

# Exploring Long-Term Durability Assumptions In Cost-Effectiveness Models Of Cell And Gene Therapies

## A Study Of 39 Health Technology Assessments

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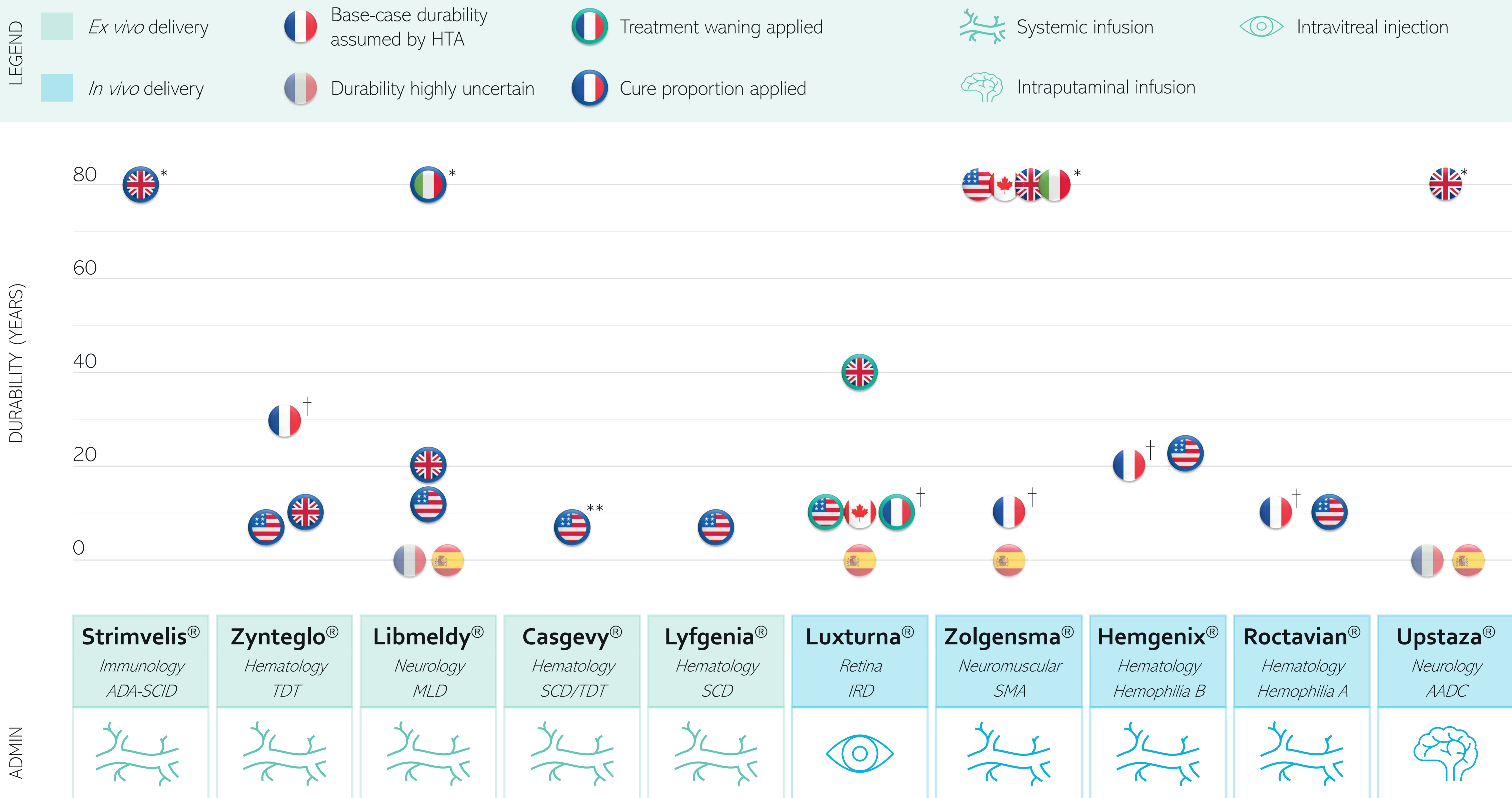
Rare genetic diseases pose a global challenge, with a high burden and few effective, long-term therapies. Cell and Gene Therapies (CGTs) offer a potentially durable solution, but immature data from small trials complicate Health Technology Assessments (HTAs). Long-term durability is a key driver of CGT value. An analysis of current HTA assumptions provides valuable benchmarks for assessing the long-term value of CGTs.

