

Brentuximab Vedotin (reassessment after the deadline: systemic anaplastic large cell lymphoma; first-line; combination with Cyclophosphamide, Doxorubicin, and Prednisone)

Resolution of: 16 December 2021 valid until: unlimited

Entry into force on: 16 December 2021 Federal Gazette, BAnz AT 02 02 2022 B2

Therapeutic indication (according to the marketing authorisation of 12 May 2020):

ADCETRIS in combination with cyclophosphamide, doxorubicin and prednisone (CHP) is indicated for adult patients with previously untreated systemic anaplastic large cell lymphoma (sALCL).

Therapeutic indication of the resolution (resolution of 16 December 2021):

see therapeutic indication according to marketing authorisation

1. Extent of the additional benefit and significance of the evidence

Brentuximab vedotin is approved as a medicinal product for the treatment of rare diseases under Regulation (EC) No. 141/2000 of the European Parliament and of the Council of 16 December 1999 on orphan drugs. In accordance with Section 35a, paragraph 1, sentence 11, 1st half of the sentence German Social Code, Book Five (SGB V), the additional medical benefit is considered to be proven through the grant of the marketing authorisation.

The Federal Joint Committee (G-BA) determines the extent of the additional benefit for the number of patients and patient groups for which there is a therapeutically significant additional benefit in accordance with Chapter 5, Section 12, paragraph 1, number 1, sentence 2 of its Rules of Procedure (VerfO) in conjunction with Section 5, paragraph 8 AM-NutzenV, indicating the significance of the evidence. This quantification of the additional benefit is based on the criteria laid out in Chapter 5, Section 5, paragraph 7, numbers 1 to 4 of the Rules of Procedure (VerfO).

Adult patients with previously untreated systemic anaplastic large cell lymphoma (sALCL)

Extent of additional benefit and significance of the evidence of Brentuximab Vedotin in combination with Cyclophosphamide, Doxorubicin and Prednisone (CHP):

Hint for a minor additional benefit

Study results according to endpoints:1

Adult patients with previously untreated systemic anaplastic large cell lymphoma (sALCL)

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	↑	Advantage in the endpoint of event-free survival (EFS)
Health-related quality of life	\leftrightarrow	No relevant difference for the benefit assessment
Side effects	\leftrightarrow	No relevant difference for the benefit assessment

Explanations:

↑: statistically significant and relevant positive effect with low/unclear reliability of data

 \downarrow : 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

Ø: There are no usable data for the benefit assessment.

n.a.: not assessable

ECHELON-2 study:

- brentuximab vedotin (A) + cyclophosphamide + doxorubicin + prednisone (CHP) versus cyclophosphamide + doxorubicin + vincristine + prednisone (CHOP)
- double-blind, randomised, placebo-controlled phase III study in parallel group design (1:1)
- Relevant sub-population: Patients with sALCL
- Data cut-offs: 05.11.2020; 15.08.2018

¹ Data from the dossier assessment of the G-BA (published on 1. Oktober 2021), and from the amendment of the G-BA to the dossier assessment (published on 16 December 2021), unless otherwise indicated.

Mortality

Endpoint	Brentuximab Vedotin (A) + CHP			СНОР	A+CHP vs CHOP
	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 Absolute difference (AD) ^a
Overall survival (data cut	-off of 05.11.2020)			
Stratified analysis	162	n.a. [n.a.; n.a.] <i>39 (24)</i>	154	n.a. [n.a.; n.a.] <i>49 (32)</i>	0.66 [0.43; 1.01] 0.053 ^b

Morbidity

Endpoint	Brentuximab Vedotin (A)+ CHP			СНОР	A+CHP vs CHOP	
	Z	Median in months [95% CI] Patients with event n (%)	N	Median in months [95% CI] Patients with event n (%)	Hazard ratio [95% CI] p-value Absolute difference (AD)a	
Progression-free survival (PFS) ^c (presented additionally; data cut-off 05.11.2020)						
	162	n.a. [55,66; -] <i>53 (33)</i>	154	54.18 [13,44; -] <i>77 (50)</i>	0.55 [0.39; 0.79] 0.0009 ^b	
Event-free surviv	/al (data	cut-off of 05.11.20	20)	<u> </u>		
	162	55.7 [26.2; n.a.] <i>74 (46)</i>	154	9.0 [5.5; 32.0] <i>92 (60)</i>	0.63 [0.46; 0.86] 0.0034 ^b + 46.7 months	

(continuation)

