

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)	tenofovir alafenamide
Brand name	Vemlidy™
Manufacturer	Gilead Sciences Canada, Inc.
Indication	Treatment of chronic hepatitis B
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 tenofovir alafenamide (Vemlidy™), you can Search the CDR Reports .
Public input start date	Wednesday January 24, 2018
Public input closing date	Wednesday February 21, 2018 AT MIDNIGHT
How is the drug taken?	Orally (by mouth)
How often is the drug is taken?	One tablet once daily

Information about the drug	
General drug and/or drug study information	<p>Hepatitis B is an infection of the liver, caused by a virus. New hepatitis B infections do not usually require treatment because most adults clear the infection on their own. However, some people develop a chronic hepatitis B infection after 6 months. Chronic infections can lead to liver damage or scarring (cirrhosis) and liver cancer.</p> <p>Compensated liver disease means that the liver is heavily scarred but can still perform many important functions.</p> <p>Tenofovir alafenamide is an antiviral drug. Antiviral drugs are used to treat some patients with chronic hepatitis B. The goal of treatment with antiviral drugs is to stop the virus from reproducing and to stop the progress of the liver damage.</p> <p>Studies looked at the following:</p> <ul style="list-style-type: none"> • The proportion of patients who achieved an undetectable level of hepatitis B virus in their blood • Normalization of liver function test ALT • Bone mineral density • Renal (kidney) function • Change in fibrosis score • Bad reactions • Serious bad reactions • Patients leaving the trial due to bad reactions • Bad reactions of special interest (bone events like osteoporosis, renal events, and increased cholesterol)
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	Daily Cost of Therapy ¹
tenofovir alafenamide (Vemlidy)	Under Review	25 mg daily	\$21.11
tenofovir disoproxil (Viread® and generics)	Limited Coverage	300 mg daily	\$5.28

¹ All costs taken from the CADTH Common Drug Review (CDR) Pharmacoeconomic Review Report for tenofovir alafenamide (Vemlidy)

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	Daily Cost of Therapy ¹
adefovir dipivoxil (generic)	Limited Coverage	10 mg daily	\$20.27
entecavir (generics)	Limited Coverage	0.5 to 1.0 mg daily	\$5.94
lamivudine (generic)	Limited Coverage	100 mg daily	\$3.81
telbivudine (Sebivo®)	Non-Benefit	600 mg daily	\$18.69
interferon alfa-2b (Intron A®)	Limited Coverage	HBeAg+ 5 MIU daily or 10 MIU three times weekly SC/IM for 16 to 24 weeks HBeAg- 5-10 MIU three times weekly SC/IM for 1-2 years; discontinue after 12 weeks if no response	HBeAg+ \$52.09 to \$60.78 (\$5,834 to \$10,209 per course of therapy) HBeAg- \$25.97 to \$52.94 (\$9,479 to \$18,959 per year)
peginterferon alfa-2a (Pegasys®)	Non-Benefit	180 mcg once weekly for 24 to 48 weeks	\$58.20

HBeAg+ = hepatitis B e-antigen positive; HBeAg- = hepatitis B e-antigen negative; IM – intramuscular (into a muscle) injection;
mcg = microgram; MIU = million international units; SC = subcutaneous (below the skin) injection;

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

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.