Disease Modifying Therapies for Relapsing-Remitting and Primary Progressive Multiple Sclerosis: Effectiveness and Value

Questions for Deliberation: February 16, 2017 Public Meeting

Relapsing-Remitting Multiple Sclerosis: Clinical Evidence

Oral Agents

1. For patients with relapsing-remitting multiple sclerosis (RRMS), is the evidence adequate to demonstrate that the net health benefit of dimethyl fumarate (Tecfidera®, Biogen Inc.) is greater than that of teriflunomide 14 mg (Aubagio®, Sanofi-Genzyme, Inc.)?
   Yes  No

2. For patients with RRMS, is the evidence adequate to demonstrate that the net health benefit of fingolimod (Gilenya®, Novartis, Inc.) is greater than that of teriflunomide 14 mg?
   Yes  No

3. For patients with RRMS, is the evidence adequate to distinguish the net health benefit between dimethyl fumarate and fingolimod?
   Yes  No

Emerging Agents

4. For patients with RRMS, is the evidence adequate to demonstrate that the net health benefit of daclizumab (Zinbryta®, Biogen Inc. and AbbVie Inc.) is greater than that of dimethyl fumarate or fingolimod?
   Yes  No

5. For patients with RRMS, is the evidence adequate to demonstrate that the net health benefit of daclizumab is greater than that of generic glatiramer acetate 20 mg (Glatopa®, Sandoz, Inc.)?
   Yes  No

6. For patients with RRMS, is the evidence adequate to demonstrate that the net health benefit of ocrelizumab (Ocrevus®, Roche Genentech Inc.) is greater than that of generic glatiramer acetate 20 mg?
   Yes  No
7. For patients with RRMS, is the evidence adequate to demonstrate that the net health benefit of treatment with interferon beta-1a 44 mcg (Rebif®, EMD Serono Inc.) is greater than that of treatment with interferon beta-1a 30 mcg (Avonex®, Biogen Inc.)?  
   Yes  No

Relapsing-Remitting Multiple Sclerosis: Long-term Value for Money

8. Given the available evidence for patients with RRMS, what is the long-term value for money of treatment with daclizumab versus treatment with generic glatiramer acetate 20 mg?  
   a. Low  b. Intermediate  c. High

Primary-Progressive Multiple Sclerosis: Clinical Evidence

9. For patients with primary-progressive multiple sclerosis (PPMS), is the evidence adequate to demonstrate that the net health benefit of treatment with ocrelizumab is greater than that of best supportive care?  
   Yes  No