NN1250-3579 (52 weeks) with the extension study 3579Ext (further 52 weeks) as well as NN1250-3587 and NN1250 3672 (for each 26 weeks), dichotomous²

Endpoint category Endpoint Study	Insu	<u>tervention</u> Ilin degludec metformin		<u>Control</u> Insulin glargin +metformin	Intervention vs control					
	Ν	Patients with event n (%)	Ν	Patients with event n (%)	RR [95% CI]; p value					
Mortality	Mortality									
Overall mortality										
NN1250-3579 (52 W)	519	0 (0)	151	1 (0.7)	n. c.; 0.225					
NN1250-3587 (26 W)	366	0 (0)	191	1 (0.5)	n. c.; 0.343					
NN1250-3672 (26 W)	139	0 (0)	139	1 (0.7)	n.c.; > 0.999					
Total					0.18 [0.03; 1.13]; 0.067					
3579Ext ^a (104 W)	519	2 (0.4)	151	1 (0.7)	0.58 [0.05; 6.37]; 0.536					
Morbidity	Morbidity									
Cardiovascular events (MA	Cardiovascular events (MACE)									
NN1250-3579 (52 W)	518	9 (1.7)	151	1 (0.7)	2.62 [0.34; 20.54];					

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					0.470
NN1250-3587 (26 W)	364	0 (0)	191	2 (1.0)	0.11 [0.01; 2.18]; 0.052 ^b
NN1250-3672 (26 W)	139	3 (2.2)	139	2 (1.4)	1.50 [0.25; 8.84]; > 0.999
Total					1.18 [0.35; 4.04]; 0.788
3579Ext ^a (104 W)	518	24 (4.6)	151	3 (2.0)	2.33 [0.71; 7.64]; 0.166
Cardiovascular death					
NN1250-3579 (52 W)	518	1 (0.2)	151	0 (0)	0.88 [0.04; 21.46]°; 0.734 ^b
NN1250-3587 (26 W)	364	0 (0)	191	0 (0)	n. c.
NN1250-3672 (26 W)	139	0 (0)	139	1 (0.7)	0.33 [0.01-8:11] 0409 ⁶
Total					0.52 [0.06; 4.69]; 0.559 ^d
3579Ext ^a (104 W)	518	2 (0.4)	151	1 (0.7)	0.58 [0.05; 6.39]; 0.536
Non-fatal stroke			•		115 CU
NN1250-3579 (52 W)	518	1 (0.2)	151	1 (0.7)	0.29 [0.02; 4.63]; 0.401
NN1250-3587 (26 W)	364	0 (0)	191	2 (1.0)	0.11 [0.01; 2.18]; ^c ; 0.052 ^b
NN1250-3672 (26 W)	139	0 (0)	139	1 (0.7)	0.33 [0.01; 8.11°; 0.409b
Total				i co gut	0.20 [0.04; 1.11]; 0.066 ^d
3579Ext ^a (104 W)	518	6 (1.2)	151	27(1:3)	0.87 [0.18; 4.29]; > 0.999
Acute coronary syndrome			CO,	a	
NN1250-3579 (52 W)	518	7 (1.4)	151	0 (0)	4.39 [0.25; 76.48];°; 0.158 ^b
NN1250-3587 (26 W)	364	0 (0) 2	191	0 (0)	n. c.
NN1250-3672 (26 W)	139	\$(2.2)	139	0 (0)	7.00 [0.36; 134.27]; ^c ; 0.087 ^b
Total	ner	lersite			5.42 [0.70; 41.85]; 0.105 ^d
3579Ext ^a (104 W)	518	17 (3.3)	151	0 (0)	OR: 7.21 [1.54; ∞]; 0.012 ^e
Side effects					
AEs (additionally shown)					
NN1250- 357 9 (52 W)	519	392 (75.5)	151	110 (72.8)	-
NN1250-3587 (26 W)	366	204 (55.7)	191	113 (59.2)	_
NN1250-3672 (26 W)	139	86 (61.9)	139	95 (68.3)	_
3579Ext ^a (104 W)	519	421 (81.1)	151	121 (80.1)	_
SAES				I	
NN1250-3579 (52 W)	519	40 (7.7)	151	18 (11.9)	0.65 [0.38; 1.09]; 0.137
NN1250-3587 (26 W)	366	10 (2.7)	191	9 (4.7)	0.58 [0.24; 1.40]; 0.228
NN1250-3672 (26 W)	139	10 (7.2)	139	8 (5.8)	1.25 [0.51; 3.07]; 0.808
· · · ·		× /	1		0.72 [0.48; 1.08]; 0.114
Total				05 (40.0)	
	519	80 (15.4)	151	25 (16.6)	0.93 [0.62, 1.40], 0.705
I otal 3579Ext ^a (104 W) Withdrawal because of AE		80 (15.4)	151	25 (16.6)	0.93 [0.62; 1.40]; 0.705
3579Ext ^a (104 W)		80 (15.4)	151	25 (16.6)	2.04 [0.47; 8.86]; 0.544

