Vesicular Monoamine Transporter 2 (VMAT2) Inhibitors for Tardive Dyskinesia: Effectiveness and Value

Questions for Deliberation and Voting: December 05, 2017 Public Meeting

These questions are for the deliberation of the New England CEPAC voting body at the public meeting.

Patient Population for all questions: Adults ages 18 and older with symptoms of tardive dyskinesia for at least three months and history of use of dopamine receptor blocking agents (DRBAs).

Clinical Evidence

1. Is the evidence adequate to demonstrate a positive net health benefit from treating patients with TD with valbenazine?
   
   Yes    No

2. Is the evidence adequate to demonstrate a positive net health benefit from treating patients with TD with deutetrabenazine?
   
   Yes    No

3. Is the evidence adequate to demonstrate a positive net health benefit from treating patients with TD with tetrabenazine?
   
   Yes    No

4. Is the evidence adequate to distinguish between the net health benefit of valbenazine and deutetrabenazine in the treatment of TD?
   
   Yes    No
Other Benefits and Contextual Considerations

5. Does treating patients with one of the new FDA approved drugs offer one or more of the following “other benefits”? (select all that apply)

- This intervention provides significant direct patient health benefits that are not adequately captured by the QALY.
- This intervention offers reduced complexity that will significantly improve patient outcomes.
- This intervention will reduce important health disparities across racial, ethnic, gender, socioeconomic, or regional categories.
- This intervention will significantly reduce caregiver or broader family burden.
- This intervention offers a novel mechanism of action or approach that will allow successful treatment of many patients who have failed other available treatments.
- This intervention will have a significant impact on improving return to work and/or overall productivity.

6. Are any of the following contextual considerations important in assessing the new FDA approved drugs’ long-term value for money in patients with tardive dyskinesia? (select all that apply)

- This intervention is intended for the care of individuals with a condition of particularly high severity in terms of impact on length of life and/or quality of life.
- This intervention is intended for the care of individuals with a condition that represents a particularly high lifetime burden of illness.
- This intervention is the first to offer any improvement for patients with this condition.
- Compared to usual care, there is significant uncertainty about the long-term risk of serious side effects of this intervention.
- Compared to usual care, there is significant uncertainty about the magnitude or durability of the long-term benefits of this intervention.