CEDAC FINAL RECOMMENDATION and REASONS for RECOMMENDATION

TENOFOVIR/EMTRICITABINE REQUEST FOR ADVICE (Truvada® – Gilead Sciences Canada, Inc.)

This recommendation supersedes the CEDAC recommendation for this drug and indication dated October 25, 2006.

Description:

Truvada is a fixed dose combination of two nucleoside/nucleotide reverse transcriptase inhibitors and is approved for the treatment of HIV-1 infection in combination with other antiretroviral agents in patients 18 years of age and older. The review of tenofovir/emtricitabine (Truvada) by the Common Drug Review was in response to a Request for Advice from the Advisory Committee on Pharmaceuticals (ACP). The ACP asked if the recommendation previously issued by the Canadian Expert Drug Advisory Committee (CEDAC) for Truvada (tenofovir/emtricitabine) is still current, given the recent CEDAC recommendation for Atripla (tenofovir/emtricitabine/efavirenz).

Dosage Forms:

Tablet containing tenofovir disoproxil fumarate 300 mg and emtricitabine 200 mg. The recommended dose is one tablet taken once daily.

Recommendation:

The Canadian Expert Drug Advisory Committee recommends that Truvada be listed as a dual nucleoside/nucleotide option for treatment of HIV patients where the virus is susceptible to both these agents and efavirenz is not indicated due to adverse effects or antiretroviral resistance.

Reasons for the Recommendation:

1. The Committee considered the data from an open label randomized controlled trial (RCT) of 48 weeks duration in treatment naïve patients that compared a regimen of zidovudine, lamivudine and efavirenz, against a combination of tenofovir, emtricitabine and efavirenz. At 48 weeks the combination of tenofovir, emtricitabine and efavirenz was associated with statistically significant improvements in patients with HIV-1 RNA levels <400 or <50 copies/mL (number needed to treat [NNT] of 9 and 11 respectively).

2. There were fewer withdrawals due to adverse effects in the tenofovir/emtricitabine arm and this was primarily due to a lower incidence of anemia.

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3. Truvada costs $25.05 per day, which is similar in cost to a regimen using tenofovir and lamivudine ($26.19 per day).

4. The Committee felt that this Truvada recommendation is congruent with the recent CEDAC recommendation for Atripla.

Summary of Committee Considerations:

The Committee considered a systematic review, which included one open label RCT of tenofovir, emtricitabine and efavirenz, given either as the fixed dose combination or as individual components, in adult patients infected with HIV-1. The 48 week data is summarized above. After 144 weeks of follow-up, there was a statistically significant difference in the number of subjects with HIV-1 RNA levels <400 copies/mL (NNT=8) but not for HIV-1 RNA levels <50 copies/mL. More patients in the zidovudine, lamivudine and efavirenz group (6%) discontinued therapy due to virologic failure than in the tenofovir, emtricitabine and efavirenz group (2%). There were fewer withdrawals due to adverse effects in the tenofovir, emtricitabine and efavirenz arm and this was primarily due to a lower incidence of anemia.

Of Note:

1. Both published and unpublished data were reviewed and taken into consideration in making this recommendation.
2. The Committee was aware of recent clinical information on the efficacy and adverse effects of other agents used to treat HIV that are considered comparators to Truvada.

Background:

CEDAC provides formulary listing recommendations to publicly funded drug plans. Recommendations are based on an evidence-based review of the medication's effectiveness and safety and an assessment of its cost-effectiveness in comparison to other available treatment options. For example, if a new medication is more expensive than other treatments, the Committee considers whether any advantages of the new medication justify the higher price. If the recommendation is not to list a drug, the Committee has concerns regarding the balance between benefit and harm for the medication, and/or concerns about whether the medication provides good value for public drug plans.

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