

Drug Coverage Decision for B.C. PharmaCare

About PharmaCare

B.C. PharmaCare is a government-funded drug plan. It helps British Columbians with the cost of eligible prescription drugs and specific medical supplies.

Details of Drug Reviewed

Drug	tinzaparin
Brand Name	Innohep®
Dosage Form(s)	2,500 IU/0.25 mL, 3,500 IU/0.35 mL, 4,500 IU/0.45 mL, 8,000 IU/0.4 mL, 10,000 IU/0.5 mL, 12,000 IU/0.6 mL, 14,000 IU/0.7 mL, 16,000 IU/0.8 mL, 18,000 IU/0.9 mL syringes; 10,000 IU/mL, 20,000 IU/mL vials
Manufacturer	Leo Pharma Inc.
Submission Type	Modification of Criteria
Use Reviewed	Venous thromboembolism (VTE) associated with cancer
Common Drug Review (CDR)	No, CDR did not review
Drug Benefit Council (DBC)	DBC met on November 7, 2016. DBC considered various inputs including : a clinical evidence review of tinzaparin for the treatment of VTE associated with cancer, completed August 23, 2016. The DBC also considered a 2014 meta-analysis by the Cochrane Collaboration comparing long-term treatment with low-molecular weight heparins (LMWHs) versus oral anticoagulants in patients with cancer and symptomatic VTE, as well as Clinical Practice Reviews from two specialists, manufacturer comments on the clinical evidence review, and a Budget Impact Assessment. Patient input was not collected.
Drug Coverage Decision	Modification of Limited Coverage criteria. Access the tinzaparin criteria from www.gov.bc.ca/pharmacarespecialauthority
Date	February 14, 2017
Reason(s)	<p>Drug coverage decision is not consistent with the DBC recommendation.</p> <ul style="list-style-type: none"> Based on the DBC's reasons for recommendation, tinzaparin did not demonstrate advantages over warfarin with respect to efficacy and safety, with the exception for clinically relevant nonmajor bleeding. By comparison, dalteparin, another low molecular weight heparin (LMWH), demonstrated some advantage over warfarin with respect to efficacy but not safety. Based on the clinical practice reviewers' inputs, tinzaparin is a reasonable treatment option in patients who have failed, or who are unable to tolerate, oral therapy with warfarin, and could be used as an alternative to dalteparin, especially in patients with renal impairment. At the submitted product price, tinzaparin may be less costly than dalteparin for some patients. The Ministry considered DBC recommendation and reasons as well as currently covered options for the treatment of VTE associated with cancer and determined that tinzaparin is a viable option without additional cost to PharmaCare.

Other Information	None
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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 DBC
- the drugs already covered by PharmaCare that are used to treat similar medical conditions
- the overall cost of covering the drug

Visit the [The Drug Review Process in B.C. - Overview](#) and [Ministry of Health - PharmaCare](#) for more information.

This document is intended for information only.

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