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NN1250-3672 (26 W)	139	2 (1.4)	139	2 (1.4)	1.00 [0.14; 7.00]; > 0.999
Total					1.17 [0.43; 3.21]; 0.755
3579Ext ^a (104 W)	519	21 (4.0)	151	4 (2.6)	1.53 [0.53; 4.38]; 0.625
Non-severe symptomatic,	confirn	. ,	mias in	. ,	
NN1250-3579 (52 W)	519	175 (33.7)	151	57 (37.7)	0.89 [0.70; 1.13]; 0.382
NN1250-3587 (26 W)	366	97 (26.5)	191	55 (28.8)	0.92 [0.70; 1.22]; 0.617
NN1250-3672 (26 W)	139	23 (16.5)	139	29 (20.9)	0.79 [0.48; 1.30]; 0.442
Total				. ,	0.89 [0.75; 1.06]; 0.182
3579Ext ^a (104 W)	519	237 (45.7)	151	71 (47.0)	0.97 [0.80; 1.18]; 0.781
Severe hypoglycaemias (S	SAE)				S. OT
NN1250-3579 (52 W)	519	1 (0.2)	151	1 (0.7)	0.29 [0.02, 4.62], 0.400
NN1250-3587 (26 W)	366	2 (0.5)	191	2 (1.0)	0.52 [0.07; 3.68]; 0.610
NN1250-3672 (26 W)	139	0 (0)	139	0 (0)	25 Xn. c.
Total	1	. /	1		0.43 [0.09; 2.12]; 0.299
3579Ext ^a (104 W)	519	3 (0.6)	151	1 (0.7)	0.87 [0.09; 8.33]; > 0.999
Renal dysfunction (SAE, S	SOC)			S	
NN1250-3579 (52 W)	518	1 (0.2)	151	0 (0.7)	0.29 [0.02; 4.63] ^c ;0.474 ^b
NN1250-3587 (26 W)	364	0 (0)	191	000	n. c.
NN1250-3672 (26 W)	139	0 (0)	139	(0.7)	0.33 [0.01; 8.11] ^c ; 0.409 ^b
Total			20		0.24 [0.02; 2.60]; 0.238 ^f
3579Ext ^a (104 W)	518	3 (0.6)	151	3 (2.0)	0.29 [0.06; 1.43];°; 0.108 ^b
Vomiting (AE, PT)		,0° 0	,		
NN1250-3579 (52 W)	518	015 (29)	151	9 (6.0)	0.49 [0.22; 1.09]; ^c ; 0.108 ^b
NN1250-3587 (26 W)	364	(0.8)	191	2 (1.0)	0.79 [0.13; 4.67];°; 0.851 ^b
NN1250-3672 (26 W)	139	4 (2.9)	139	3 (2.2)	1.33 [0.30; 5.85];°; 0.793 ^b
Total	<u>y</u>				0.66 [0.34; 1.25]; 0.201 ^d
3579Ext ^a (104 W)	518	18 (3.5)	151	12 (7.9)	0.44 [0.22; 0.89];°; 0.023 ^b
Depression (AE, PT)					
NN1250-3579 (52 W)	518	6 (1.2)	151	0 (0)	3.81 [0.22; 67.20];°; 0.189 ^b
NN1250-3587 (26 W)	364	2 (0.5)	191	0 (0)	2.63 [0.13; 54.51];°; 0.407 ^b
NN1250-3672 (26 W)	139	0 (0)	139	1 (0.7)	0.33 [0.01; 8.11];°; 0.409 ^b
Total	•				1.76 [0.37; 8.39]; 0.475 ^d
3579Ext ^a (104 W)	518	15 (2.9)	151	0 (0)	OR: 6.30 [1.35; ∞]; 0.020 ^e

a: Extension study to the NN1250-3579 study

- b: Calculation by the IQWiG; p value from the exact unconditional test (CSZ method according to Andrés)
- c: Calculation by the IQWiG; if there are zero cells with correction for continuity 0.5 for all cells

d: Calculation by the IQWiG, meta-analysis with fixed effect, Mantel-Haenszel method

e: Calculation by the IQWiG, exact conditional logistic regression according to Hirji; unilateral p value

f: Calculation by the IQWiG, meta-analysis with fixed effect, Beta binomial model according to Kuss

