BRIEF SUMMARY OF THE TRANSPARENCY COMMITTEE OPINION

NUWIQ (simoctocog alfa), human coagulation factor (factor VIII)

No clinical benefit demonstrated by comparison with other coagulation factor VIII products in the treatment and prophylaxis of bleeding in patients with haemophilia A.

Main points

- NUWIQ has Marketing Authorisation in the treatment and prophylaxis of bleeding in patients with haemophilia A (congenital factor VIII deficiency). This factor VIII is produced in host cells of human origin (human embryonic kidney (HEK) 293 F cells).
- In phase III trials with this product no patients developed anti-factor VIII inhibitors, which is a major complication of factor VIII replacement therapy.
- The safety profile appears to be similar in children and adults.

Therapeutic use

- The aim of therapeutic management in haemophilia A is the early prevention and control of bleeding and its short- and long-term complications.
- The first-line treatment for haemophilia A is replacement therapy based on the administration of coagulation factor VIII concentrates. It may be administered:
  - in the prevention of bleeding: as primary prophylaxis in children with severe haemophilia aged under 2 years and before the occurrence of a second haemarthrosis, as secondary prophylaxis (long-term or intermittent) after the occurrence of a second haemarthrosis, or during surgery or invasive procedures (depending on the severity and the risk of bleeding expected),
  - as curative treatment (“on demand” treatment) when bleeding occurs that cannot be controlled by local haemostatic measures or is not suitable for treatment with desmopressin or tranexamic acid.

Role of the medicinal product in the therapeutic strategy

NUWIQ is one of the first-line factor VIII concentrates used in the prophylaxis and treatment of bleeding in haemophilia A.

Clinical data

- The efficacy and safety of NUWIQ have been evaluated in 135 patients aged between 2 and 75 years with a severe form of haemophilia A, all previously treated with a factor VIII product and without history of inhibitors. There have been no comparisons against another factor VIII product.
- The haemostatic efficacy of NUWIQ has been evaluated in prophylaxis (long-term and in surgery) and in on-demand treatment under prophylaxis, in two 6-month studies, one in adults (32 patients aged 18 to 75 years exposed for a mean cumulative total of 85 days), the other in children (59 children aged 2 to 12 years exposed for a mean cumulative total of 90 days):
  - In the study in children, the efficacy in long-term prophylaxis was judged to be excellent (< 0.75 bleeding episodes/month) or good (0.75 to 1 episodes/month in 91.5% of patients, with a mean incidence of 0.338 bleeding episodes per month. The efficacy in on-demand treatment of bleeding episodes occurring under prophylaxis was judged to be excellent or good in 82.4% (89/108) of treated bleeding episodes and moderate in 15.7% (17/108). NUWIQ was ineffective in one episode.
  - In adults, the prophylactic efficacy was judged to be excellent or good in 96.9% of patients, with a mean incidence of 0.188 bleeding episodes per month. The efficacy in on-demand treatment of bleeding episodes occurring under prophylaxis was judged to be excellent or good in the 30 bleeding episodes treated.

- In the prevention of bleeding during a surgical procedure, the haemostatic efficacy was judged to be excellent or good in all cases where it had been reported during the paediatric study (five procedures classed as major). In adults, the efficacy was judged to be excellent in four cases (three major surgical procedures and one minor) and moderate in one case (major procedure).

- A third study evaluated NUWIQ in patients treated only on demand (follow-up for 6 months in 22 patients aged between 12 and 65 years). The haemostatic efficacy was judged to be successful in 94.4% of 986 treated episodes (60.3% excellent and 34.1% good), and moderate in the others.
- The safety profile is comparable in children and adults. There have been no reported cases of anti-factor VIII inhibitors or thromboembolic events in clinical studies (no data beyond 1 year). One case of non-neutralizing anti-factor VIII antibodies was detected in an adult patient. The clinical efficacy and in-vivo recovery of NUWIQ were unaffected in this patient.
- Studies are underway to document the efficacy and immunogenicity of NUWIQ both in patients previously untreated with factor VIII and in those treated in the long term (beyond 1 year)

Special prescribing conditions

- Initial 6-month hospital prescription.

Benefit of the medicinal product

- The actual benefit* of NUWIQ is substantial.
- NUWIQ does not provide clinical added value** (CAV V, non-existent) compared with the other coagulation factor VIII products available.
- Recommends inclusion on the list of reimbursable products for hospital use.

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[i] * The actual benefit (AB) of a proprietary medicinal product describes its benefit primarily in terms of its clinical efficacy and the seriousness of the condition being treated. The HAS Transparency Committee assesses the AB, which can be substantial, moderate, low or insufficient for reimbursement for hospital use.

** The clinical added value (CAV) describes the improvement in treatment provided by a medicinal product compared with existing treatments. The HAS Transparency Committee assesses the degree of CAV on a scale from I (major) to IV (minor). A level V CAV means “no clinical added value”.