ALVESCO[®] ▼

For the treatment of persistent asthma in adult and adolescent patients aged 12 years and over

Corticosteroids for the treatment of chronic asthma in adults and children aged 12 years and over

Response to the assessment report produced by the Peninsula Technology Assessment group and Southampton Health Technology Assessments Centre

ALTANA Pharma – a Nycomed company

28 February 2007

Having had the opportunity to review the assessment report, *ICS and LABAs for the treatment of chronic asthma in adults and children aged 12 years and over: Systematic review and economic analysis*, carried out on behalf of NICE, we would like to draw the Appraisal Committee's attention to the following points regarding Alvesco® (ciclesonide, ALTANA Pharma – a Nycomed company).

Size of evidence base for ciclesonide

In the assessment report, the reviewers expressed concerns regarding the size of the evidence base
for newer inhaled corticosteroids (ICSs), including ciclesonide, compared with that for older
compounds.

The active controlled studies showed that ciclesonide administered once daily was comparable to equivalent doses of fluticasone propionate (FP; 1:1), budesonide (BUD; 1:2) and beclometasone dipropionate (BDP; 1:2) given twice daily, for improving lung function, reducing the incidence of asthma symptoms and reducing the use of rescue medication in patients with mild-to-severe, persistent asthma. ⁴⁻¹⁶ In addition, ciclesonide was shown to reduce the need for oral steroids in patients with severe steroid-dependent asthma and to be as effective as short courses of oral steroids during induced acute asthma exacerbations. ¹⁷

Comparative studies of ciclesonide versus FP, BUD and BDP

Another concern expressed by the reviewers was the comparability between the ciclesonide and comparator doses used in the active controlled studies. We would respectfully draw your attention to section 5.2 of our original application, which summarises the results of 22 randomised, controlled studies comparing ciclesonide with FP, BUD and BDP, showing a consistent comparability of 1:1 between ciclesonide and FP, 1:2 between ciclesonide and BUD, and 1:2 between ciclesonide and BDP.

Ciclesonide versus FP	
	A safety study (Bernstein <i>et al</i>) ²⁵

Ciclesonide versus BUD

Ciclesonide versus BDP

In study by Adachi *et al*,³¹ a daily ciclesonide dose of 640 μg was found to be superior to BDP 800 μg in maintaining morning peak expiratory flow (PEF) and reducing use of rescue medication and asthma scores. In the same study, Ciclesonide 320 μg daily was as effective as BDP 800 μg.

Please note that the 80 μg, 160 μg, 320 μg, 640 μg and 1,280 μg doses of ciclesonide are ex-actuator doses delivered from the mouthpiece of the pressurised MDI (pMDI) device, in accordance with the

or 320 µg twice daily resulted in an incidence of oropharyngeal side-effects similar to placebo and

Safety and tolerability of ciclesonide

100 μg , 200 μg , 400 μg , 800 μg and 1,600 μg respectively.

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European Union (EU) directives for inhaled formulations.³² These are equivalent to metered doses of

Ciclesonide high-dose licence extension

The recommended dose of ciclesonide is 160 μ g once daily, which leads to asthma control in the majority of patients. However, in light of the very favourable safety and tolerability data for ciclesonide outlined above, the European Medicines Agency (EMEA) has recently granted a licence extension for ciclesonide in the EU, under which daily doses of up to 640 μ g can be administered for up to 12 weeks in patients who need increased anti-inflammatory treatment.

Once-daily administration of ciclesonide

We were surprised to note that the review did not discuss the matter of once-daily versus twice-daily administration of ICSs, since it has been shown that the complexity of a chronic treatment regimen may have a negative impact on patient adherence.³⁴ Indeed, a retrospective case control study showed significant improvements in treatment compliance in a population of 222 adult asthma patients following a switch from a twice-daily ICS to a once-daily ICS.³⁵ A comprehensive programme of randomised, controlled studies has demonstrated the clinical efficacy of ciclesonide administered once daily, and the current UK product licence for ciclesonide is based on this regimen. Once-daily administration of ciclesonide, either in the morning or in the evening, is likely to be more convenient for the patient than twice daily administration. This may help to improve treatment compliance – and thus overall asthma control – compared with twice-daily regimens.

Cost-effectiveness

In the assessment report, the reviewers estimated the mean annual cost per patient at £87. This, however, was based on the pack price of ciclesonide 80 μ g (£0.238 per puff) as opposed to the pack price of ciclesonide 160 μ g (£0.28 per puff), which results in a range of mean annual costs between £87 and £102, dependent on the dose used, as shown in the appendix to this response document.

The reviewers noted that the low cost of ciclesonide was strongly dependent on the simplistic, assumed dose-equivalence ratio of 1:2 between ciclesonide and BDP. This issue has been discussed above, along with further reference to the clinical evidence on which the justification for a cost-minimisation analysis was based. Furthermore, the reviewers' finding that the safety profile across ICSs was essentially similar fails to appreciate the likelihood that the evidence for effectiveness of medication in everyday clinical practice may be compromised relative to findings from clinical trials.

In section 6.4.1, the reviewers highlight the nature of the research questions relating to the cost-effectiveness assessment. The ciclesonide cost-minimisation analysis clearly helps us to answer the first of these questions: 'At low doses (200–800 µg BDP per day or equivalent), which is the most cost-effective of the five ICSs? (Step 2 of the guidelines)' The rationale for including the cost comparison between ciclesonide and combination therapy was to highlight the cost differential of potentially inappropriate management of patients at Step 2.

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Appendix. Costs of inhaled corticosteroid therapies for asthma in the UK

Brand name Generic name Celevice name Seleviced large Se				Strength (amount	1	Pack size			Daily treatment cost		
Emerican process							NHS pack	Price/puff		Cost/30	Cost/365
Beckmanner Beckmanner East-Breamer 50 MMS Dec 2006 200 4.34 0.0217 0.17 5.21 0.350 0.515 7.510 7.5	Brand name	Generic name	Device name		Reference				equivalent dose (£)		
Becksonnel Becksonnelsanore Eas-Pieralhe 100 MIMS De-2006 200 10.30 0.0515 0.21 6.18 75.19 75.19 Recksonnel Becksonnel Becksonnel Inhalter 100 MIMS De-2006 200 1.70 0.0018 6.00 2.17 6.21 25.70 Recksonnel Becksonnelsanore Inhalter 100 MIMS De-2006 200 2.70 0.0018 6.00 2.00 1.80 2.00 2.00 2.00 2.00 2.00 2.00 2.00 2											
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Becodisks Beclometasone Diskhaler 100 MIMS Dec 2006 120 1200 0.1000 0.40 1200 14600 Becodisk Beclometasone Diskhaler 200 MIMS Dec 2006 120 22.277 0.1006 0.38 11.29 137.30 120 140	Deciazone	Decionietasone	iiiiaici	200	WIIWG Dec 2000	200	0.11	0.0400		2.40	25.00
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Ammabec											
Becolide Becometasone											
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Becofide Beckmetasone Inhaler 50 MMS Dec 2006 200 1.79 0.0090 0.07 2.15 26.13	Asmabec	Beclometasone	Clickhaler	100	MIMS Dec 2006	200	9.81	0.0491		5.89	/1.61
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