SUMMARY

evinacumab

EVKEEZA 150 mg/ml,

concentrate for solution for infusion

Reassessment

Original French opinion adopted by the Transparency Committee on 30 August 2023

The legally binding text is the original French opinion version

Transparency Committee's conclusions

Clinical Benefit

- Homozygous familial hypercholesterolaemia is a very rare and severe disease, characterised by the presence of extravascular cholesterol deposits, high LDL levels (>3.30 g/L) and cardiovascular diseases, from childhood onwards. Such diseases are favoured by these dyslipidaemias and can be prematurely life-threatening due to complications.
- The proprietary medicinal product EVKEEZA (evinacumab) is a preventive treatment.
- The efficacy of EVKEEZA (evinacumab), in combination with other lipid-lowering medications (statins + other lipid-lowering medications +/- LDL-apheresis), has only been demonstrated in terms of the reduction of biological parameters (LDL-c). Efficacy in terms of morbidity and mortality has not been demonstrated to date. Given the duration of follow-up and the size of the populations in the clinical trials, uncertainties remain, particularly in terms of safety. However, the efficacy/adverse effects ratio remains high.
- There is an alternative in adults only: LOJUXTA (lomitapide), which is not widely used in France and which has known serious adverse effects, particularly hepatic.
- It is a last-line treatment that should be reserved for adult patients and adolescents over 12 years of age with uncontrolled HoFH, in addition to a low-fat diet and in combination with an optimised oral lipid-lowering treatment, including at least one statin, ezetimibe and a PCSK9 inhibitor (evolocumab), with or without LDL apheresis.

- **Public health benefit**

Considering:

- the seriousness of the cardiovascular diseases promoted by HoFH,

- the rarity of this disease with a current prevalence of about 1 case/300,000, – the medical need to have access to effective and well-tolerated medicines in children, adolescents and adults with HoFH,
- the partial response of EVKEEZA (evinacumab) to the medical need, due to:
  - the demonstrated impact of EVKEEZA (evinacumab) on LDL-c reduction (biological outcome measure) but in the absence of comparative data and a demonstrated impact on morbidity and mortality,
  - the lack of evidence of an impact of EVKEEZA (evinacumab) on quality of life and the organisation of care,

EVKEEZA (evinacumab) is unlikely to have a public health benefit.

Considering all these elements, the Committee deems that the clinical benefit of EVKEEZA (evinacumab) remains substantial in the MA indication.

The Committee issues a favourable opinion for maintenance of inclusion of EVKEEZA (evinacumab) in the hospital formulary list of reimbursed proprietary medicinal products approved for use in the MA indication and at the MA dosages.

Clinical added value

The new data presented based on exploratory and interim analyses of the extension phase of the OLE study, with a median treatment follow-up of 24 months, are not of a nature to modify the Committee's previous conclusions:

Consequently, the Transparency Committee considers that EVKEEZA (evinacumab) provides a minor clinical added value (CAV IV) in the care pathway for the treatment of adult and adolescent patients aged 12 years and older with homozygous familial hypercholesterolaemia, as an adjunct to diet and other LDL-c cholesterol-lowering therapies.