**7** HTA bodies from the UK, France, Germany, Italy, Spain, Canada, and USA

**10** Strimvelis<sup>®</sup>, Zynteglo<sup>®</sup>, Libmeldy<sup>®</sup>, Casgevy<sup>®</sup>, Lyfgenia<sup>®</sup>, Luxturna<sup>®</sup>, Zolgensma<sup>®</sup>, Hemgenix<sup>®</sup>, Roctavian<sup>®</sup>, Upstaza<sup>®</sup>

**39** Health Technology Assessments reviewed

### LONG-TERM DURABILITY ASSUMPTIONS OF RARE DISEASE CELL & GENE THERAPY IN HTAs



### LONG-TERM DURABILITY ASSUMPTIONS PER HTA BODY: SUMMARY

HTA	AIFA	NICE	CADTH	ICER	HAS <sup>§</sup>	G-BA	AEMPS
Number of assessments	4	6	2	9**	7	7	4
Mean durability assumed (yrs)	80* (n=2)	52 (n=6)	45 (n=2)	18 (n=8)	16 (n=5)	‡	‡

Notable variability exists in the long-term durability assumptions of rare disease CGTs across HTAs. Yet, among 23 HTAs, the mean durability assumed was around 35 years. Further analysis is needed to unearth the key factors influencing these assumptions.

\*Lifetime durability - 80 years used as maximum to calculate means. \*\*Assessment of Casgevy in SCD and TDT considered as two indications; † End of model horizon; ‡ Germany & Spain did not perform formal cost-effectiveness analysis on any of the rare CGTs; § HAS issued economic analyses for two HTAs after data collection for this abstract. This data is included in the poster.  
 Note: Strimvelis<sup>®</sup> (autologous CD34+ enriched cell fraction), Zynteglo<sup>®</sup> (betibeglogene autotemcel), Libmeldy<sup>®</sup>/Lenmeldy<sup>™</sup> (atidarsagene autotemcel), Casgevy<sup>®</sup> (exagamglogene autotemcel), Lyfgenia<sup>®</sup> (lovotibeglogene autotemcel), Luxturna<sup>®</sup> (voretigene neparovvec), Zolgensma<sup>®</sup> (onasemnogene abeparvovec), Hemgenix<sup>®</sup> (etranacogene dezaparvovec), Roctavian<sup>®</sup> (valoctocogene roxaparvovec), Upstaza<sup>®</sup> (Eltadocogene exuparvovec).  
 Abbreviations: AADC: Aromatic L-Amino Acid Decarboxylase; ADA-SCID: Adenosine Deaminase Deficiency Severe Combined Immunodeficiency; AEMPS: Agencia Española de Medicamentos y Productos Sanitarios; AIFA: Agenzia Italiana del Farmaco; CADTH: Canadian Agency for Drugs and Technologies in Health; G-BA: Gemeinsamer bundesausschuss; HAS: Haute Autorité de Santé; ICER: Institute for Clinical and Economic Review; IRD: inherited retinal dystrophy; MLD: metachromatic leukodystrophy; NICE: National Institute for Health and Care Excellence; SCD: sickle cell disease; SMA: spinal muscular atrophy; TDT: Transfusion-dependent beta-thalassemia. References: 1. NICE. Strimvelis for treating adenosine deaminase deficiency-severe combined immunodeficiency. Highly specialised technology guidance. London: NICE; 2018 Feb 07. 2. NICE. Betibeglogene autotemcel for treating transfusion-dependent beta-thalassaemia: Appraisal consultation document. London: NICE; 2021 Feb 3. ICER. 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