SUMMARY

latanoprost, netarsudil

ROCLANDA 50 µg/mL + 200 µg/mL,

eye drops, solution

Initial inclusion

Original French opinion adopted by the Transparency Committee on 5 July 2023

The legally binding text is the original French opinion version

Transparency Committee's conclusions

Clinical Benefit

- Open-angle glaucoma and ocular hypertension are severe conditions that can cause blindness.
- ROCLANDA 50 µg/mL + 200 µg/mL (latanoprost, netarsudil) eye drops, solution is a preventive treatment for the complications of these conditions.
- The efficacy/adverse effects ratio is low given the low robustness of the demonstration of its non-inferiority and its less good safety compared to the bimatoprost + timolol combination (GANFORT).
- It is a second-line treatment in patients with open-angle glaucoma or ocular hypertension to be reserved for cases of inadequate response to prostaglandins or netarsudil and when treatment with dual therapy is envisaged.

  Given the low robustness of the demonstration of its non-inferiority and its less good safety compared to GANFORT (bimatoprost, timolol), the Committee recommends preferring combinations containing a beta-blocker and only using ROCLANDA (latanoprost, netarsudil) if beta-blockers are contraindicated.

  Since its formulation contains a preservative, its use should not be favoured over preservative-free eye drop solutions, particularly for patients with dry eyes or any other condition affecting the eye surface.

- **Public health benefit**

Considering:

- the seriousness of the disease, the complications of which can cause blindness, and its high prevalence in patients over 40 years of age,
- the medical need covered by numerous medicinal products as monotherapy and dual therapy available in the form of fixed-dose combinations but the contraindication against beta-blockers in some patients (particularly in the event of asthma, COPD and cardiovascular diseases) and the absence of reimbursed fixed-dose combinations containing a prostaglandin analogue and a Rho-kinase inhibitor without beta-blockers,
- the partial response to the identified need, given:
  - the lack of any expected additional impact on morbidity, or even a negative impact in terms of safety based on available data versus GANFORT,
  - the absence of any expected additional impact on the organisation of care,
  - the absence of an expected additional impact on the care and/or life pathway,

ROCLANDA 50 µg/mL + 200 µg/mL (latanoprost, netarsudil) eye drops, solution is unlikely to have an additional impact on public health.

Considering all these elements, the Committee deems that the clinical benefit of ROCLANDA 50 µg/mL + 200 µg/mL (latanoprost, netarsudil) eye drops, solution is low in the MA indication.

The Committee issues a favourable opinion for inclusion of ROCLANDA 50 µg/mL + 200 µg/mL (latanoprost, netarsudil) eye drops, solution in both the hospital formulary list and the retail formulary list of reimbursed proprietary medicinal products approved for use in the indication and at the MA dosages.

➔ **Recommended reimbursement rate for inclusion in the retail list of reimbursed proprietary medicinal products approved for use: 15%**

Clinical Added Value

Considering:

- demonstration of the superiority of the latanoprost 0.005% + netarsudil 0.2% fixed-dose combination compared to the individual components (latanoprost and netarsudil) in two multicentre, randomised, double-blind studies (MERCURY 1 and 2) conducted in adults with open-eye glaucoma or ocular hypertension in both eyes, for the primary outcome measure of mean IOP determined at each of the 9 measurements performed at 08:00, 10:00 and 16:00 at week 2, week 6 and month 3;
- data after 12 months in the MERCURY 1 study, demonstrating maintenance of the reduction in IOP in the longer term;
- demonstration of its non-inferiority (only in the ITT population, n = 430) compared to the bimatoprost 0.03% + timolol 0.5% combination (GANFORT) in a multicentre, randomised, double-blind study (MERCURY 3) conducted in adults with open-eye glaucoma or ocular hypertension in both eyes and inadequately controlled under treatment and/or requiring treatment with a combination, having shown for the same primary outcome measure as that used in the MERCURY 1 and 2 studies: demonstrated non-inferiority with a confidence interval respecting the non-inferiority margin of 1.5 mmHg for all 9 measurements and respecting the non-inferiority margin of 1.0 mmHg for 6 of the 9 measurements;

- the medical need covered by numerous medicinal products as monotherapy and dual therapy available in the form of fixed-dose combinations but the contraindication against beta-blockers in some patients (particularly in the event of asthma, COPD and cardiovascular diseases) and the absence of reimbursed fixed-dose combinations containing a prostaglandin analogue and a Rho-kinase inhibitor without beta-blockers;

but considering:

- the weakness of the demonstration of the non-inferiority of ROCLANDA compared to GANFORT insofar as:
  - the non-inferiority was not confirmed in the per protocol population (PP) (n = 339 patients), with only 8 of the 9 measurements having a confidence interval respecting the non-inferiority margin of 1.5 mmHg;
  - demonstration of non-inferiority was sensitive to the choice of missing data imputation method (not quantified);
  - an amendment during the study modified the analysis population (from PP to ITT population), with the justification appearing to be inadequate;
  - a high number of patients discontinued the study prematurely (15.8%, 25.2% of whom in the ROCLANDA group and 6.1% in the GANFORT group), primarily due to adverse events in the ROCLANDA group (18.3%);
- its less good safety compared to the bimatoprost 0.03% + timolol 0.5% combination (70.2% vs 51.9% for all adverse events and 60.1% vs 30.2% for ocular adverse events);
- the lack of efficacy and safety data beyond 12 months;

the Committee deems that ROCLANDA 50 µg/mL + 200 µg/mL (latanoprost, netarsudil) eye drops, solution provides no clinical added value (CAV V) compared to GANFORT (bimatoprost, timolol).