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
Selinexor (multiple myeloma (after at least 4 prior therapies, combination with dexamethasone))

of 16 March 2023

At its session on 16 March 2023, 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. Annex XII shall be amended in alphabetical order to include the active ingredient Selinexor as follows:

Benefit assessment procedure comprises several resolutions.
Please note the current version of the Pharmaceuticals Directive/Annex XII.

Courtesy translation – only the German version is legally binding.

Selinexor

Resolution of: 16 March 2023
Entry into force on: 16 March 2023
Federal Gazette, BAnz AT DD. MM YYYY Bx

Therapeutic indication (according to the marketing authorisation of 26 March 2021):

Nexpovio is indicated in combination with dexamethasone for the treatment of multiple myeloma in adult patients who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy.

Therapeutic indication of the resolution (resolution of 16 March 2023):

See therapeutic indication according to marketing authorisation.

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

Adults with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy

Appropriate comparator therapy:

A patient-individual therapy under selection of:

- Bortezomib monotherapy
- Bortezomib + pegylated liposomal doxorubicin
- Bortezomib + dexamethasone
- Carfilzomib + lenalidomide and dexamethasone
- Carfilzomib + dexamethasone
- Daratumumab + lenalidomide + dexamethasone
- Daratumumab + bortezomib + dexamethasone
- Daratumumab + pomalidomide + dexamethasone
- Daratumumab monotherapy
- Elotuzumab + lenalidomide + dexamethasone
- Elotuzumab + pomalidomide + dexamethasone
- Isatuximab + pomalidomide + dexamethasone
- Ixazomib + lenalidomide + dexamethasone
- Lenalidomide + dexamethasone
- Panobinostat + bortezomib and dexamethasone

Benefit assessment procedure comprises several resolutions.
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- Pomalidomide + bortezomib and dexamethasone
- Pomalidomide + dexamethasone
- Cyclophosphamide (in combination with other antineoplastic medicinal products)
- Melphalan
- Doxorubicin
- Carmustine (in combination with other cytostatic agents and a corticosteroid, especially prednisone)
- Vincristine
- Dexamethasone
- Prednisolone
- Prednisone
- Best supportive care

taking into account prior therapies as well as the severity and duration of the response.

Extent and probability of the additional benefit of selinexor in combination with dexamethasone compared to the appropriate comparator therapy:

An additional benefit is not proven.

Study results according to endpoints:[1]

Adults with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy

No adequate data are available to allow an assessment of the additional benefit.

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[1] Data from the dossier assessment of the Institute for Quality and Efficiency in Health Care (IQWiG) (A22-101) unless otherwise indicated.

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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.
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		

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

Adults with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy

approx. 570 – 1130 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 Nexpovio (active ingredient: selinexor) at the following publicly accessible link (last access: 7 February 2023):

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

Treatment with selinexor should only be initiated and monitored by specialists in internal medicine, haematology and oncology, experienced in the treatment of patients with multiple myeloma.

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4. Treatment costs

Annual treatment costs:

The annual treatment costs shown refer to the first year of treatment.

Adults with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy

Designation of the therapy	Annual treatment costs/ patient
Medicinal product to be assessed:	
Selinexor in combination with dexamethasone	
Selinexor	€ 206,009.44
Dexamethasone	€ 243.52
Total	€ 206,252.96
Best supportive care	Different from patient to patient
Appropriate comparator therapy	
Bortezomib monotherapy	
Bortezomib	€ 5,602.24
Bortezomib in combination with pegylated liposomal doxorubicin	
Bortezomib	€ 5,602.24
Doxorubicin (pegylated, lysosomal)	€ 17,454.00
Total	€ 23,056.24
Bortezomib in combination with dexamethasone	
Bortezomib	€ 2,801.12 - € 5,602.24
Dexamethasone	€ 104.10 - € 168.90
Total	€ 2,905.22 - € 5,771.14
Carfilzomib in combination with lenalidomide and dexamethasone	
Carfilzomib	€ 76,695.24
Lenalidomide	€ 774.93
Dexamethasone	€ 193.44
Total	€ 77,663.61
Additionally required SHI services	€ 106.40
Carfilzomib in combination with dexamethasone	
Carfilzomib	€ 144,716.22
Dexamethasone	€ 243.05
Total	€ 144,959.27
Additionally required SHI services	€ 106.40

