Medication Advisory Panel REPORT

February 2012 - Issue 43

MAP Report is a review of the Medication Advisory Panel's (MAP) decisions on recently reviewed medications.

In this Issue

Product Indications

Nucynta CR® An opioid analgesic indicated for the management of moderate to moderately severe pain in adults who require several days or more of continuous treatment.

Victrlis® / Incivek® Indicated for the treatment of Chronic Hepatitis C (CHC) genotype 1 infection, in combination with peginterferon alpha/ribavirin treatment. This is for adult patients with compensated liver disease who have been untreated or have failed previous therapy.

Xgeva ® A biologic product indicated for reducing the risk of developing skeletal-related events (SREs) in patients with bone metastases from breast cancer, prostate cancer, non-small cell lung cancer and other solid tumours.

Pharmaceutical Decisions

Product	Pharmaceutical Decision
Nucynta CR	Declined □
Victrlis / Incivek	Special Authorization
Xgeva	Special authorization

*Special Authorization where applicable.

This decision only applies to those groups that follow the Medication Advisory Panel recommendations.

The MAP mandate is to provide a comprehensive review of medications to ensure the benefits offered are proven effective, medically necessary and cost affordable while ensuring plans remain Supplemental to Government.

If you have questions concerning benefit decisions, please contact your Sales Professional.

Detailed Pharmaceutical Decisions

Nucynta CR® (tapentadol) is a novel opioid analgesic indicated for the management of moderate to moderately severe pain in adults who require several days or more of continuous treatment. Chronic pain is a growing medical concern and is one of the most common medical complaints. Opioids are an important treatment option for chronic pain management. However, use is associated with significant adverse events, including gastrointestinal effects such as constipation.

Nucynta CR is supplied in controlled-release tablets ranging in strength from 50mg to 200mg. The main comparator is Oxycontin®. At the manufacturer's recommended dosing, costs of treatment with Nucynta and Oxycontin are similar. However, the costs could increase substantially depending on how Nucynta is utilized in the real world.

The MAP agree there are concerns over the long term effectiveness, safety and abuse potential as well as costs with Nucynta. Currently there are a number of analgesics on the market that are just as effective and less costly than Nucynta.

Decision: Declined
RAMQ: Under review for June 2012

Victrelis® / Victrelis Triple® and Incivek® (boceprevir and telaprevir) are all indicated for the treatment of Chronic Hepatitis C (CHC) genotype 1 infection, in combination with peginterferon alpha/ribavirin treatment. This is for adult patients with compensated liver disease, including cirrhosis, who have been untreated or have failed previous therapy.

CHC is a debilitating potentially life-threatening, but treatable and curable, disease caused by infection with the Hepatitis C virus. It is acquired most frequently through illicit drug use, blood transfusions (prior to 1992), tattooing and needle stick injury. In Canada, it is estimated there are approximately 250,000 individuals chronically infected. The aim of CHC treatment is viral eradication.

The MAP agrees that the addition of Victrelis/Incviek to current standard therapy (peginterferon and ribavirin) appears to shorten the duration of Hepatitis C treatment in some patients and is more effective at eradicating the infection.

Decision: Listed with Special Authorization on all plans.
RAMQ: Under review for Feb 2012

Xgeva® (denosumab) is a biologic product indicated for reducing the risk of developing skeletal-related events (SREs) in patients with bone metastases from breast cancer, prostate cancer, non-small cell lung cancer and other solid tumours. Xgeva is NOT indicated for reducing the risk of developing SREs in patients with multiple myeloma.

Patients with certain types of cancer may experience bone metastases as a result of tumour progression. Patients with bone metastases are at high risk of experiencing SREs, such as fractures, spinal cord compression, radiation therapy and surgery to bone. These are serious complications that can lead to significant clinical consequences.

Xgeva is supplied as a single use 120mg vial. The recommended dose is a single subcutaneous injection of 120mg once every four weeks. Estimated costs range from $8,685 to $9,205 annually.

The MAP agrees that Xgeva is effective in the treatment of bone metastases for patients who have failed other treatment options.

Decision:Listed with Special Authorization on all plans.
RAMQ: Under review for February 2012

Pharma Facts 2011

The Medication Advisory Panel provides a comprehensive review of medications to ensure the benefits offered in Medavie Blue Cross plans are proven effective, medically necessary and cost affordable with respect to the health outcomes.

During 2011, the Medication Advisory Panel successfully reviewed 29 new products: 11 medications were approved as regular benefits on open plans and Special Authorization where applicable, five with Special Authorization on all plans, one with a Supplemental to Government program and 12 were declined.

Through the In-House process 21 new products were reviewed: 13 were approved as regular benefits on open plans and Special Authorization where applicable, two were approved with a Supplemental to Government program, three were declined and three were included as *InGoodHealth*® Modules.

Decisions	MAP Reviews	In-House Reviews
Regular benefit	11	13
Declined	12	3
Special Authorization on all plans	5	N/A
Supplemental to Government	1	2
Inclusions to *InGoodHealth*		3

Benefit Update: Gardasil®

Gardasil is a vaccine that protects against infection from the human papillomavirus (HPV). HPV is associated with the development of genital warts and cervical, vulvular, vaginal and anal cancers. It was previously only approved for use in women for protection against genital warts and various cancers. As such, our drug adjudication system restricted the use of Gardasil to female claimants.

Since its approval, new clinical data shows Gardasil is safe and effective in protecting males between the ages of nine and 26 from developing genital warts and anal cancers. The National Advisory Committee on Immunization (NACI), a Canadian committee that makes recommendations to the Public Health Agency of Canada on immunization standards, has recently published a statement recommending the use of Gardasil in males. NACI has recognized that there is high level of clinical evidence to show Gardasil is safe and effective in preventing genital warts and anal cancer in males.

Based on the NACI recommendation and on additional clinical information submitted to us by the manufacturer, gender restrictions have been removed for Gardasil for plans that include vaccine coverage. Gardasil will now be covered for both males and females between the ages of nine and 26. This change was effective January 31, 2012.