

BC PharmaCare Drug Information

The drug below is being considered for possible coverage under the B.C. PharmaCare program. PharmaCare is a government-funded drug plan that helps British Columbians with the cost of eligible prescription drugs and specific medical supplies. For more information on PharmaCare, visit [Ministry of Health - PharmaCare](#).

PharmaCare reviews each drug for treating a specific illness or medical condition (known as an “indication”). If a decision is made to cover the drug, it will be only for that illness or condition.

In some cases, PharmaCare may cover a drug only for people who have the illness or condition and have not responded to other drugs used to treat that illness or condition.

For more information on PharmaCare’s drug coverage review process, see the last page of this information sheet.

Information about the drug	
Generic name (scientific name)	alirocumab
Brand name	Praluent[®]
Manufacturer	Sanofi–Aventis Canada Inc.
Indication	For the treatment of patients with heterozygous familial hypercholesterolemia (HeFH) or clinical atherosclerotic cardiovascular disease (CVD), who require additional lowering of low density lipoprotein cholesterol (LDL-C)
Has the drug been reviewed by the Common Drug Review (CDR)? (see the note below this table.)	Yes. For more information about the CDR’s review of alirocumab (Praluent [®]), you can Search the CDR Reports .
Public input start date	Wednesday May 18, 2016
Public input closing date	Wednesday June 15, 2016 AT MIDNIGHT
How is the drug taken?	Praluent [®] is taken by subcutaneous (under the skin) injection.
How often the drug is is taken?	Praluent [®] is taken once every two weeks.

Information about the drug	
General drug and/or drug study information	<p>Praluent® is used along with diet and maximally-tolerated statin therapy in adults with HeFH (an inherited condition that causes high levels of LDL-C) or atherosclerotic heart problems (such as heart attacks or strokes) who need additional lowering of LDL-C.</p> <p>Praluent® is a fully human monoclonal antibody that blocks a protein called proprotein convertase subtilisin kexin type 9 (PCSK9) and thereby increases the number of receptors available to remove LDL-C from the blood. This results in lower LDL-C levels.</p> <p>Studies looked at the following outcomes to assess if Praluent® is helpful and safe for the treatment of patients with HeFH or CVD, who require additional lowering of LDL-C:</p> <ul style="list-style-type: none"> • Reductions from baseline in LDL-C • Number of patients to achieve a target LDL-C level of less than 1.8 mmol/L • Mortality • Cardiovascular events • Quality of life • Bad reactions • Serious bad reactions • Patients leaving the trial due to bad reactions • Bad reactions of special interest: injection site reactions
Other considerations	None

Note:

The Common Drug Review (CDR) is a national organization that reviews drugs on behalf of Canadian public sector plans when manufacturers want to have the jurisdictions provide coverage for the drugs. For detailed information on B.C. PharmaCare’s drug review process, including the role of the CDR in that process, see [The Drug Review Process in B.C. - Overview](#).

Cost of the drug under review compared to other drugs used to treat the same indication			
generic name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Usual Dose	Annual Cost of Therapy
alirocumab (Praluent®)	Under Review	Injected every 2 weeks	\$7,844
<i>Anti-Proprotein Convertase Subtilisin—Kexin Type 9 (anti-PCSK9) Monoclonal Antibody</i>			
evolocumab (Repatha™)	Under Review	Injected every 2 weeks	\$7,844
<i>HMG-CoA Reductase Inhibitors (Statins)</i>			
rosuvastatin calcium (Crestor® and generics)	Regular Benefit	Once daily	\$95 to \$142
atorvastatin calcium (Lipitor® and generics)	Regular Benefit	Once daily at bedtime	\$124 to \$168
fluvastatin sodium (Lescol® and generics)	Regular Benefit	Once daily at bedtime	\$88 to \$120
fluvastatin sodium (Lescol® XL)	Regular Benefit	Once daily	\$613
lovastatin (Mevacor® and generics)	Regular Benefit	Once daily at bedtime	\$193 to \$708
pravastatin sodium (Pravachol™ and generics)	Regular Benefit	Once daily at bedtime	\$161 to \$226
simvastatin (Zocor® and generics)	Regular Benefit	Once daily at bedtime	\$142 to \$179
<i>Cholesterol Absorption Inhibitors</i>			
ezetimibe (Ezetrol® and generics)	Non-Benefit	Once daily	\$617
fenofibrate (Lipidil EZ®)	Regular Benefit	Once daily	\$37 to \$106
bezafibrate (Bezalip® SR and generics)	Non-Benefit	Once daily in the morning or at bedtime	\$872
micro-coated fenofibrate (Lipidil Supra® and generics)	Regular Benefit	Once daily	\$106
fenofibrate (Lipidil® and generics)	Regular Benefit	Three times daily	\$723 to \$964

Cost of the drug under review compared to other drugs used to treat the same indication			
generic name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Usual Dose	Annual Cost of Therapy
fenofibrate (Lipidil Micro® and generics)	Regular Benefit	Once daily	\$106 to \$215
gemfibrozil (Lopid® and generics)	Regular Benefit	Twice daily	\$204
Binders/Bile Acid Sequestrants			
colesevelam (Lodalis™)	Regular Benefit	Once or twice daily	\$1,767 to \$2,650
cholestyramine resin (Olestyr® and generics)	Regular Benefit	1 to 6 packets in divided doses daily	\$606 to \$3,635
colestipol HCl (Colestid™ regular and orange granules)	Regular Benefit	1 to 6 packets in divided doses daily	\$380 to \$2,278

The Drug Review Process in B.C.

A manufacturer submits a request to the Ministry of Health (Ministry).

An independent group called the [Drug Benefit Council \(DBC\)](#) gives advice to the Ministry. The DBC looks at:

- whether the drug is safe and effective
- advice from a national group called the [Common Drug Review \(CDR\)](#)
- what the drug costs and whether it is a good value for the people of B.C.
- ethical considerations involved with covering or not covering the drug
- input from physicians, patients, caregivers, patient groups and drug submission sponsors

The Ministry makes PharmaCare coverage decisions by taking into account:

- the existing PharmaCare policies, programs and resources
- the evidence-informed advice of the Council
- the drugs already covered by PharmaCare that are used to treat similar medical conditions
- the overall cost of covering the drug

For more information about the B.C. Drug Review Process, visit: [The Drug Review Process in B.C. - Overview](#).

This document is intended for information only.

It does not take the place of advice from a physician or other qualified health care provider.