

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 (at least 1 prior therapy, combination with bortezomib and 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. In Annex XII, the following information shall be added after No. 4 to the information on the benefit assessment of Selinexor in accordance with the resolution of 16 March 2023 for the therapeutic indication "in combination with dexamethasone for the treatment of multiple myeloma in adult patients who have received at least four prior therapies":

Selinexor

Resolution of: 16 March 2023 Entry into force on: 16 March 2023

Federal Gazette, BAnz AT DD. MM YYYY Bx

New therapeutic indication (according to the marketing authorisation of 18 July 2022):

Nexpovio is indicated in combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior 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 one prior therapy

Appropriate comparator therapy:

- Bortezomib in combination with pegylated liposomal doxorubicin
- Bortezomib in combination with dexamethasone

or

- Lenalidomide in combination with dexamethasone

or

Elotuzumab in combination with lenalidomide and dexamethasone

or

- Carfilzomib in combination with lenalidomide and dexamethasone

or

Carfilzomib in combination with dexamethasone

or

- Daratumumab in combination with lenalidomide and dexamethasone

or

- Daratumumab in combination with bortezomib and dexamethasone

Extent and probability of the additional benefit of selinexor in combination with bortezomib and dexamethasone compared with bortezomib in combination with dexamethasone:

An additional benefit is not proven.

Study results according to endpoints:1

Adults with multiple myeloma who have received at least one prior therapy

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	\leftrightarrow	No relevant difference for the benefit assessment
Morbidity	n.a.	There are no assessable data.
Health-related quality of life	n.a.	There are no assessable data.
Side effects	\	Disadvantages in the endpoints of severe AEs and SAEs. In detail, disadvantages in specific AEs.

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

 $\downarrow \downarrow$: statistically significant and relevant negative effect with high reliability of data

 \varnothing : There are no usable data for the benefit assessment.

n.a.: not assessable

BOSTON study

Study design: open-label, randomised, controlled, phase 3

Comparison: Selinexor in combination with bortezomib and dexamethasone vs

Bortezomib in combination with dexamethasone

Data cut-off: Data cut-off of 15 February 2021, data cut-off of 22 March 2022 and data

cut-off of 5 June 2022

¹ Data from the dossier assessment of the IQWiG (A22-100) and from the addendum (A23-09), unless otherwise indicated.

Mortality

Endpoint	Seli	nexor + bortezomib + dexamethasone		Bortezomib + dexamethasone	Intervention vs control			
	N	Median survival time in months [95% CI] Patients with event n (%)	N	Median survival time in months [95% CI] Patients with event n (%)	Hazard ratio [95% CI] p value			
Overall survival (d	Overall survival (data cut-off of 22 March 2022)							
	195	36.7 [31.7; n.c.] 74 (38.0)	207	n.r. [26.9; n.c.] 83 (40.1)	0.93 [0.67; 1.27] 0.633			

Morbidity

Endpoint	nt Selinexor + bortezomib + dexamethasone		c	Bortezomib + lexamethasone	Intervention vs control		
	N	Median in months [95% CI]	N	Median in months [95% CI]	Hazard ratio [95% CI] p value		
		Patients with event n (%)		Patients with event n (%)	Absolute difference (AD) ^a		
Progression-free sur	vival (I	PFS) (data cut-off of 15 F	ebrua	ry 2021) ^b			
	195	13.24 [11.73; 23.43] 92 (47.2)	207	9.46 [8.11; 10.78] 137 (66.2)	0.71 [0.54; 0.93] 0.0124 AD: + 3.78 months		
Symptomatology							
EORTC QLQ-C30 (symptom scales)	No su	No suitable data					
EORTC QLQ-CIPN20	No suitable data						
Health status	Health status						
EQ-5D VAS	No su	No suitable data					

Health-related quality of life

EORTC QLQ-C30 (functional scales)	No suitable data
(Turictional scales)	

Side effects

(Data cut-off of 5 June 2022)

Endpoint	b	Selinexor + ortezomib + xamethasone		ortezomib + xamethasone	Intervention vs control
	N	Median in months [95% CI]	N	Median in months [95% CI]	Relative risk [95% CI] p value ^c
		Patients with event n (%)		Patients with event n (%)	Absolute difference (AD) ^a
Adverse events (AEs) in total					
	195	_ 194 (99.5)	204	_ 198 (97.1)	
Serious adverse events (SAEs)					
	195	– 109 (55.9)	204	– 79 (38.7)	1.44 [1.17; 1.79] < 0.001
Severe adverse events (CTCAE gra	ide ≥ 3)			
	195	– 169 (86.7)	204	_ 128 (62.7)	1.38 [1.23; 1.56] < 0.001
Therapy discontinuation due to a	dverse	events			
	195	– 42 (21.5)	204	_ 35 (17.2)	1.26 [0.84; 1.88] 0.275
Specific adverse events					
Gastrointestinal disorders (SOC, severe AEs (CTCAE grade ≥ 3))	195	_ 35 (17.9)	204	- 7 (3.4)	5.23 [2.38; 11.50] < 0.001
Peripheral neuropathy (PTs, severe AEs (CTCAE grade ≥ 3))	No su	itable data			
Cataract (PTs, severe AEs (CTCAE grade ≥ 3))	195	– 22 (11.3)	204	_ 4 (2.0)	5.75 [2.02; 16.40] < 0.001
Cardiac disorders (SOC, AEs)	195	– 35 (17.9)	204	_ 16 (7.8)	2.29 [1.31; 4.00] 0.003
Respiratory, thoracic and mediastinal disorders (SOC, SAEs)	195	– 14 (7.2)	204	– 5 (2.5)	2.93 [1.08; 7.98] 0.027

