

Republic of the Philippines Department of Health

OFFICE OF THE SECRETARY

MEDICINES RECOMMENDED FOR INCLUSION AND NON-INCLUSION IN THE PHILIPPINE NATIONAL FORMULARY (PNF)

As of 30 September 2022, the Health Technology Assessment Council (HTAC) has completed the evidence appraisal of (1) *abiraterone acetate* and (2) *enzalutamide* which are both indicated for individuals with metastatic castration-resistant prostate cancer.

The HTAC hereby makes public its **preliminary recommendations on abiraterone acetate in combination with prednisone and enzalutamide,** to wit:

	Preliminary HTAC Recommendation
Abiraterone acetate (250mg tablet) in combination with Prednisone	The HTAC recommends the government financing of abiraterone acetate (250mg tablet) in combination with prednisone (PD) as first-line treatment or second-line treatment for metastatic castration-resistant prostate cancer (mCRPC) through its inclusion in the PNF due to the following:
	 Abiraterone acetate in combination with PD is part of standard of care for treatment of mCPRC as reported in the Philippine Clinical Practice Guideline for the Diagnosis and Management of Prostate Cancer developed by National Kidney and Transplant Institute (NKTI).
	 Evidence shows that the use of abiraterone acetate in combination with PD has better efficacy compared to placebo, prednisolone and bicalutamide in terms of prolonging the overall survival (3.9 to 4.2 months), progression-free survival (PFS) and reducing prostate-specific antigen (PSA) progression.
	 Abiraterone acetate in combination with PD has an acceptable safety profile, given that it has lower incidence of grade > 3 adverse events. However, HTAC noted that it has a higher incidence of cardiac disorders, increased alanine aminotransferase and hypertension when compared to placebo.
	o Abiraterone acetate in combination with PD has lower associated medical cost and total cost per treatment compared to enzalutamide. The total cost of treatment regimen per patient for using abiraterone acetate in combination with prednisone will cost ₱779,447.58 while using enzalutamide will cost ₱1,308,160.00. The government will incur ₱31.88 B for implementing abiraterone acetate in combination with PD while enzalutamide will cost ₱53.51 B. The total cost savings for

implementing abiraterone acetate in combination with PD compared to enzalutamide is ₱21.63 B based on 3-year budget impact analysis.

 The cost-effectiveness of abiraterone acetate in combination with PD cannot be ascertained due to lack of evidence that could be adapted in the local setting.

Enzalutamide (40mg soft gel capsule)

The HTAC does not recommend the government financing and inclusion of *enzalutamide* (40mg soft gel capsule) for mCPRC in the Philippine National Formulary (PNF). Although enzalutamide shows better efficacy compared to placebo, prednisolone, and bicalutamide as well as an acceptable safety profile compared to placebo, the costing and budget impact analyses show that the use of enzalutamide is generally expensive. The total cost of treatment regimen per patient is ₱1,308,160.00 and the government will need to spend ₱53.51 B to implement enzalutamide. On the other hand, the government may opt to use abiraterone acetate in combination with PD as a cheaper alternative for the treatment of patients with mCRPC.

Moreover, the cost effectiveness of enzalutamide *cannot be ascertained* due to lack of evidence that could be adapted in the local setting.

Supporting studies that informed the recommendation of HTAC may be found in the evidence summary accessible through this link https://bit.ly/HTACPrelimRecomm_AbiandEnza. All comments, inputs, and/or appeals may be submitted until 18 October 2022, for the consideration of the HTAC, through email at https://bit.ly/htacprelimRecomm_AbiandEnza. All

Please use the prescribed form for appeals which is accessible through this link: Please use the prescribed form for appeals which is accessible through this link <a href="https://ht

Should you wish to submit hard copies, you may drop them off at the 4th floor, Philippine Blood Disease, and Transfusion Center, Lung Center Compound, Quezon Avenue, Quezon City.

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