



NCPE Plain English Summary

Drug name: daratumumab (*pronounced DAYR-uh-TOOM-yoo-mab*) for the treatment of adult patients with newly diagnosed systemic light chain amyloidosis.

Brand name: Darzalex®

What is the NCPE?

The National Centre for Pharmacoeconomics (NCPE) is a team of experts who look at the health benefits and costs of medicines. The HSE asks us to advise on whether or not a new medicine is good value for money. We give unbiased advice to help the HSE provide the most effective, safe and cost-effective (value for money) treatments for patients.

How do we make our recommendations?

Our main focus is on the health benefits and cost effectiveness of a medicine. We look at the wider costs and health benefits associated with a new medicine, for example:

- Does the new medicine work better than other treatments available in Ireland?
- Is the new medicine easier to give or easier to take compared with other treatments available in Ireland?
- Does the new medicine reduce the need for patients to be hospitalised?
- Does the new medicine improve the quality of a patient's life over other treatments available in Ireland?
- Will the new medicine save resources elsewhere within the health system?

We review the information from clinical trials along with the cost and value for money data presented by the pharmaceutical company. We ask doctors and other healthcare professionals for advice about any health benefits of the new medicine compared with current treatments. We also ask patient organisations to send us their views on how the new drug may improve patients' day-to-day experience of living with a disease.

What is daratumumab used for?

Daratumumab is used to treat light chain amyloidosis, a blood disease in which deposits of abnormal proteins, called amyloids, accumulate and cause damage in tissues and organs. Daratumumab is given in combination with three other therapies (bortezomib, cyclophosphamide and dexamethasone) for six cycles of treatment. Following this, daratumumab can be administered on its own every four weeks until disease progression or unacceptable toxicity. Daratumumab works by attaching to a protein called CD38, which is found in high amounts on abnormal white blood cells in light chain amyloidosis. By attaching

to CD38 on these cells, daratumumab activates the immune system to kill the abnormal white blood cells.

What recommendation has the NCPE made to the HSE?

We have recommended that the HSE should consider not funding daratumumab unless its cost effectiveness (value for money) can be improved. The HSE will consider our recommendation and make the final decision about reimbursement (funding). When making the funding decision, the HSE will also consider the additional [criteria](#) outlined in the Health (Pricing and Supply of Medical Goods) Act 2013.

Why did we make this recommendation?

After reviewing the data presented by the pharmaceutical company, we recommend that the HSE consider not providing daratumumab unless the HSE can agree a suitable price reduction with the pharmaceutical company. This is because we believe daratumumab may work as well or better than other ways to manage this condition. However, the price of daratumumab is too high compared with other ways to manage this condition, and we believe that daratumumab is very poor value for money.

Next steps

When the HSE receives our recommendation, it will look at all the relevant data about daratumumab. The HSE makes the final decision on reimbursement.

Where can I get more information?

You can get more information about daratumumab from the following online options:

- the NCPE Technical Summary Document
- Darzalex® European Public Assessment Report (EPAR) – [Summary for the public](#)
or
- searching for daratumumab on our website (www.ncpe.ie);
- searching for daratumumab on the European Medicines Agency (EMA) website (www.ema.europa.eu).

Please refer to the NCPE website for updated information on the reimbursement status of this medicine.

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