Gemeinsamer Bundesausschuss

Resolution

of the Federal Joint Committee on an Amendment of the Pharmaceuticals Directive:
Annex XII – Benefit Assessment of Medicinal Products with New Active Ingredients according to Section 35a SGB V: Sofosbuvir/ Velpatasvir/ Voxilaprevir (new therapeutic indication: chronic hepatitis C, aged 12 to < 18 years)

of 7 April 2022

At its session on 7 April 2022, the Federal Joint Committee (G-BA) resolved to amend the Pharmaceuticals Directive (AM-RL) in the version dated 18 December 2008 / 22 January 2009 (Federal Gazette, BAnz. No. 49a of 31 March 2009), as last amended by the publication of the resolution of D Month YYYY (Federal Gazette, BAnz AT DD.MM.YYYY BX), as follows:

I. In Annex XII, the following information shall be added after No. 4 to the information on the benefit assessment of sofosbuvir/ Velpatasvir/ Voxilaprevir in accordance with the resolution of 15 February 2018:

Sofosbuvir/ Velpatasvir/ Voxilaprevir

Resolution of: 7 April 2022
Entry into force on: 7 April 2022
Federal Gazette, BAnz AT DD. MM YYYY Bx

New therapeutic indication (according to the marketing authorisation of 16 September 2021):

Vosevi is indicated for the treatment of chronic hepatitis C virus (HCV) infection in patients aged 12 years and older and weighing at least 30 kg.

Therapeutic indication of the resolution (resolution of 7 April 2022):

Vosevi is indicated for the treatment of chronic hepatitis C virus (HCV) infection in adolescents aged 12 to < 18 years and weighing at least 30 kg.

1. Additional benefit of the medicinal product in relation to the appropriate comparator therapy

Adolescents aged 12 to < 18 years with chronic hepatitis C:

Appropriate comparator therapy for sofosbuvir/ velpatasvir/ voxilaprevir:

Ledipasvir/ sofosbuvir (only for genotypes 1, 4, 5 and 6) or glecaprevir/ pibrentasvir or sofosbuvir/ velpatasvir

Extent and probability of the additional benefit of sofosbuvir/ velpatasvir/ voxilaprevir compared to the appropriate comparator therapy:

An additional benefit is not proven.

Study results according to endpoints:[1]

Adolescents aged 12 to < 18 years with chronic hepatitis C:

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	n.a.	There are no assessable data.
Morbidity	n.a.	There are no assessable data. Results on SVR in the same order of magnitude as with corresponding CRVO

[1] Data from the dossier assessment of the Institute for Quality and Efficiency in Health Care (IQWiG) (A21-136) unless otherwise indicated.

Health-related quality of life	n.a.	There are no assessable data.
Side effects	n.a.	There are no assessable data.

Explanations:
↑: statistically significant and relevant positive effect with low/unclear reliability of data
↓: statistically significant and relevant negative effect with low/unclear reliability of data
↑↑: statistically significant and relevant positive effect with high reliability of data
↓↓: statistically significant and relevant negative effect with high reliability of data
↔: no statistically significant or relevant difference
∅: There are no usable data for the benefit assessment.
n.a.: not assessable

No suitable data versus the appropriate comparator therapy were presented.

G367-1175 study – single-arm, open-label phase II study with sofosbuvir/ velpatasvir/ voxilaprevir without comparison to the appropriate comparator therapy (both patient groups).

Only DAA-naïve adolescents aged 12 to < 18 years with chronic hepatitis C and genotypes 1, 2, 3 and 4 were included.

