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)

Belzutifan
(von Hippel-Lindau (VHL) disease-associated tumours)

of 18 September 2025

At their session on 18 September 2025, 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. 6 to the information on the benefit assessment of Belzutifan in accordance with the resolution of 18 September 2025:

Last revised: 05.09.2025

Belzutifan

Resolution of: 18 September 2025
Entry into force on: 18 September 2025
Federal Gazette, BAnz AT DD. MM YYYY Bx

Therapeutic indication (according to the marketing authorisation of 12 February 2025):

WELIREG is indicated as monotherapy for the treatment of adult patients with von Hippel-Lindau disease who require therapy for associated, localised renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), and for whom localised procedures are unsuitable.

Therapeutic indication of the resolution (resolution of 18 September 2025):

See therapeutic indication according to marketing authorisation.

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

Adults with von Hippel-Lindau disease-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), for whom localised procedures are unsuitable and who require therapy

Appropriate comparator therapy:

Monitoring wait-and-see approach

Extent and probability of the additional benefit of belzutifan compared to monitoring wait-and-see approach:

An additional benefit is not proven.

Study results according to endpoints:[1]

Adults with von Hippel-Lindau disease-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), for whom localised procedures are unsuitable and who require therapy

There are no assessable data.

[1] Data from the dossier assessment of the Institute for Quality and Efficiency in Health Care (IQWiG) (A25-44) unless otherwise indicated.

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	∅	No data available.
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 ∅: No data available. n.a.: not assessable		

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

Adults with von Hippel-Lindau disease-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), for whom localised procedures are unsuitable and who require therapy

Approx. 80 - 970 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 Welireg (active ingredient: belzutifan) at the following publicly accessible link (last access: 25 June 2025):

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

Treatment with belzutifan should only be initiated and monitored

- by specialists in internal medicine and haematology and oncology as well as specialists in internal medicine and nephrology who are experienced in the treatment of patients with renal cell carcinoma, and
- by specialists in internal medicine and haematology and oncology who are experienced in the treatment of patients with central nervous system haemangioblastomas, as well as specialists in neurology and neurosurgery, and
- by specialists in internal medicine and haematology and oncology experienced in the treatment of patients with pancreatic neuroendocrine tumours, as well as specialists in internal medicine and gastroenterology, and

other doctors from other specialist groups participating in the oncology agreement.

This medicinal product received a conditional marketing authorisation. This means that further evidence of the benefit of the medicinal product is anticipated. The European Medicines Agency EMA will evaluate new information on this medicinal product at a minimum once per year and update the product information where necessary.

In accordance with the EMA requirements regarding additional risk minimisation measures, the pharmaceutical company must provide training material that contains information for medical professionals and patients (including patient card). The training material contains in particular information and warnings on the risk of embryo-foetal damage when taking belzutifan during pregnancy.

4. Treatment costs

Annual treatment costs:

Adults with von Hippel-Lindau disease-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), for whom localised procedures are unsuitable and who require therapy

Designation of the therapy	Annual treatment costs/ patient
Medicinal product to be assessed:	
Belzutifan	€ 204,564.74
Appropriate comparator therapy:	
Monitoring wait-and-see approach	Not calculable

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 1 September 2025)

Costs for additionally required SHI services: not applicable

5. Designation of 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 the assessed medicinal product

In the context of the designation of medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V, the following findings are made:

Adults with von Hippel-Lindau disease-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), for whom localised procedures are unsuitable and who require therapy

- No designation of medicinal products with new active ingredients that can be used in combination therapy pursuant to Section 35a, paragraph 3, sentence 4 SGB V, as the active ingredient to be assessed is an active ingredient authorised in monotherapy.

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.

6. Percentage of study participants at study sites within the scope of SGB V in accordance with Section 35a, paragraph 3, sentence 5 SGB V

The medicinal product belzutifan is a medicinal product placed on the market from 1 January 2025.

The percentage of study participants in the clinical studies of the medicinal product conducted or commissioned by the pharmaceutical company in the therapeutic indication to be assessed who participated at study sites within the scope of SGB V (German Social Security Code) is < 5 per cent (2.5%) of the total number of study participants.

The clinical studies of the medicinal product in the therapeutic indication to be assessed were therefore not conducted to a relevant extent within the scope of SGB V.

II. The resolution will enter into force on the day of its publication on the website of the G-BA on 18 September 2025.

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

Berlin, 18 September 2025

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

Prof. Hecken