Endpoint	Brent	tuximab Vedotin (A)+ CHP		СНОР	A+CHP vs CHOP			
	N	Patients with event n (%)	N	Patients with event n (%)	Relative risk [95% CI] p-value			
Complete remission (CR) (presented additionally; data cut-off of 15.08.2018)								
	162	115 (71)	154	82 (53)	1.36 [1.14; 1.61] 0.0004			
Complete remiss cut-off of 15.08.2	-	atients with B symp	otomato	logy at the start of	treatment (data			
	44 ^d	31 (70)	54 ^d	29 (54)	1.29 [0.94; 1.76] 0.1202			
Endpoint	N	LS-MV [SE]	N	LS-MV [SE]	MD ^e [95% CI] p-value			
EQ-5D VAS (chan data cut-off of 15	_	e EoT (end of treatr 8) ^f	nent) co	mpared to the start	t of treatment;			
	149 ^g	8.5 [15.2]	145 ^g	9.0 [15.3]	-0.46 [-3.95; 3.03] 0.7942			
Endpoint	N	MV (SD)	N	MV (SD)	MD ^e [95% CI] p-value			
eortc QLQ-c30 of treatment; dat		om scales (change a f of 15.08.2018) ^h	it the en	d of treatment com	pared to the start			
Fatigue	153 ^g	-7.9 (18.26)	146 ^g	-10.0 (18.40)	2.13 [-2.03; 6.29] 0.3153			
Pain	153 ^g	-17.8 (18.28)	146 ^g	-22.0 (18.44)	4.21 [0.04; 8.37] 0.0480 Hedges' g: 0.23 [0.00; 0.46]			

(continuation)

Endpoint	Bren	tuximab Vedotin (A)+ CHP		СНОР	A+CHP vs CHOP	
	N	MV (SD)	N	MV (SD)	MD ^e [95% CI] p-value	
Nausea and vomiting	153 ^g	-0.2 (8.88)	146 ^g	-3.0 (8.96)	2.77 [0.74; 4.79] 0.0076 Hedges' g: 0.31 [0.08; 0.54]	
Dyspnoea	151 ^g	-3.0 (16.73)	146 ^g	-4.1 (16.91)	1.11 [-2.72; 4.94] 0.5702	
Appetite loss	153 ^g	-9.0 (19.06)	146 ^g	-12.0 (19.23)	3.03 [-1.33; 7.38] 0.1729	
Insomnia	152 ^g	-17.4 (21.83)	146 ^g	-16.6 (22.04)	-0.84 [-5.83; 4.16] 0.7425	
Constipation	153 ^g	-6.7 (16.14)	144 ^g	-8.6 (16.26)	1.91 [-1.78; 5.61] 0.3101	
Diarrhoea	153 ^g	1.1 (12.64)	145 ^g	-2.5 (12.73)	3.64 [0.75; 6.53] 0.0134 Hedges' g: 0.29 [0.06; 0.51]	
Endpoint	N	LS-MV [SE]	N	LS-MV [SE]	MD ^e [95% CI] p-value	
FACT/GOG-Ntx (change at the end of treatment compared to the start of treatment, data cut-off of 15.08.2018) ⁱ						
	152 ^g	-2.1 [4.7]	146 ^g	-0.9 [4.7]	-0.89 [-1.96; 0.18] 0.1021	

Health-related quality of life

Endpoint	Bren	tuximab Vedotin (A)+ CHP		СНОР	A+CHP vs CHOP
	N	MV (SD)	N	MV (SD)	MD ^e [95% CI] p-value
		onal scales (change cut-off of 15.08.201		nd of treatment cor	npared to the
General health status/quality of life	153 ^g	10.6 (16.03)	144 ^g	11.6 (16.15)	-0.94 [-4.61; 2.72] 0.6143
Physical functioning	152 ^g	4.9 (15.96)	146 ^g	4.1 (16.07)	0.79 [-2.86; 4.43] 0.6719
Role functioning	152 ^g	6.9 (21.54)	145 ^g	10.6 (21.72)	-3.66 [-8.59; 1.27] 0.1454
Emotional functioning	153 ^g	9.7 (14.24)	145 ^g	11.1 (14.37)	-1.44 [-4.70; 1.82] 0.3871
Cognitive functioning	153 ^g	2.3 (14.37)	145 ^g	4.3 (14.49)	-2.06 [-5.34; 1.23] 0.2196
Social functioning	153 ^g	5.9 (20.82)	145 ^g	9.6 (20.98)	-3.71 [-8.47; 1.04] 0.1260

Side effects (data cut-off of 15.08.2018)

Endpoint	Bre	Brentuximab vedotin (A)+ CHP		СНОР	A+CHP vs CHOP		
	N	Patients with event n (%)	N Patients with event n (%)		Relative risk [95% CI] p-value ^k		
Total adverse events (presented additionally)							
	160 ^l	159 (99)	154 ^l	150 (97)	-		