Abbreviations:

n.s.: not specified; CI: Confidence Interval; MACE: Major Adverse Cardiovascular Events; n: Number of patients with (at least 1) event; n.c.: not calculated; N: Number of patients evaluated; OR: Odds Ratio; PG: Plasma Glucose; PT: Preferred Term; RCT: Randomised Controlled Study; RR: Relative Risk; SOC: System Organ Class; SAE: Serious Adverse Event; AE: Adverse Event; vs: versus; W: Weeks

Study results according to endpoints of the studies NN1250-3579 (52 weeks) with the extension study 3579Ext (further 52 weeks) as well as NN1250-3587 and NN1250 3672 (for each 26 weeks), continuous²

Endpoint		<u>Interven</u>	<u>tion</u>		Contro	<u>) </u>	Intervention vs				
category	l li	nsulin deg		Insuli	n glargin +	metformin	<u>control</u>				
Endpoint		metforr	nin								
Study	Na	Values at	Change at	Na	Values at	Change at	MD [95% CI];				
		the start	the end of		the start	the end of	p value				
		of study	study		of study	study					
		MV (SD)	MV ^b (SE)		MV (SD)	MV ^b (SE)					
Morbidity											
State of health											
TRIM-D ^c											
Daily life				n							
NN1250-3579	519	77.79	3.57	151	76.14	2.70	0.87 [-2.49; 4.23];				
(52 W)		(18.9)	(0.80)		(20.1)	(1.51)	0.611				
NN1250-3587	366	75.22	3.17	191	76.65	2.85	0.33 [-2.55; 3.20];				
(26 W)		(17.8)	(0.84)		(16.1)	(1.19)	0.824				
NN1250-3672	139	76.08	3.50	139	77.78	3.81	-0.31 [-3.98; 3.35];				
(26 W)	0,-	(19.6)	(1.31)		(19.3)	(1.31)	0.867				
Total	S S C	JITE					0.33 [−1.55; 2.21]; 0.730				
3579Exta (104 W)	Ø	(17.8) 76.08 (19.6)		Endpo	oint not reco	orded					
Mentachealth											
NN1250-3579	519	77.51	8.69	151	75.66	8.86	-0.17 [-3.06; 2.72];				
(52 🗤)		(17.3)	(0.69)		(18.5)	(1.30)	0.906				
NN1250-3587	366	73.21	7.45	191	73.7	6.26	1.19 [-1.51; 3.89];				
(26 W)		(19.2)	(0.79)		(18.6)	(1.12)	0.388				
NN1250-3672	139	76.01	8.87	139	77.95	5.76	3.11 [-0.36; 6.59];				
(26 W)		(17.6)	(1.24)		(17.3)	(1.24)	0.079				
Total							1.18 [-0.54; 2.89]; 0.178				
3579Extª (104 W)	Endpoint not recorded										
HbA1c [%] additiona	ally sh	own)									