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Designation of the therapy	Annual treatment costs/ patient
Daratumumab in combination with lenalidomide and dexamethasone	
Daratumumab	€ 128,183.14
Lenalidomide	€ 774.93
Dexamethasone	€ 107.88
Total	€ 129,065.95
Additionally required SHI services	€ 341.49 - € 344.80
Daratumumab in combination with bortezomib and dexamethasone	
Daratumumab	€ 117,036.78
Bortezomib	€ 5,602.24
Dexamethasone	€ 147.23
Total	€ 122,786.25
Additionally required SHI services	€ 292.01 - € 295.02
Daratumumab monotherapy (only for subjects with disease progression on last therapy)	
Daratumumab	€ 128,183.14
Additionally required SHI services	€ 399.30 - € 649.54
Elotuzumab in combination with lenalidomide and dexamethasone	
Elotuzumab	€ 84,540.00
Lenalidomide	€ 774.93
Dexamethasone	€ 185.70
Total	€ 85,500.63
Additionally required SHI services	€ 359.57 - € 363.88
Elotuzumab + pomalidomide + dexamethasone (only for subjects with disease progression on last therapy)	
Elotuzumab	€ 84,540.00
Pomalidomide	€ 106,253.29
Dexamethasone	€ 188.54
Total	€ 190,981.83
Additionally required SHI services	€ 266.74 - € 269.47
Isatuximab in combination with pomalidomide and dexamethasone (only for subjects with disease progression on last therapy)	
Isatuximab	€ 73,272.92
Pomalidomide	€ 106,253.29
Dexamethasone	€ 89.28
Total	€ 179,615.49
Additionally required SHI services	€ 106.40
Ixazomib in combination with lenalidomide and dexamethasone	

Benefit assessment procedure pursuant to Section 35a Social Code Book V
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Designation of the therapy	Annual treatment costs/ patient
Ixazomib	€ 75,468.38
Lenalidomide	€ 774.93
Dexamethasone	€ 193.44
Total	€ 76,436.75
Additionally required SHI services	€ 106.40
Lenalidomide in combination with dexamethasone	
Lenalidomide	€ 774.93
Dexamethasone	€ 312.48
Total	€ 1,087.41
Additionally required SHI services	€ 106.40
Panobinostat in combination with bortezomib and dexamethasone	
Panobinostat	€ 33,633.12 - € 67,266.24
Bortezomib	€ 5,602.24 - € 8,403.36
Dexamethasone	€ 168.90 - € 233.70
Total	€ 39,404.26 - € 75,903.30
Pomalidomide in combination with bortezomib and dexamethasone	
Pomalidomide	€ 94,810.63
Bortezomib	€ 8,893.56
Dexamethasone	€ 237.44
Total	€ 103,941.62
Additionally required SHI services	€ 106.40
Pomalidomide in combination with dexamethasone (only for subjects with disease progression on last therapy)	
Pomalidomide	€ 106,253.29
Dexamethasone	€ 193.44
Total	€ 106,446.73
Additionally required SHI services	€ 106.40
Cyclophosphamide (in combination with other antineoplastic medicinal products)	
Cyclophosphamide	€ 198.28
Melphalan	€ 332.40
Carmustine	€ 38,015.12
Vincristine	€ 357.55
Prednisone	€ 132.64
Total	€ 39,035.99
Melphalan	

Please assess the current procedure comprises several resolutions of the pharmaceuticals Directive/Annex XII.

