HAUTE AUTORITÉ DE SANTÉ

TRANSPARENCY COMMITTEE
SUMMARY
6 OCTOBER 2021

The legally binding text is the original French opinion version

budesonide
CORTIMENT 9 mg prolonged-release tablets

New indication

Key points

Unfavourable opinion for reimbursement in the induction of remission in patients with active microscopic colitis (MC).

Role in the care pathway?

In clinical practice and taking into account current guidelines (see Medical need section), collagenous colitis and lymphocytic colitis are two microscopic colitis entities for which the management is similar, bearing in mind that the level of evidence of the efficacy results is lower in lymphocytic colitis than in collagenous colitis.

It is first necessary to identify and eradicate triggering factors (medicinal products potentially implicated and smoking) and to try a non-specific symptomatic treatment for diarrhoea (to slow intestinal transit). If these measures fail, budesonide is the only medicinal product with an MA in microscopic colitis. The recommended induction treatment duration is 8 weeks.

In mild forms, other symptomatic treatments may be considered although they do not have a specific MA (5 ASA, cholestyramine).

In the event of relapse following discontinuation of budesonide, the latter may be used again, either intermittently, or continuously at a low dose. In the event of insufficient response to budesonide, alternatives such as cholestyramine, 5-ASAs off-label (mesalazine et sulfasalazine off-label) or bismuth subsalicylate (off-label, available as a pharmacy compounded preparation) may be considered, only if the symptoms are minor.

In the event of refractory microscopic colitis, immunosuppressants (such as azathioprine, 6-mercaptopurin, methotrexate, TNF inhibitors, all off-label), may be considered although the level of evidence for their efficacy is low. Surgery may also be considered as a last resort.

Role of the medicinal product in the care pathway

The Transparency Committee considers that CORTIMENT (budesonide) has no role in the treatment of active microscopic colitis in adults insofar as

- **the 9-mg strength in the form of non-divisible, film-coated, gastro-resistant prolonged-release tablets does not enable the recommended dosage reduction to be implemented due to its non-divisible nature (see SPC); it requires treatment to be changed if a reduction in daily doses is implemented, despite the fact that such reductions are common in routine practice, and**
- **it is not demonstrated that the delivery form of this medicinal product provides a clinical benefit for the patient compared to the other budesonide products already available in France (ENTOCORT and MIKICORT); no clinical studies having been conducted with the CORTIMENT medicinal product.**

COMMITTEE'S CONCLUSIONS

Considering all of this information and further to debate and voting, the Committee considers:

Clinical benefit

◗ Microscopic colitis, which includes collagenous colitis and lymphocytic colitis, is defined by a combination of chronic diarrhoea, a normal endoscopic appearance of the mucosa on coloscopy and chronic inflammation of the intestinal mucosa on histology. It can be incapacitating and impair quality of life. The overall prognosis for this disease is good. It regresses in all patients, either spontaneously or with appropriate treatment.

» The medicinal product CORTIMENT (budesonide) is a symptomatic medicinal product.

» The efficacy/adverse effects ratio of budesonide in the induction of remission of microscopic colitis in adults is high, but CORTIMENT (budesonide) does not enable the recommended de-escalation (see SPC), since the 9-mg tablets proposed by the pharmaceutical company are non-divisible. In addition, no clinical studies have been conducted with CORTIMENT and pharmacokinetic data have only been collected in healthy volunteers.

» There are medicinal alternatives: two other proprietary medicinal products available in France containing budesonide: MIKICORT for collagenous colitis in accordance with its MA and ENTOCORT.

» CORTIMENT (budesonide) has no role in the treatment of microscopic colitis in adults in the absence of an appropriate form for dosage reduction (see section 08).

Public health impact

Considering:

- the relatively low seriousness and small number of patients concerned by microscopic colitis,
- the medical need met by the medicinal products containing budesonide already available,
- the absence of an additional response to the need provided by CORTIMENT (budesonide) considering the response provided by budesonide (with clinical data suggesting an efficacy but without robust demonstration of an impact in terms of clinical and histological improvement and quality of life) (see ENTOCORT opinion), but taking into account:
    - the absence of data having specifically assessed the medicinal product CORTIMENT in this indication, and
    - the absence of a CORTIMENT form suitable for the de-escalation of budesonide doses recommended in the context of proper use of this medicinal product,
    - the lack of an expected additional impact on the organisation of care and the patient's care and/or life pathway,

CORTIMENT (budesonide) is unlikely to have an additional impact on public health.

Considering all these elements, the Committee deems that the clinical benefit of CORTIMENT (budesonide) is insufficient to justify public funding cover in this indication extension in view of the available alternatives.

The Committee issues an unfavourable opinion for inclusion in both the hospital formulary list and the retail formulary list of reimbursed proprietary medicinal products approved for use in the MA indication and at the MA dosages.

◗ **Recommended reimbursement rate: not applicable.**