

Apalutamide (Reassessment after the Deadline: Non-metastatic Castration-resistant Prostate Cancer)

Resolution of: 1 October 2020 valid until: unlimted

Entry into force on: 1 October 2020 Federal Gazette, BAnz AT 27 11 2020 B4

Therapeutic indication (according to the marketing authorisation of 14 January 2019):

Erleada is indicated in adult men for the treatment of non-metastatic castration-resistant prostate cancer (nmCRPC) who are at high risk of developing metastatic disease.

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

Adult men with non-metastatic castration-resistant prostate carcinoma (nmCRPC) who are at high risk of developing metastatic disease

Appropriate comparator therapy:

A wait-and-see approach while maintaining the existing conventional androgen deprivation therapy (ADT).

Extent and probability of the additional benefit of apalutamide compared with the waitand-see approach while maintaining the existing conventional androgen deprivation therapy (ADT):

Indication of a minor additional benefit

Study results according to endpoints1:

SPARTAN study: Apalutamide + ADT vs placebo + ADT²

Study design: randomised, double-blind, Phase III

Data cut-off: 1 December 2019³

Mortality

Endpoint	Apalutamide + ADT		Р	lacebo + ADT ²	Intervention vs control
	N	Median time to event in months [95% CI] Patients with event n (%)	N	Median time to event in months [95% CI] Patients with event n (%)	Hazard ratio (HR) [95% CI] ^a p value Absolute difference (AD) ^b
Overall survival					
	806	66.10 [61.34; n.c.] <i>261 (32.4)</i>	401	58.68 [52.70; n.c.] 149 (37.2)	0.77 [0.63; 0.94] no data available AD: 7.42 months

Morbidity

Metastasis-free survival (MFS) ^c						
	806	40.51 [29.70; 40.51] 209 (25.9)	401	15.70 [14.55; 18.40] <i>210 (52.4)</i>	0.30 [0.24; 0.36] < 0.001 AD: 24.81 months	
Time before initiation of cytotoxic chemotherapy ^c						
	806	n.a. [n.a.; n.a.] 1 <i>4</i> 9 <i>(18.5)</i>	401	n.a. [n.a.; n.a.] <i>100 (24.9)</i>	0.62 [0.48; 0.80] no data available AD: n.c.	
Symptomatic progression						
	806	n.a. 149 (18.5)	401	n.a. 102 (25.4)	0.58 [0.45; 0.75] no data available AD: n.c.	

¹ Data from the dossier assessment of the IQWiG (A20-36) unless otherwise indicated.

² Sufficient approximation to the appropriate comparator therapy wait-and-see approach while maintaining the existing conventional androgen deprivation (ADT)

³ Conditions for a time limit of the G-BA

Endpoint component: skeletal events ^d	806	n.a. <i>51 (6.3)</i>	401	n.a. 33 (8.2)	0.64 [0.41; 0.99] no data available AD: n.c.	
Endpoint component: pain progression or deterioration of disease-related symptomse	806	n.a. 77 (9.6)	401	n.a. <i>54 (13.5)</i>	0.60 [0.42; 0.85] no data available AD: n.c.	
Endpoint component: clinically significant symptoms because of locoregional tumour progression ^f	806	n.a. <i>45 (5.6)</i>	401	n.a. 31 (7.7)	0.62 [0.39; 0.97] no data available AD: n.c.	
Health status (EQ-5D VAS)						
Time until deterioration ^g						
MID 7	806	10.02 [7.43; 15.05] <i>474 (58.8)</i>	401	11.30 [6.47; 18.53] 201 (50.1)	0.95 [0.80; 1.13] no data available	
MID 10	806	14.75 [9.96; 25.79] <i>447 (55.5)</i>	401	15.70 [9.27; 22.11] 191 (47.6)	0.93 [0.78; 1.10] no data available	

Endpoint	Apalutamide + ADT			F	Placebo + /	Intervention vs control	
	N	Values at start of study MV (SD)	Change MV (SD)	Z	Values at start of study MV (SD)	Change MV (SD)	Effect [95% CI] p value
Health status (EQ-5D VAS)							
No usable data							

Health-related quality of life

Endpoint	Apa	alutamide + ADT	Placebo + ADT ²		Intervention vs control		
	N	Median time to event in months [95% CI]	N	Median time to event in months [95% CI]	Hazard ratio (HR) [95% CI] ^a		
		Patients with event n (%)		Patients with event n (%)	p value Absolute difference (AD) ^b		
FACT-P total score ^h							
	806	6.60 [5.55; 8.28] <i>544 (67.5)</i>	401	8.38 [6.47; 12.95] 230 (57.4)	1.04 [0.89; 1.22] no data available		
FACT-P sub-scales (presented additionally)							
Prostate cancer subscale (PCS)	806	3.84 [3.71; 4.70] <i>619 (76.8)</i>	401	3.78 [2.86; 4.80] 272 (67.8)	0.97 [0.84; 1.13] no data available		
Physical well-being (PWB)	806	6.57 [5.55; 8.38] <i>530 (65.8)</i>	401	7.43 [5.59; 11.11] 234 (58.4)	0.97 [0.83; 1.14] no data available		
Familiar/social well- being (SWB)	806	7.49 [5.62; 11.11] <i>473 (58.7)</i>	401	4.90 [3.84; 8.38] 223 (55.6)	0.87 [0.73; 1.02] no data available		
Emotional well-being (EWB)	806	14.69 [11.07; 18.63] <i>459 (56.9)</i>	401	14.82 [10.61; 32.99] <i>181 (45.1)</i>	1.06 [0.89; 1.27] no data available		
Functional well-being (FWB)	806	4.63 [3.78; 5.59] 558 (69.2)	401	6.51 [4.70; 9.27] 229 (57.1)	1.15 [0.98; 1.35] no data available		