							1			
NN1250-3579 (52 W)	519	8.18 (0.8)	-1.16 (0.03)	151	8,31. (0.8)	-1.33 (0.06)	0.17 [0.03; 0.31]; 0.019			
NN1250-3587 (26 W)	366	8.32.(0.8 3)	−1.25 (0.04)	191	8.28 (0.81)	-1.24 (0.06)	-0.01 [-0.16; 0.14]; 0.901			
NN1250-3672 (26 W)	139	8.35 (0.99)	-1.25 (0.08)	139	8.33 (0.82)	-1.27 (0.08)	0.02 [-0.19; 0.23]; 0.877			
Total	I			•			0.07 [-0.02; 0.17]; 0.117			
3579Ext ^a (104 W)	519	8.14 (0.78)	-1.13 (0.04)	151	8.27 (0.79)	-1.26 (0.07)	0.12 [-0.03; 0.28]; 0.127			
Health-related qual	lity of	life		1						
SF-36 ^e							5.00			
Physical component	scor	e (PCS)					till of the			
NN1250-3579 (52 W)	519	46.3 (8.7)	1.10 (0.32)	151	44.9 (9.22)	-0.78 (0.60)	1.98 [0.56; 3.21]; 0.006			
						al re	Hedges' g: 0.31 [0.11; 0.52]			
NN1250-3587 (26 W)	366	48.13 (7.62)	1.01 (0.33)	191	47.69 (7.39)	0.63 (0.46)	0.38 [-0.74; 1.50]; 0.503			
NN1250-3672 (26 W)	139	44.62 (9.23)	1.84 (0.58)	139	45.91 (8. 24)	(0.59)	0.42 [−1.21; 2.06]; 0.611			
Total	Fotal									
				Hete	ogeneity fo	or Hedges' g:	Q = 6.45, df = 2, p = 0.040, l ² = 69.0%			
3579Ext ^a (104 W)	519	(0.72)	-0,94 (0.38)	151	46.28 (9.13)	-2.02 (0.74)	1.88 [0.25; 3.52]; 0.024			
		× <					Hedges' g:			
Montol Component			SIS -			I	0.26 [0.00; 0.51]			
Mental Component NN1250-3579	519	(MGS) 48.76	0 1.05	151	48.33	1.46				
(52 W)		(11.3)	(0.41)	.01	(11.4)	(0.77)	-0.40 [-2.12; 1.32]; 0.645			
NN1250-3587 (26 W)	366 C	47.38 (10.7)	0.92 (0.44)	191	47.82 (10.0)	0.74 (0.62)	0.19 [−1.31; 1.68]; 0.806			
NN1250-3672 (26 W)	139	47.52 (11.7)	2.37 (0.77)	139	47.49 (10.7)	0.67 (0.78)	1.71 [-0.47; 3.88]; 0.125			
Total							0.31 [-0.69; 1.31]; 0.541			
3579Exta (104 W)	519	50.06 (10.9)	0.70 (0.48)	151	50.26 (9.92)	0.05 (0.95)	0.65 [−1.43; 2.73]; 0.541			
vindividual domains of the SF-36	No fi	ndings for	the relevant s	subpop	ulation avai	ilable				

a: Number of patients who were taken into account in the evaluation for the calculation of the estimation of the effect; the values at the start of the study can be based on other patient figures.

- b: unless indicated otherwise, MMRM evaluations of the FAS population with treatment, gender, antidiabetic therapy on baseline, and region as fixed effect; corresponding baseline value and age as covariant as well as the interaction between all fixed effects and medical rounds and between the baseline value and medical rounds
- c: higher values mean an improvement of the state of health, whereby a positive difference signifies an advantage of the intervention; data on the individual domains are not available for the subpopulations
- d: Extension study to the NN1250-3579 study
- e: higher values signify a better health-related quality of life; a positive difference signifies an advantage for the intervention

Abbreviations:

FAS: Full Analysis Set; HbA1c: Glycohaemoglobin; CI: Confidence Interval; MMRM: Mixed Model with Repeated Measurements; MD: Mean Value Difference; MV: Mean Value; N: Number of evaluated patients; RCT: Randomised Controlled Study; SD: Standard Deviation; SE: Standard Error; SF-36: Short Form-36 Health Survey; TRIM-D: Treatment-related Impact Measures for Diabetes; vs: versus; W: Weeks

On b) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with insulin (with or without another hypoglycaemic agent) do not sufficiently control the blood sugar

Study results according to endpoints of the NN1250-3582 study (52 weeks) and the extension study to the NN1250-3582 study (78 weeks), dichotomous²