Mortality

G367-1175 study Endpoint	**Sofosbuvir/ velpatasvir/ voxilaprevir**	
	N	**HCV-GT 1/2/3/4 Patients with event n (%)**
Overall mortality[a)]	21	0 (0)

Morbidity

G367-1175 study Endpoint	**Sofosbuvir/ velpatasvir/ voxilaprevir**	
	N	**HCV-GT 1/2/3/4 Patients with event n (%)**
SVR12[b)]	21	21 (100)
SVR24[b)]	21	21 (100)

Health-related quality of life

G367-1175 study Endpoint	**Sofosbuvir/ velpatasvir/ voxilaprevir**			
	N	**Values at the start of study MV (SD)**	**Change at follow-up week 12[c)] MV (SD)**	**Change at follow-up week 24[c)] MV (SD)**
PedsQL (total score)[d)]	21	83.4 (12.40)	- 1.0 (8.83)	- 0.2 (8.58)

Side effects

G367-1175 study Endpoint	Sofosbuvir/ velpatasvir/ voxilaprevir	
	N	HCV-GT 1/2/3/4 Patients with event n (%)
AEs (presented additionally)	21	15 (71.4)
SAEs	21	1 (4.8)
Discontinuation due to AEs	21	0 (0)

a) Was assessed using AEs.
b) Sufficiently valid surrogate for the patient-relevant endpoint of hepatocellular carcinoma.
c) Questionnaire was completed 12 and 24 weeks after the end of the 8-week treatment.
d) Scale range 0-100. Higher (increasing) values mean better quality of life.

Abbreviations: GT: genotype; HCV: Hepatitis C virus; MV: mean value; N: number of patients evaluated; n: number of patients with (at least 1) event; PedsQL: Paediatric Quality of Life Inventory; SD: standard deviation; SAE: serious adverse event; SVR: sustained virologic response after end of therapy; AE: adverse event

2. Number of patients or demarcation of patient groups eligible for treatment

Adolescents aged 12 to < 18 years with chronic hepatitis C

approx. 24 – 39 patients

3. Requirements for a quality-assured application

The requirements in the product information are to be taken into account. The European Medicines Agency (EMA) provides the contents of the product information (summary of product characteristics, SmPC) for Vosevi (active ingredient: sofosbuvir/ velpatasvir/ voxilaprevir) at the following publicly accessible link (last access: 29 March 2022):

https://www.ema.europa.eu/en/documents/product-information/vosevi-epar-product-information_en.pdf

Treatment with sofosbuvir/ velpatasvir/ voxilaprevir should only be initiated and monitored by specialists who are experienced in the treatment of adolescents with chronic hepatitis C virus infection.

4. Treatment costs

Annual treatment costs:

Adolescents aged 12 to < 18 years with chronic hepatitis C

Designation of the therapy	Annual treatment costs/ patient
Medicinal product to be assessed:	

Designation of the therapy	Annual treatment costs/ patient
Sofosbuvir/ velpatasvir/ voxilaprevir for 8 weeks	€ 40,069.52
Sofosbuvir/ velpatasvir/ voxilaprevir for 12 weeks	€ 60,104.28
Appropriate comparator therapy:	
Ledipasvir/ sofosbuvir for 8 weeks	€ 29,987.06
Ledipasvir/ sofosbuvir for 12 weeks	€ 44,980.59
Ledipasvir/ sofosbuvir for 24 weeks	€ 89,961.18
Glecaprevir/ pibrentasvir for 8 weeks	€ 29,987.06
Glecaprevir/ pibrentasvir for 12 weeks	€ 44,980.59
Glecaprevir/ pibrentasvir for 16 weeks	€ 59,974.12
Sofosbuvir/ velpatasvir for 12 weeks	€ 29,985.54

Costs after deduction of statutory rebates (LAUER-TAXE® as last revised: 15 March 2022)

Costs for additionally required SHI services: not applicable

II. The resolution will enter into force on the day of its publication on the website of the G-BA on 7 April 2022.

The justification to this resolution will be published on the website of the G-BA at www.g-ba.de.

Berlin, 7 April 2022

Federal Joint Committee (G-BA)
in accordance with Section 91 SGB V
The Chair

Prof. Hecken