Endpoint		Selinexor + ortezomib + xamethasone	Bortezomib + dexamethasone		Intervention vs control	
		Median in months [95% CI]	N	Median in months [95% CI]	Relative risk [95% CI] p value ^c	
		Patients with event n (%)		Patients with event n (%)	Absolute difference (AD) ^a	
Blood and lymphatic system disorders (SOC, severe AEs (CTCAE grade ≥ 3))	195	– 96 (49.2)	204	– 48 (23.5)	2.09 [1.57; 2.78] < 0.001	
Infections and infestations (SOC, severe AEs (CTCAE grade ≥ 3))	195	– 65 (33.3)	204	– 36 (17.6)	1.89 [1.32; 2.70] < 0.001	
General disorders and administration site conditions (SOC, severe AEs (CTCAE grade ≥ 3))	195	– 50 (25.6)	204	– 16 (7.8)	3.27 [1.93; 5.54] < 0.001	
Metabolism and nutrition disorders (SOC, severe AEs (CTCAE grade ≥ 3))	195	- 43 (22.1)	204	– 17 (8.3)	2.65 [1.56; 4.48] < 0.001	

^a Indication of absolute difference (AD) only in case of statistically significant difference; own calculation

Abbreviations used:

AD = Absolute Difference; CTCAE = Common Terminology Criteria for Adverse Events; EORTC QLQ-C30 = European Organisation for Research and Treatment of Cancer Quality of Life Questionnaire Core 30; EORTC-QLQ-CIPN20 = European Organisation for Research and Treatment of Cancer Quality of Life Questionnaire Chemotherapy-induced Peripheral Neuropathy; HR = hazard ratio; CI = confidence interval; N = number of patients evaluated; n = number of patients with (at least one) event; n.c. = not calculable; n.r. = not reached; SOC = system organ class; VAS = visual analogue scale; vs = versus

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

Adults with multiple myeloma who have received at least one prior therapy approx. 4,700 – 7,000 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: 6 February 2023):

^b Data from Module 4 of the dossier

^c IQWiG calculation (effect estimate, 95% CI and p value)

$\frac{https://www.ema.europa.eu/en/documents/product-information/nexpovio-epar-product-information en.pdf$

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.

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 one prior therapy

Designation of the therapy	Annual treatment costs/ patient				
Medicinal product to be assessed:					
Selinexor in combination with bortezomib and dexamethasone					
Selinexor	€ 128,508.77				
Dexamethasone	€ 243.05				
Bortezomib	€ 7,282.91				
Total	€ 136,034.73				
Appropriate comparator therapy					
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 dexametho	asone				
Bortezomib	€ 2,801.12 - € 5,602.24				
Dexamethasone	€ 104.10 - € 168.90				
Total	€ 2,905.22 - € 5,771.14				
Carfilzomib in combination with lenalidomic	de and dexamethasone				
Carfilzomib € 76,695.24					
Lenalidomide	€ 774.93				
Dexamethasone	€ 193.44				
Total	€ 77,663.61				
Additionally required SHI services	€ 106.40				

Designation of the therapy	Annual treatment costs/ patient			
Carfilzomib in combination with dexamethas	one			
Carfilzomib	€ 144,716.22			
Dexamethasone	€ 243.05			
Total	€ 144,959.27			
Additionally required SHI services	€ 106.40			
Daratumumab in combination with lenalidom	nide 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 bortezom	ib 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			
Elotuzumab in combination with lenalidomide	e and dexamethasone			
Elotuzumab	€ 84,540.00			
Lenalidomide	€ 774.93			
Dexamethasone	€ 185.70			
Total	€ 85,500.63			
Additionally required SHI services	€ 359.57 - € 363.88			
Lenalidomide in combination with dexamethasone				
Lenalidomide	€ 774.93			
Dexamethasone	€ 312.48			
Total	€ 1,087.41			
Additionally required SHI services	€ 106.40			

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

Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year			
Medicinal product to be assessed:								
Selinexor in combination	Selinexor in combination with bortezomib and dexamethasone							
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	41.6	€ 4,160			
Appropriate comparate	or therapy							
Bortezomib in combina	ition with pegylated li	iposomal doxo	orubicin					
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	32	€ 3,200			
Doxorubicin (pegylated, liposomal)	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	Day 4 21-day cycle	8	€ 800			
Bortezomib in combine	ition with dexametha	sone						
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	16 - 32	€ 1,600 - € 3,200			
Carfilzomib in combina	tion with lenalidomid	le and dexame	thasone					
Carfilzomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	1st - 12th cycle: 6 From 13th cycle: 4	76	€ 7,600			
Carfilzomib in combina	tion with dexametha	sone						
Carfilzomib	Surcharge for production of a	€ 100	6	78	€ 7,800			

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
	parenteral preparation containing cytostatic agents				
Daratumumab in comb	pination with bortezor	nib and dexar	methasone		
Bortezomib	Surcharge for production of a parenteral preparation containing cytostatic agents	€ 100	4	32	€ 3,200
Elotuzumab in combine	ation with lenalidomic	de and dexam	ethasone		
Elotuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1st - 2nd cycle: 4 From 3rd cycle: 2	30	€ 3,000

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 one prior therapy:

Adults with multiple myeloma who have received at least one prior 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