Study Endpoint category Endpoint Date	Insu n in	ntervention lin degludec + netformin + sulin aspart	n in	<u>Control</u> ulin glargin + netformin + sulin aspart	Intervention vs control					
	Ν	Patients with event n (%)	N	Patients with event n (%)	RR [95% CI]; p value					
Mortality										
Overall mortality		S. 101								
52 weeks	744	8 (1.1)	248	2 (0.8)	1.33 [0.29; 6.24]; > 0.999					
78 weeks	7440	11 (1.5)	248	2 (0.8)	1.83 [0.41; 8.21]; 0.536					
Morbidity	Morbidity									
Cardiovascular events (MACE)								
52 weeks	742	18 (2.4)	248	4 (1.6)	1.50 [0.51; 4.40]; 0.620					
78 weeks	742	29 (3.9)	248	7 (2.8)	1.38 [0.61; 3.12]; 0.557					
Cardiovascular death										
52 weeks	742	4 (0.5)	248	1 (0.4)	1.34 [0.15; 11.91]; > 0.999					
78 weeks	742	5 (0.7)	248	1 (0.4)	1.67 [0.20; 14.24]; > 0.999					
Non-fatal stroke										
52 weeks	742	3 (0.4)	248	0 (0)	n.s.; 0.577					
78 weeks	742	7 (0.9)	248	0 (0)	n.s.; 0.202					
Acute coronary syndrom	ne									
52 weeks	742	11 (1.5)	248	3 (1.2)	1.23 [0.34; 4.36]; > 0.999					
78 weeks	742	17 (2.3)	248	6 (2.4)	0.95 [0.38; 2.38]; > 0.999					
Side effects										
AEs (additionally shown)									

52 weeks	744	605 (81.3)	248	199 (80.2)	-	
78 weeks	744	625 (84.0)	248	208 (83.9)	-	
SAEs						
52 weeks	744	111 (14.9)	248	40 (16.1)	0.93 [0.66; 1.29]; 0.683	
78 weeks	744	138 (18.5)	248	53 (21.4)	0.87 [0.65; 1.15]; 0.353	
Withdrawal because	of AEs					
52 weeks	744	31 (4.2)	248	9 (3.6)	1.15 [0.55; 2.38]; 0.853	
78 weeks	744	35 (4.7)	248	9 (3.6)	1.30 [0.63; 2.66]; 0.594	
Non-severe symptom	natic, conf	irmed hypoglyca	emias	in total (PG < 56	mg/dl)	$\overline{)}$
52 weeks	744	556 (74.7)	248	188 (75.8)	0.99 [0.91; 1.07]; 0.800 +	
78 weeks	744	581 (78.1)	248	192 (77.4)	1.01 [0.93; 1.09]; 0.860	
Severe hypoglycaem	ias (SAE)					
52 weeks	744	19 (2.6)	248	3 (1.2)	2.11 [0.63; 7.07]; 0.319	
78 weeks	744	20 (2.7)	248	3 (1.2)	2.22[0.67; 7:41]; 0.228	
Renal dysfunction (S	AE, SOC))				
52 weeks	753	2 (0.3)	251	2 (0.8)	Ø 0.33 [0.05; 2.35]; 0.257⁵	
78 weeks	753	2 (0.3)	251	3 (1.2)	0.22 [0.04; 1.32]; 0.071 ^b	
a: Extension study to b: Calculation by the			exact ur	nconditional test	CSZ method according to	

Class; SAE: Serious Adverse Event; AE: Adverse Event; vs: versus

Study results according to endpoints of the NN1250-3582 study (52 weeks) and the extension study to the NN1250-3582 study (78 weeks), continuous²

Study		Interven	<u>tion</u>		Contro	<u>ol</u>	Intervention vs control		
Endpoint	l II	nsulin degl	ludec +		Insulin gla	rgin +			
category	metformin +				metform	in +			
Endpoint		insulin as	spart		insulin as	spart			
Date	N ^a	Values at the start of study MV (SD)	Change at the end of study MV (SE)	N ^a	Values at the start of study MV (SD)	Change at the end of study MV (SE)	MD [95% CI]; p value		
Morbidity									
State of health									
TRIM-D ^b									
Daily life									
52 weeks	74 4	72.05 (18.2)	3.02 (0.67)	24 8	72.43 (17.5)	2.88 (1.15)	0.14 [-2.48; 2.75]; 0.919		
78 weeks	Endpoint not recorded								
Mental health	_			-					
52 weeks	74 4	75.87 (17.3)	5.14 (0.61)	24 8	73.67 (18.7)	5.26 (1.06)	-0.12 [-2.52; 2.29]; 0.924		

