Conitec

Recomendation report

Nº 537
JULY /2020

DRUGS

Tofacitinib citrate for the treatment of moderate to severe active psoriatic arthritis in adult patients with intolerance or treatment failure with synthetic or biological disease-modifying antirheumatic drugs (DMARDs)

Brasília – DF
2020

Technology: Tofacitinib Citrate (Xeljanz®).

Indication: Treatment of moderate to severe active psoriatic arthritis in adult patients who do not respond or are intolerant to previous treatment with synthetic or biological disease-modifying antirheumatic drugs (DMARDs).

Applicant: Pfizer Laboratories Ltd. (Brazil).

Background: Psoriatic arthritis (PsA) is an inflammatory joint disease associated with psoriasis that belongs to the group of spondyloarthritis, with skin and joint manifestations. Its prevalence is approximately 1 to 2 per 1,000 in the general population, and about 30% of patients with psoriasis have PsA. On physical examination, stress pain, joint line tenderness, and effusions in the affected joints are present, often in an asymmetric distribution. The treatment recommended in the Clinical Protocol and Therapeutic Guidelines for Psoriatic Arthritis, and available in the Brazilian Public Health System (SUS), is based on nonsteroidal anti-inflammatory drugs, glucocorticoids, synthetic and biological disease-modifying antirheumatic drugs (DMARDs), and cytokine inhibitor anti-interleukin (IL)-17.

Question: Is tofacitinib effective and safe for the treatment of moderate to severe active psoriatic arthritis in adult patients who do not respond or are intolerant to previous treatment with synthetic or biological DMARDs?

Scientific evidence: Two phase III randomized controlled trials were selected, which evaluated the efficacy and safety of tofacitinib in patients previously treated with synthetic disease-modifying antirheumatic drugs (DMARDs) and anti-TNF. In the study with patients previously treated with anti-TNF, ACR50 response rates at month 3 were 15% for placebo, 30% for tofacitinib 5 mg ($p = 0.003$), and 28% for tofacitinib 10 mg ($p = 0.007$). In the study with patients previously treated with synthetic DMARDs, ACR50 response rates at month 3 were 10% for placebo, 30% for tofacitinib 5 mg, and 42% for tofacitinib 10 mg ($p < 0.001$ for both comparisons).

Economic evaluation: The applicant submitted a cost-minimization analysis based on the two studies of indirect comparison showing that tofacitinib demonstrated similar effectiveness to its comparators. The annual cost of treatment per patient was estimated at BRL 11,074.10 considering the price of tofacitinib proposed by the applicant. In relation to the comparators, the incorporation of tofacitinib could result in cost savings ranging from BRL 1,336.74 (compared with adalimumab) to BRL 14,940.94 (compared with infliximab).

Budget impact analysis: In all proposed scenarios, the use of tofacitinib would result in cost savings, and the budget impact of its incorporation at the price proposed by the applicant was estimated to be BRL 41.4 million in one year, ranging from BRL 9.1 million to BRL 64.1 million; and BRL 240.6 million in five years, ranging from BRL 52.8 million to BRL 372.1 million. The population estimated by the method of measured demand considered the entire population of patients with PsA, not only patients with moderate to severe PsA. Therefore, these values were considered to be overestimated.

International recommendations: The submission of tofacitinib for review by the Canadian Agency for Drugs and Technologies in Health - CADTH (Canada) was cancelled on October 9th, 2019. The National Institute for Health and Care Excellence - NICE (England) has recommended its use as a treatment option under specific conditions.

Technology horizon scanning: Six potential drugs were identified for the treatment of moderately to severely active psoriatic arthritis in patients with inadequate response or intolerance to previous treatment with synthetic or biological DMARDs.

Considerations: Tofacitinib citrate is already available in SUS for other indications. The little scientific evidence available (possibly because only recently it has been approved by regulatory agencies for psoriatic arthritis), which addressed the structured question proposed in this report, showed that tofacitinib demonstrated similar efficacy to biological DMARDs at a lower cost. Its oral route of administration improves adherence to treatment in most cases, reducing annual treatment costs. It should be used in combination with synthetic DMARDs. The currently available evidence about the efficacy and safety of tofacitinib for the treatment of psoriatic arthritis is based on only two phase III randomized controlled trials, with an unclear risk of bias and a weak recommendation in favour of this technology.

Initial Recommendation: The members of CONITEC's plenary session present at the 85th Ordinary Meeting, on February 4th and 5th, 2020, decided that the subject matter should be made available in a public consultation with a favourable preliminary recommendation to the incorporation of tofacitinib, in the scope of SUS, for the treatment of moderate to severe active psoriatic arthritis in adult patients who do not respond or are intolerant to previous treatment with synthetic or biological disease-modifying antirheumatic drugs (DMARDs). Evidence showed that tofacitinib demonstrated similar efficacy to the drugs available in SUS, and as an oral medication it may result in greater adherence to treatment. Moreover, its incorporation could result in cost savings in the scenarios considering other biological drugs already incorporated into SUS for psoriatic arthritis.

Public consultation: A total of 103 contributions were received, of which 18 were technical-scientific contributions, and 85 were experience or opinion contributions. Only two of them disagreed with the preliminary recommendation, but no reason was given. There were no additional references that could change the analysis of the evidence.

Final Recommendation: The CONITEC's members present at the 88th Ordinary Meeting, on July 7th, 2020, unanimously decided to recommend the incorporation of tofacitinib citrate for the treatment of moderate to severe active psoriatic arthritis in adult patients with intolerance or treatment failure with synthetic or biological disease-modifying antirheumatic drugs (DMARDs), according to the Clinical Protocol and Therapeutic Guidelines of the Ministry of Health of Brazil. The Deliberation Record No. 529/2020 was signed.

Decision: To incorporate tofacitinib citrate for the treatment of moderate to severe active psoriatic arthritis in adult patients with intolerance or treatment failure with synthetic or biological disease-modifying antirheumatic drugs (DMARDs), according to the Clinical Protocol and Therapeutic Guidelines of the Ministry of Health of Brazil, in the scope of SUS, according to Ordinance No. 28, published in the Official Gazette of the Federal Executive No. 160, Section 1, page 117, on August 20th, 2020.