Original French opinion adopted by the Transparency Committee

The legally binding text is the original French opinion version

SUMMARY

pitolisant

WAKIX 4.5 mg and 18 mg

film-coated tablet

Reassessment at the request of the CT

Adopted by the Transparency Committee on 23 April 2025

Summary of opinion

Favourable opinion for reimbursement for the treatment of narcolepsy with or without cataplexy in adults.

Clinical benefit now substantial (previously it was moderate) in the abovementioned indication.

Transparency Committee's conclusions

Clinical Benefit

- Narcolepsy is a chronic disease primarily manifested by excessive daytime sleepiness accompanied by cataplexy attacks depending on the form. These symptoms are incapacitating to various degrees depending on their severity, with severe forms very significantly impairing quality of life.
- This is a symptomatic medicinal product.
- Due to initial data having reported a demonstrated efficacy, after only 4 weeks at a fixed dose, versus placebo in only one of the two pivotal studies on excessive daytime sleepiness and in one study on cataplexy, and the medium-term safety profile (PASS study with a median follow-up of 54.5 months) similar to that having already been identified at the time of initial listing, with, however, the identification of a risk of suicidal ideation, the efficacy/adverse effects ratio is now high only in the short term and is still inadequately established in the long term.
- This is now a first-line option in adults for the treatment of narcolepsy with or without cataplexy, in view of the therapeutic alternatives.

Public health benefit

Considering:

- the seriousness of the disease and its prevalence,
- the partially met medical need,
- the lack of additional response to the identified medical need, with:

- the lack of a demonstrated additional impact on morbidity compared to the available alternatives,
- the lack of evidence of an additional impact on quality of life,
- the lack of evidence of an additional impact on the organisation of care and the patient's life pathway,

WAKIX (pitolisant) is unlikely to have an additional impact on public health.

Considering all of these elements, the Committee deems that the clinical benefit of WAKIX (pitolisant) is substantial in the treatment of narcolepsy with or without cataplexy.

The Committee issues a favourable opinion for maintenance of inclusion of WAKIX (pitolisant) in both the list of covered drugs for outpatients and the list of covered drugs for inpatients approved for use in the indications and at the MA dosages.

➔ **Recommended reimbursement rate for inclusion in the list of covered drugs for outpatients: 65%**

Clinical Added Value

Considering:

- initial data in which the non-inferiority of pitolisant was not demonstrated versus modafinil on the reduction of excessive daytime sleepiness,
- new data submitted by the pharmaceutical company to support this reassessment, primarily based on an interim analysis scheduled in the protocol of an international, multicentre, prospective observational Post-Authorization Safety Study (PASS), aimed at evaluating the safety and use of WAKIX (pitolisant) in the treatment of narcolepsy with or without cataplexy in clinical practice for up to 5 years,
- the medium-term safety profile (PASS study with a median follow-up of 54.5 months) similar to that having already been identified at the time of initial listing, with, however, the identification of a risk of suicidal ideation,
- the absence of a prospective study demonstrating the superiority or non-inferiority of WAKIX (pitolisant), in terms of clinical efficacy and safety, versus an active comparator, despite these data having been requested by the Committee at the time of first listing,
- the medical need partially met by several therapeutic alternatives already available and recommended in narcolepsy,

the Committee deems that WAKIX 4.5 mg and 18 mg (pitolisant) film-coated tablets provides no clinical added value (**CAV V**) in the current care pathway for the treatment of narcolepsy with or without cataplexy in adults.

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