Side effects

Adverse events (presented additionally)					
	803	0.56 [0.43; 0.70] 781 (97.3)	398	0.76 [0.53; 0.92] 373 (93.7)	-
Serious adverse events (SAE)					
	803	35.06 [31.34; 41.92] <i>295 (36.7)</i>	398	35.25 [28.19; n.c.] <i>100 (25.1)</i>	0.84 [0.67; 1.07] no data available

Severe adverse events (CTCA	E grade ≥ 3)			
	803	21.91 [18.46; 25.92] 450 (56.0)	398	24.15 [18.53; 29.47] 146 (36.7)	1.10 [0.91; 1.34] no data available
Therapy discontinuation	beca	use of adverse eve	ents		
	803	n.a. [54.41; n.c.] <i>115 (14.3)</i>	398	n.a. 29 (7.3)	1.40 [0.92; 2.12] no data available
Specific adverse events					
Arthralgia (PT, AE)	803	57.20 [45.17; n.c.] 158 (19.7)	398	n.a. 33 (8.3)	1.74 [1.19; 2.54] no data available AD: n.c.
Skin and subcutaneous tissue disorders (SOC, severe AE CTCAE grade ≥ 3)	803	n.a. <i>52 (6.5)</i>	398	n.a. 1 (0.3)	23.84 [3.29; 172.53] no data available AD: n.c.
Nervous system disorders (SOC, AE)	803	37.16 [30.42; 47.80] 326 (40.6)	398	n.a. 93 (23.4)	1.54 [1.22; 1.94] no data available
Renal and urinary disorders (SOC, severe AE CTCAE grade ≥ 3)	803	n.a. [58.91; n.c.] <i>67 (8.3)</i>	398	n.a. [35.48; n.c.] <i>46 (11.6)</i>	0.38 [0.25; 0.57] no data available AD: n.c.
Hypothyroidism (PT, AE)	803	n.a. 59 (7.3)	398	n.a. 5 (1.3)	4.43 [1.77; 11.09] no data available AD: n.c.
Infections and infestations (SOC, SAE)	803	n.a. [53.09; n.c.] <i>76 (9.5)</i>	398	n.a. <i>9 (</i> 2.3)	2.29 [1.13; 4.64] no data available AD: n.c.
Injury, poisoning, and procedural complications (SOC, SAE)	803	n.a. [59.37; n.c.] <i>60 (7.5)</i>	398	n.a. 6 (1.5)	2.82 [1.20; 6.61] no data available AD: n.c.

^a HR and CI: Cox proportional hazard model with treatment as the only explanatory variable stratified by PSADT (≤ 6 months vs > 6 months), use of bone-preserving substances (yes vs no), presence of locoregional disease (N0 vs N1)

- ^b Absolute difference (AD) given only in the case of a statistically significant difference; own calculation
- ^c Data from the dossier on apalutamide Module 4A of 30 March 2020
- ^d Pathological fractures, compression of the spinal cord, or need for surgical intervention or radiotherapy of the bone.
- ^e With need to initiate a new systemic cancer therapy.
- f With need of surgical intervention or radiotherapy.
- ⁹ Deterioration means reduction of the score by the respective MID
- ^h Time to deterioration by ≥ 10 points
- ⁱ Time to deterioration by ≥ 3 points
- Selection according to the methodology of the IQWiG; selection using events based on frequency and differences between treatment arms and taking into account patient relevance.

Abbreviations used:

AD = absolute difference; ADT = androgen deprivation therapy; CTCAE = Common Terminology Criteria for Adverse Events; EQ-5D = European Quality of Life Questionnaire – 5 Dimensions; FACT-P = Functional Assessment of Cancer Therapy – Prostate; CI = confidence interval; MID = minimal important Difference; MV = mean value; N = number of patients evaluated; n = number of patients with (at least one) event; n.c. = not calculable; n.a. = not achieved; SD = standard deviation; SOC = system organ class; PSA: prostate-specific antigen; PSADT: PSA doubling time; PT = preferred term; VAS = visual analogue scale; vs = versus

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ Risk of bias	Summary
Mortality	$\uparrow \uparrow$	Advantage in overall survival
Morbidity	↑	Advantage in symptomatic progression
Health-related quality of life	\leftrightarrow	No difference relevant for the benefit assessment
Side effects	\leftrightarrow	No difference relevant for the benefit assessment; advantage and disadvantage in individual specific AE

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
- Ø: There are no usable data for the benefit assessment.
- n.a.: not assessable

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

approx. 1,090 - 3,800 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 Erleada® (active ingredient: apalutamide) at the following publicly accessible link (last access: 16 September 2020):

https://www.ema.europa.eu/en/documents/product-information/erleada-epar-product-information_de.pdf

Treatment with apalutamide should be initiated and monitored by specialists in internal medicine, haematology, and oncology, specialists in urology, and specialists participating in the Oncology Agreement who are experienced in the treatment of patients with prostate cancer.

Patients who have not undergone surgical castration should continue receiving chemical castration with GnRH agonists or antagonists during treatment.

4. Treatment costs

Annual treatment costs:

Designation of the therapy	Annual treatment costs/patient					
Medicinal product to be assessed:						
Apalutamide	€38,663.80					
GnRH agonist/GnRH antagonist	€1,246.78 - 2,096.72					
Total:	€39,910.58 - 40,760.52					
Appropriate comparator therapy:						
GnRH agonist/GnRH antagonist	€1,246.78 - 2,096.72					

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 September 2020

Costs for additionally required SHI services: not applicable