Endpoint	Brei	ntuximab vedotin (A)+ CHP		СНОР	A+CHP vs CHOP
	N	Patients with event n (%)	N	Patients with event n (%)	Relative risk [95% CI] p-value ^k
Serious adverse	events	(SAE)			
	160 ^l	52 (33)	154 ^l	57 (37)	0.87 [0.65; 1.15] 0.3206
Severe adverse e	vents	(CTCAE grade ≥ 3)			
	160 ^l	94 (59)	154 ^l	98 (64)	0.93 [0.78; 1.10] 0.3832
AE, which led to	the dis	scontinuation of the	e stud	y medication	
	160 ^l	6 (4)	154 ^l	14 (9)	0.40 [0.15; 1.05] 0.0500
AEs of special int	erest				
AE of SMQ periph	neral n	europathy			
Any severity grade	160 ^l	87 (54)	154 ^l	88 (57)	0.95 [0.78; 1.16] 0.6352
Grade ≤ 2	160 ^l	82 (52)	154 ^l	80 (52)	0.99 [0.80; 1.23] 0.9213
Grade ≥ 3	160 ^l	5 (3)	154 ^l	8 (5)	0.59 [0.19; 1.83] 0.3530
SAE	160 ^l	1 (< 1)	154 ^l	3 (2)	0.30 [0.03; 3.49] 0.3037

- a Indication of absolute difference (AD) only in case of statistically significant difference; own calculation.
- b Hazard ratio and 95% CI based on Cox regression model. p-value based on stratified log-rank test with factors ALK+ (yes/no) and IPI score (0-1/2-3/4-5)
- c Data from the dossier for the brentuximab vedotin module 4F (dated 21.06.2021)
- d Patients with B symptomatology at the start of treatment
- e Based on MMRM analyses
- f Scale: 0–100. Higher scores on the scales mean better health status.
- g Number of patients evaluated
- h Scale: 0–100. Higher scores on the symptom scales or the individual symptom items mean more severe symptomatology.
- i Scale 0-44. Higher scores mean fewer disorders.
- j Scale: 0–100. Higher scores on the scales mean a better quality of life.
- p-value based on Cochran-Mantel-Haenszel Chi-square test, stratified by ALK+ (yes/no) and IPI score (0-1/2-3/4-5)
- I Safety population compliant with the marketing authorisation

Abbreviations used:

AD = absolute difference; A + CHP = brentuximab vedotin + cyclophosphamide + doxorubicin + prednisone; CHOP = cyclophosphamide + doxorubicin + vincristine + prednisone; CR = complete remission; CTCAE = Common Terminology Criteria for Adverse Events; EORTC-QLQ-C30 = European Organisation for Research and

Treatment of Cancer Quality of Life Questionnaire C30; EoT = end of treatment; EQ-5D-VAS = Visual Analogue Scale of the EuroQol-5 Dimension Questionnaire; FACT/GOG-Ntx = Functional Assessment of Cancer Therapy / Gynaecologic Oncology Group-Neurotoxicity; HR = hazard ratio; CI = confidence interval; LS-MV = least squares mean value; MV = mean value; MD = mean difference; N = number of patients evaluated; n = number of patients with (at least one) event; n.c. = not calculable; n.a. = not achieved; PFS = progression-free survival; SD = standard deviation; SE = standard error; vs = versus

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

Adult patients with previously untreated systemic anaplastic large cell lymphoma (sALCL) approx. 125 – 127 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 Adcetris (active ingredient: brentuximab vedotin) at the following publicly accessible link (last access: 20 September 2021):

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

Treatment with the active ingredient should only be initiated and monitored by specialists in internal medicine, haematology and oncology, experienced in the treatment of patients with periphery T-cell lymphoma, in particular sALCL.

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

No data are available for adults with ALK-positive sALCL with IPI status < 2 as these patients were not included in the ECHELON-2 study.

4. Treatment costs

Annual treatment costs:

Adult patients with previously untreated systemic anaplastic large cell lymphoma (sALCL)

Designation of the therapy	Annual treatment costs/ patient					
Medicinal product to be assessed:						
Brentuximab vedotin	€ 58,224.78 - € 77,633.04					
Cyclophosphamide	€ 186.92 - € 280.12					
Doxorubicin	€ 1,657.80 - € 2,210.40					
Prednisone	€ 81.73 - € 122.15					
Total:	€ 60,151.23 - € 80,245.71					
Additionally required SHI services	€ 4,924.92 - € 6,566.56					

Costs after deduction of statutory rebates (LAUER-TAXE® as last revised: 1 December 2021)

Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Brentuximab Vedotin	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 81	1	6 – 8	€ 486 - € 648
Cyclophosphamide	Surcharge for production of a solution containing cytostatic agents	€ 71	1	6 – 8	€ 426 - € 568
Doxorubicin	Surcharge for production of a solution containing cytostatic agents	€71	1	6 – 8	€ 426 - € 568