

# Myeloma Medicines Applications

## A summary of events and the status of medicines applications for myeloma currently with Pharmac

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Despite advertising that Pharmac would be responding to the Health Select Committee (HSC) with regards to the myeloma petition at the Wednesday October 23rd HSC meeting, no oral feedback was provided. Pharmac submitted written responses to the HSC. Most of the time at the meeting was spent discussing forced generic switches (for epilepsy and depression) and the lack of availability of spinraza for SMA.

The specific status for myeloma medicines listed in the petition are summarised below. Beyond 'working within a fixed budget' and 'our clinical committees want more evidence', there was no explanation for the unacceptable delay to medicines funding.

1 outstanding application for daratumumab:

- Relapsed / refractory (in combination with bortezomib): Deferred since April 2018 awaiting more clinical evidence of efficacy. CaTSOP (the cancer subcommittee of Pharmac) reviewed additional long-term evidence for daratumumab on Friday 18 October 2019, however minutes are not yet available. Daratumumab will not be prioritised until the clinical committee deem the evidence sufficient.

1 outstanding application for carfilzomib:

- Relapsed or refractory myeloma: Assessed. Assessed February 2019 (low priority). Awaiting a ranking. Pharmac state they are working to compare options (since February 2019).

1 outstanding application for pomalidomide

- Relapsed or refractory myeloma: Ranked in September 2017. Nothing has changed (publicly) since then. The application received a low priority.

4 outstanding applications for lenalidomide:

- Maintenance (post SCT): Ranked December 2018. Medium priority. No public update since December 2018.
- First line for SCT eligible: Deferred in April 2018 pending more clinical evidence.
- First line (grade 3 or greater pre-existing neuropathy): Assigned medium to high priority and listed as under Pharmac assessment. According to Pharmac, patients are accessing via NPPA (Named Patient Pharmaceutical Assessment)
- First-line SCT ineligible: Ranked December 2018. Advised to fund only if cost neutral to the health-sector compared with an already funded treatment the same or similar benefits. No public update since December 2018.

Bortezomib expansion (retreatment, maintenance) was not included in the Pharmac update to the HSC, however a consultation posted by Pharmac the day before the HSC briefing is proposing widened access. This is likely to be under the tender process and will probably be with a generic. There is no guarantee it will occur, although if it does, there may be a press release from Pharmac celebrating what a positive move this is for myeloma and take the heat off them with all of the outstanding applications above. Still not good enough.

Pharmac has not received applications for elotuzumab or ixazomib.