78 weeks

Endpoint not recorded

78 weeks		Endpoint not recorded								
Health-related q	uality of	f life								
SF-36v2 ^b										
PCS										
52 weeks	74 4	45.25 (9.25)	-0.35 (0.28)	24 8	44.53 (8.89)	-0.64 (0.48)	0.28 [-0.80; 1.37]; 0.609			
78 weeks		Endpoint not recorded								
MCS										
52 weeks	74 4	47.89 (11.2)	1.21 (0.34)	24 8	48.72 (10.6)	0.29 (0.59)	0.92 [-0.42; 2.26]; 0.176			
78 weeks				Er	ndpoint not	recorded	S. et			
estimation of th	ne effect signify a	; the value better hea	s at the sta	rt of th	ne study ca	in be based	e calculation of the d on other patient figures. erence signifies an			

Abbreviations:

n.s.: not specified; CI: Confidence Interval; MCS: Mental Component Score; MD: Mean Value Difference; MV: Mean Value; N: Number of patients evaluated; PCS: Physical Component Score; RCT: Randomised Controlled Study; SD: Standard Deviation; SE: Standard Error; TRIM-D: Treatment-related Impact Measures for Diabetes; vs: versus

Study results according to endpoints of the NN1250-3582 study (52 weeks) and the extension study to the NN1250-3582 study (78 weeks)

Study Endpoint Date	h	Interve nsulin de metfor insulin	gludec + min +		<u>Contro</u> Insulin gla metform insulin as	rgin + iin +	Intervention vs control			
	N ^a	Values at the start of study MV (SD)	Change at the end of study MV (SE)	N ^a	Values at the start of study MV (SD)	Change at the end of study MV (SE)	MD [95% CI]; p value			
HbA1c (%)	HbA1c (%)									
52 weeks	743) 0	8.25 (0.79)	-1.28 (0.03)	248	8.34 (0.89)	−1.28 (0.05)	0.01 [-0.11; 0.12]; 0.906			
78 week	744	8,24 (0.79)	-1.01 (0.03)	248	8.32 (0.89)	-1.14 (0.05)	0.13 [0.00; 0.25]; 0.048			
Body weight										
52 weeks	622	92.6 (17.9)	3.9 (5.0)	211	92.2 (17.2)	4.2 (4.8)	-0.31 [-0.98; 0.37]; n.s.			
A weeks	544	92.6 (17.9)	4.4 (5.1)	184	92.2 (17.2)	4.7 (4.9)	-0.34 [-1.05; 0.38]; n.s.			
a. Number of patient	s who	were take	n into account	in the	evaluation	for the calcul	ation of the			

a: Number of patients who were taken into account in the evaluation for the calculation of the estimation of the effect; the values at the start of the study can be based on other patient figures.

Abbreviations:

n.s.: not specified; CI: Confidence Interval; MD: Mean Value Difference; MV: Mean Value; N: Number of evaluated patients; RCT: Randomised Controlled Study; SD: Standard Deviation; SE: Standard error; vs: versus

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- 4. Number 2. is amended as follows:
- a. Under number 2, the entries for (a), (b), and (c) are replaced by the following:
- "a) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with at least two hypoglycaemic agents (apart from insulin) do not sufficiently control the blood sugar

Approx. 326,100-341,100 patients

b) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with insulin (with or without another hypoglycaemic agent) do not sufficiently tions net control the blood sugar

Approx. 450,000-650,000 patients"

b. Letter d) is replaced by letter c).

5. Under number 3, the information on the requirement for a quality-assured application is formulated as follows:

The requirements of the product information must be taken into account. The European Medicines Agency (EMA) makes the contents of the product information on Tresiba® (active ingredient: Insulin degludec) freely available under the following link (last access: 12. April 2019):

n/stalevo-epar-producthttps://www.ema.europa.eu/documents/product-in information_de.pdf company

- 6. Number 4. is amended as follows:
 - a. The information on a), b) and c) is replaced by the following information:

"Annual treatment costs:

2 diabetes mellitus in whom diet and movement and the a) Adult patients with type treatment with at least two hypoglycaemic agents (apart from insulin) do not sufficiently control the blood sugar

Designation of the therapy	Annual treatment costs per patient	
Medicinal product to be assessed (insulin degludec alone or in combination with an oral hypoglycaemic agent ³)		
Insulin degludec	€452.72 – €905.45	
Metformin	€33.24 – €99.71	
Total:		
Insulin degludec + metformin	€485.96 – €1005.16	
Appropriate comparator therapy		
Metformin	€33.24 – €99.71	

³ An example of the combination with a hypoglycaemic agent (apart from insulin) is the combination with metformin.

