

**Baricitinib** (new therapeutic indication: polyarticular juvenile idiopathic arthritis, RF+ or RF-polyarticular and extended oligoarticular, ≥ 2 years)

Resolution of: 2 May 2024 Valid until: unlimited

Entry into force on: 2 May 2024

Federal Gazette, BAnz AT 19 06 2024 B2

## New therapeutic indication (according to the marketing authorisation of 15 September 2023):

Baricitinib is indicated for the treatment of active juvenile idiopathic arthritis in patients 2 years of age and older who have had an inadequate response or intolerance to one or more prior conventional synthetic or biologic DMARDs:

 Polyarticular juvenile idiopathic arthritis (polyarticular rheumatoid factor positive [RF+] or negative [RF-], extended oligoarticular).

Baricitinib may be used as monotherapy or in combination with methotrexate.

### Therapeutic indication of the resolution (resolution of 2 May 2024):

See new therapeutic indication according to marketing authorisation.

- Additional benefit of the medicinal product in relation to the appropriate comparator therapy
- a) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more conventional synthetic DMARDs

#### Appropriate comparator therapy for baricitinib, alone or in combination with MTX:

 a bDMARD (adalimumab or etanercept or golimumab or tocilizumab) in combination with MTX; if necessary, as monotherapy, taking into account the respective authorisation status in the case of MTX intolerance or unsuitability

## Extent and probability of the additional benefit of baricitinib compared to the appropriate comparator therapy

An additional benefit is not proven.

b) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more biologic DMARDs

Appropriate comparator therapy for baricitinib, alone or in combination with MTX:

 a bDMARD (abatacept or adalimumab or etanercept or golimumab or tocilizumab) in combination with MTX; if necessary, as monotherapy, taking into account the respective authorisation status in case of MTX intolerance or unsuitability, depending on prior therapy

# Extent and probability of the additional benefit of baricitinib compared to the appropriate comparator therapy

An additional benefit is not proven.

### Study results according to endpoints:1

a) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more conventional synthetic DMARDs

No data available.

#### Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	Ø	No data available.
Morbidity	Ø	No data available.
Health-related quality	Ø	No data available.
of life		
Side effects	Ø	No data available.

#### **Explanations:**

↑: statistically significant and relevant positive effect with low/unclear reliability of data

 $\downarrow$ : statistically significant and relevant negative effect with low/unclear reliability of data

个个: statistically significant and relevant positive effect with high reliability of data

 $\downarrow \downarrow$ : statistically significant and relevant negative effect with high reliability of data

∴: no statistically significant or relevant difference

 $\emptyset$ : No data available.

n.a.: not assessable

b) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more biologic DMARDs

No data available.

<sup>1</sup> Data from the dossier assessment of the Institute for Quality and Efficiency in Health Care (IQWiG) (A23-108) unless otherwise indicated.

#### Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	Ø	No data available.
Morbidity	Ø	No data available.
Health-related quality of life	Ø	No data available.
Side effects	Ø	No data available.

#### **Explanations:**

↑: statistically significant and relevant positive effect with low/unclear reliability of data

↓: statistically significant and relevant negative effect with low/unclear reliability of data

个个: statistically significant and relevant positive effect with high reliability of data

 $\downarrow \downarrow$ : statistically significant and relevant negative effect with high reliability of data

 $\emptyset$ : No data available.

n.a.: not assessable

#### 2. Number of patients or demarcation of patient groups eligible for treatment

a) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more conventional synthetic DMARDs

approx. 990 - 1,020 patients

b) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more biologic DMARDs

approx. 380 - 390 patients

### 3. Requirements for a quality-assured application

The requirements in the product information are to be taken into account. The European Medicines Agency (EMA) provides the contents of the product information (summary of product characteristics, SmPC) for Olumiant (active ingredient: baricitinib) at the following publicly accessible link (last access: 10 January 2024):

https://www.ema.europa.eu/en/documents/product-information/olumiant-epar-product-information en.pdf

Treatment with baricitinib should only be initiated and monitored by doctors experienced in the therapy of polyarticular juvenile idiopathic arthritis.