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Designation of the therapy	Annual treatment costs/ patient
Melphalan	€ 603.20
Doxorubicin	
Doxorubicin	€ 2,497.92 - € 3,746.88
Carmustine (in combination with other cytostatic agents and a corticosteroid, especially prednisone)	
Carmustine	€ 38,015.12
Cyclophosphamide	€ 198.28
Melphalan	€ 332.40
Vincristine	€ 357.55
Prednisone	€ 132.64
Total	€ 39,035.99
Vincristine	
Vincristine	€ 1,791.20
Dexamethasone	
Dexamethasone	€ 877.50
Daratumumab in combination with pomalidomide and dexamethasone	
Daratumumab	€ 128,183.14
Pomalidomide	€ 106,253.29
Dexamethasone	€ 107.88
Total	€ 234,544.31
Additionally required SHI services	€ 341.49 - € 344.80
Prednisolone	
Prednisolone	Incalculable
Prednisone	
Prednisone	Incalculable
Best supportive care	
Best supportive care	Different from patient to patient

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 1 March 2023)

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Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Appropriate comparator therapy					
Bortezomib monotherapy					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	32.0	€ 3,200
Bortezomib in combination with pegylated liposomal doxorubicin					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	32.0	€ 3,200
Doxorubicin (pegylated, liposomal)	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	Day 4 21-day cycle	8.0	€ 800
Bortezomib in combination with dexamethasone					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	16.0 - 32.0	€ 1,600 - € 3,200
Carfilzomib in combination with lenalidomide and dexamethasone					
Carfilzomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1st - 12th cycle: 6 From 13th cycle: 4	76.0	€ 7,600
Carfilzomib in combination with dexamethasone					
Carfilzomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	6	78.0	€ 7,800
Daratumumab in combination with bortezomib and dexamethasone					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	32.0	€ 3,200
Elotuzumab in combination with lenalidomide and dexamethasone					

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Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Elotuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1st - 2nd cycle: 4 From 3rd cycle: 2	30.0	€ 3,000
Elotuzumab + pomalidomide + dexamethasone (only for subjects with disease progression on last therapy)					
Elotuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1st - 2nd cycle: 4 From 3rd cycle: 1	19.0	€ 1,900
Isatuximab in combination with pomalidomide and dexamethasone (only for subjects with disease progression on last therapy)					
Isatuximab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1st cycle: 4 From 2nd cycle: 2	28.0	€ 2,800
Panobinostat in combination with bortezomib and dexamethasone					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1st - 8th cycle: 4 9th - 16th cycle: 2	32.0 - 48.0	€ 3,200 - € 4,800
Pomalidomide in combination with bortezomib and dexamethasone					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1st - 8th cycle 4 From 9th cycle 2	50.8	€ 5,800
Cyclophosphamide (in combination with other antineoplastic medicinal products)					

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Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Cyclophosphamide	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Carmustine	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Vincristine	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Melphalan monotherapy					
Melphalan	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	13.0	€ 1,300
Carmustine					
Cyclophosphamide	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Carmustine	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Vincristine	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	10.4	€ 1,040
Doxorubicin monotherapy					
Doxorubicin	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	6.0 - 9.0	€ 6,000 - € 9,000
Vincristine monotherapy					
Vincristine	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1	52.1	€ 5,210

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5. Medicinal products with new active ingredients according to Section 35a, paragraph 3, sentence 4 SGB V that can be used in a combination therapy with Selinexor

Medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V are medicinal products with the following new active ingredients, which, on the basis of the marketing authorisation under Medicinal Products Act, can be used in a combination therapy with selinexor for the treatment of adult patients with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy:

Adults with multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy

- No active ingredient that can be used in a combination therapy that fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.

The designation of combinations exclusively serves the implementation of the combination discount according to Section 130e SGB V between health insurance funds and pharmaceutical companies. The findings made neither restrict the scope of treatment required to fulfil the medical treatment mandate, nor do they make statements about expediency or economic feasibility.

II. The resolution will enter into force on the day of its publication on the website of the G-BA on 16 March 2023.

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

Berlin, 16 March 2023

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

Prof. Hecken

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