Designation of the therapy	Annual treatment costs per patient	
Empagliflozin	€658.93	
Liraglutide	€1,308.84 - €1,963.26	
Human insulin (NPH insulin)	€382.46 - €764.92	
	Total:	
Human insulin (NPH-insulin) + metformin	€415.70 - €864.63	
Human insulin (NPH insulin) + empagliflozin¹	€1,041.40 - €1,423.86	
Human insulin (NPH insulin) + empagliflozin ¹	€ 1,041.40 – € 1,423.86 € 1,691.30 – € 2,728.19 e^{50}	
Possibly therapy only with human insulin if metformin and empaglificzin ¹ and liraglutide ¹ in		

Possibly therapy only with human insulin it metformin and empaglifuzint and liraglutide¹ i accordance with the product information are incompatible or contraindicated or are not sufficiently effective because of an advanced type 2 diabetes mellitus

Conventional insulin therapy (premixed € 382.46 insulin)

Costs after deduction of legally prescribed rebates Kauer Taxe® last revised: 15. April 2019)

Costs for additional SHI services required:

b) Adult patients with type 2 diabetes mellitus in whom diet and movement and the treatment with insulin (with or without another hypoglycaemic agent) do not sufficiently control the blood sugar

Designation of the therapy	Annual treatment costs per patient

Medicinal product to be assessed (insulin degludec in combination with a hypoglycaemic agent⁴ and bolus insulin)

Insulin degludec	€452.72 – €905.45	
Insulin degludec	€181.09 – €543.27	
Bolus insulin	€152.98 – €458.95	
Total.	€410.57 – €849.24	
Possibly metformin	€33.24 – €99.71	
Total:		
Insulin degludec + metformin	€485.96 – €1005.16	

⁴ For example, for the combination with a hypoglycaemic agent, metformin is stated

Designation of the therapy	Annual treatment costs per patient	
Insulin degludec + bolus insulin	€410.57 – €849.24	
Insulin degludec + bolus insulin or	€443.80 - €948.95	
Appropriate comparator therapy		
Empagliflozin	€658.93	
Liraglutide	€1,308.84 - €1,963.26	
Metformin	€ 1,308.84 – € 1,963.26 € 33.24 – € 99.71 € 152.98 – € 458.95 € 152.98 – € 458.95 Total: € 382.46 – € 764.92 \bigcirc	
Intensified conventional insulin therapy	in the second seco	
Human insulin (NPH insulin)	€152.98 – €458.95	
Human insulin (bolus insulin)	€152.98 – €458.95	
	Total:	
	Total: € 382.46 – € 764.92 € 382.46 – € 764.92 OTIPIII ACE Total:	
Conventional insulin therapy (premixed	S. Call	
insulin)	€ 382.46 - € 764.92	
	privace	
<u>Conventional insulin therapy (premixed</u> insulin) possibly + metformin or		
empagliflozin or liraglutide		
columna and a second	ofotal:	
<u>Conventional insulin therapy (premixed</u> <u>insulin) possibly + metformin or</u> <u>empagliflozin or liraglutide</u> Conventional insulin therapy (premixed insulin) + empagliflozin ¹	€1,041.40 – €1,423.86	
Conventional insulin therapy (premixed insulin) + liraglutide ¹	€1,691.30 - €2,728.19	
Conventional insulin therapy (premixed insulin) + metformin	€415.70 – €864.63	

Costs after deduction of legally prescribed rebates (Lauer-Taxe® last revised: 15. April 2019)

Costs for additional SHI services required: omitted".

b. In the heading "d) Treatment of type 1 diabetes mellitus in adults" letter "d)" is replaced by letter "c)".

c. The tables "Costs for additional SHI services required" and "Annual treatment costs" under the heading "c) Treatment of type 1 diabetes mellitus in adults" is supplemented by the following sentence:

Costs after deduction of legally prescribed rebates (Lauer-Taxe® last revised: 1 October 2014)".

d. The previous footnote 1 is now footnote 8.

- e. The previous footnote 2 is now footnote 9.
- The previous footnote 3 is now footnote 10. f.
- g. The previous footnote 4 is now footnote 12.
- h. The previous footnote 5 is now footnote 13.
- i. The previous footnote 6 is now footnote 14.

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