In accordance with the European Medicines Agency (EMA) requirements regarding additional risk minimisation measures, the pharmaceutical company must provide training material that contains information for medical professionals and patients (incl. patient identification card).

In particular, the training material contains information and warnings on the risk of serious and opportunistic infections including tuberculosis and herpes zoster. It also points out the need for an effective contraceptive method.

#### 4. Treatment costs

#### Annual treatment costs:

a) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more conventional synthetic DMARDs

Designation of the therapy	Annual treatment costs/ patient				
Medicinal product to be assessed:					
Baricitinib Methotrexate <sup>2</sup> Additionally required SHI services Total monotherapy Total combination therapy	€ 14,205.65 € 181.38 - € 610.92 € 106.40 € 14,312.05 € 14,493.43 - € 14,922.97				
Appropriate comparator therapy:					
Adalimumab Methotrexate <sup>2</sup> Additionally required SHI services Total monotherapy Total combination therapy	€ 6,281.23 - € 12,428.82 € 181.38 - € 610.92 € 106.40 € 6,387.63 - € 12,535.22 € 6,998.55 - € 12,716.60				
Etanercept Additionally required SHI services Total	€ 5,064.55 - € 12,405.01 € 106.40 € 5,170.95 - € 12,511.41				
Golimumab Methotrexate <sup>2</sup> Additionally required SHI services Total	€ 9,584.20 - € 20,901.60 € 181.38 - € 610.92 € 106.40 € 10,301.52 - € 21,189.38				
Tocilizumab Methotrexate <sup>2</sup> Total monotherapy Total combination therapy	€ 6,235.91 - € 11,203.77 € 181.38 - € 610.92 € 6,235.91 - € 11,203.77 € 6,846.83 - € 11,385.15				

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 April 2024)

<sup>&</sup>lt;sup>2</sup> For the calculation of the annual treatment costs, the parenteral dosage form is used to represent the lower limit (children ≥ 2 years).

b) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more biologic DMARDs

Designation of the therapy	Annual treatment costs/ patient			
Medicinal product to be assessed:				
Baricitinib Methotrexate <sup>2</sup> Additionally required SHI services Total monotherapy Total combination therapy	€ 14,205.65 € 181.38 - € 610.92 € 106.40 € 14,312.05 € 14,493.43 - € 14,922.97			
Appropriate comparator therapy:				
Abatacept Methotrexate <sup>2</sup> Additionally required SHI services Total monotherapy Total combination therapy	€ 8,678.04 - € 20,942.07 € 181.38 - € 610.92 € 106.40 € 8,784.44 - € 21,048.47 € 9,395.36 - € 21,229.85			
Adalimumab Methotrexate <sup>2</sup> Additionally required SHI services Total monotherapy Total combination therapy	€ 6,281.23 - € 12,428.82 € 181.38 - € 610.92 € 106.40 € 6,387.63 - € 12,535.22 € 6,998.55 - € 12,716.60			
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Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 April 2024)

#### Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Tocilizumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 100	1	13.0	€ 1300.00

Designation of medicinal products with new active ingredients according to Section 35a, paragraph 3, sentence 4 SGB V that can be used in a combination therapy with the assessed medicinal product

In the context of the designation of medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V, the following findings are made:

- a) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more conventional synthetic DMARDs
  - No medicinal product with new active ingredients that can be used in a combination therapy and fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.
- b) Children and adolescents 2 years of age and older with active polyarticular juvenile idiopathic arthritis (rheumatoid factor positive [RF+] or negative [RF-] polyarthritis and extended oligoarthritis), who have had an inadequate response or intolerance to one or more biologic DMARDs
  - No medicinal product with new active ingredients that can be used in a combination therapy that fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.

The designation of combinations exclusively serves the implementation of the combination discount according to Section 130e SGB V between health insurance funds and pharmaceutical companies. The findings made neither restrict the scope of treatment required to fulfil the medical treatment mandate, nor do they make statements about expediency or economic feasibility.