BC PharmaCare Drug Information

The drug below is being considered for coverage under the BC PharmaCare program. PharmaCare is a government-funded drug plan that helps B.C. residents with the cost of eligible prescription drugs and medical supplies. For more information about PharmaCare, visit the PharmaCare website.

PharmaCare reviews each drug for treating a specific illness or medical condition (also called an "indication"). If PharmaCare decides to cover a drug, that coverage applies only to the indication(s) specified. In some cases, PharmaCare covers a drug only for people who have not responded to other drugs that treat the same indication.

More information about the PharmaCare drug review process is provided on the last page of this document.

Drug information	
Generic name (scientific name)	**inebilizumab**
Brand name	**Uplizna®**
Manufacturer	Amgen Canada Inc.
Indication	For the treatment of Immunoglobulin G4-related disease (IgG4-RD) in adult patients to reduce the frequency of flares.
Has the drug been reviewed by CDA-AMC, or will CDA-AMC be reviewing it? (See note below.)	Yes For more information about the CDA-AMC Reimbursement Review (CRR) of inebilizumab (Uplizna®), Search the CDA-AMC Reports.
Public input start date	Wednesday, **June 24,** 2026
Public input closing date	Tuesday, **July 21,** 2026, **at 11:59 pm**
How is the drug taken?	Inebilizumab is given as a drip into a vein (intravenous [IV] infusion).
How often is the drug taken?	An initial dose is given through IV infusion followed by a second dose 2 weeks later then starting 6 months after the initial infusion a dose is given every 6 months.

Drug information	
General drug and/or drug study information	IgGr-RD is a rare, chronic, immune-mediated inflammatory condition in which the immune system becomes dysregulated and attacks the body's own tissues. It is considered a systemic fibro-inflammatory disease, meaning it can affect multiple organs and cause both inflammation and scarring (fibrosis). If left untreated, this inflammation can lead to permanent organ dysfunction or failure. Inebilizumab is a monoclonal antibody that targets CD19, a protein found on the surface of B cells. By binding to CD19, it leads to the depletion of these cells, which helps reduce abnormal immune activity and prevents the immune system from attacking the body's own cells. Studies looked at the following: • Time to first treated adjudication committee (AC)-determined disease flare • Annualized flare rate for treated AC-determined disease flares • Proportion of patients achieving flare-free, glucocorticoid-free complete remission at week 52 • Glucocorticoid use for IgG4-RD disease control • Change from baseline to week 52 in Health-Related Quality of Life measures including: Short Form-36 (SF-36) physical and mental component scores, Functional Assessment of Chronic Illness Therapy – Fatigue (FACIT-Fatigue) • Bad reactions • Serious bad reactions • Bad reactions of special interest such as anaphylaxis, cytopenia, infusion related reactions, opportunistic and serious infections • Patients leaving the trial due to bad reactions
Other considerations	None

Note:
CDA-AMC (Canada's Drug Agency-L'Agence des Médicaments du Canada) is a national organization that reviews drugs on behalf of Canadian public sector plans when drug manufacturers want those plans to provide coverage for the drug. For detailed information about the PharmaCare drug review process, including the role of the CDA-AMC Reimbursement Review (CRR) in that process, visit How PharmaCare Decides Which Drugs to Cover.

Table of Comparators Used to Treat the Same Indication		
Generic Name (Brand Name) of Drug Comparator	**Dosage Form**	**PharmaCare Status (if and how the drug is already covered)**
inebilizumab (Uplizna®)	Vial for IV Infusion	Under Review
Off-label Comparators Used to Treat the Same Indication		
Other Biologics		
rituximab (biosimilars)	Vial for IV infusion	Non-Benefit for IgG4-RD Limited Coverage for rheumatoid arthritis (RA), granulomatosis with polyangiitis or microscopic polyangiitis, relapsing remitting multiple sclerosis, neuromyelitis optica spectrum disorder, generalized myasthenia gravis
Glucocorticoids		
prednisone (Winpred, generics)	Tablet	Regular Benefit, subject to LCA
Immunosuppressive agents		
azathioprine (generics)	Tablet	Regular Benefit, subject to LCA
methotrexate (generic, Metoject SC)	Vial for injection	Regular Benefit, subject to LCA
	Pre-filled syringe for SC injection	Non-Benefit for IgG4-RD Limited Coverage for RA
mycophenolate mofetil (generics)	Capsule, Tablet	Regular Benefit, subject to LCA
tacrolimus (generics)	Capsule	Non-Benefit

The Drug Review Process in B.C.

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

An independent national organization called Canada's Drug Agency (CDA-AMC) provides evidence-based recommendations to public drug plans across Canada through its reimbursement review process.

As part of the CDA-AMC's Clinical Reimbursement Review process, the Canadian Drug Expert Committee (CDEC) makes reimbursement recommendations for non-oncology pharmaceuticals to the participating federal, provincial, and territorial publicly funded drug plans. In developing its recommendations, the CDEC considers:

- whether the drug is safe and effective
- what the drug costs and whether it is a good value to the citizens of B.C.
- ethical considerations related to covering or not covering the drug
- input from physicians, patients, caregivers, patient groups and drug submission sponsors

The Ministry makes a BC PharmaCare coverage decision by considering:

- existing BC PharmaCare policies, programs and resources
- the evidence-informed advice of the CDA-AMC
- the recommendations and reimbursement conditions of the CDEC
- if a Ministry Initiated review, the advice of an independent expert group called the Drug Benefit Council (DBC)
- BC-specific patient input collected through the Your Voice website
- drugs already covered by BC PharmaCare that treat similar medical conditions
- the overall cost of covering the drug

Visit BC PharmaCare and Drug reviews for more information.

This document provides information only.
It does not take the place of advice from a physician or other qualified health care provider.