

## **Common Drug Review**

**Project Status Report** 

Brand Name:	Repatha
Non-proprietary Name:	evolocumab
Applicant:	Amgen Canada Inc.

Indication(s): Primary hyperlipidemia and mixed dyslipidemia

Project Type: Submission Date NOC Issued¹: 2015-Sep-10

Pate Peccived: 2015- lun 30 Application Fee Schedule 2. Schedule A

Date Received: 2015-Jun-30 Application Fee Schedule<sup>2</sup>: Schedule A

Key Milestone <sup>3</sup>	Target Date	Actual Date	Comments
Application accepted for review	2015-Jul-15	2015-Jul-15	- Review has been initiated 2015-Jul-16
Patient group input received <sup>4</sup>	2015-Jul-24	2015-Jul-24	- Call for patient input posted on 2015-Jun-04 - Patient group input deadline: 2015-Jul-24 - Patient input submissions received
Patient group comments on input summary received	2015-Aug-07	2015-Aug-07	Patient input summary sent for review on 2015-Jul-30     Patient input summary feedback deadline: 2015-Aug-07     Patient input summary feedback received
Draft CDR review report(s) sent to applicant	2015-Sep-30	2015-Nov-17	- 2015-Sep-16: Received finalized information following NOC being issued. Information is being assessed by the CDR review team. Revised anticipated timelines for the review are to be determined New target date: 2015-Nov-05 - New target date: 2015-Nov-17
Comments from applicant on draft CDR review report(s) received by CADTH	2015-Oct-09	2015-Nov-26	- New target date: 2015-Nov-16 - New target date: 2015-Nov-26
Redaction requests from applicant on draft CDR review report(s) received by CADTH	2015-Oct-19	2015-Dec-03	- New target date: 2015-Nov-23 - New target date: 2015-Dec-03
Canadian Drug Expert Committee (CDEC) meeting	2015-Nov-18	2016-Jan-20	- New target date: 2016-Jan-20
CDEC recommendation & redacted CDR review report(s) sent to drug plans and applicant	2015-Nov-25 to 2015-Nov-27	2016-Jan-28	- New target date: 2016-Jan-27 to 2016-Jan-29
Embargo period⁵ and validation of redacted CDR review report(s)	2016-Feb-11	2016-Feb-11	
CDEC Final Recommendation issued to drug plans and applicant if: - no request for clarification is made AND - no request for reconsideration is made AND - no request for resubmission based on a reduced price during embargo period is made	2016-Feb-19	2016-Feb-19	- Notice of final recommendation issued
CDEC Final Recommendation posted <sup>6</sup>	2016-Feb-23	2016-Feb-23	
Final CDR review report(s) <sup>6</sup> and patient input posted		2018-Dec-03	

CDR applications for submissions can be filed on a pre-NOC basis. When such a submission is received, this field will indicate 'pending' until the NOC (or NOC/c) is issued by Health Canada.

This CDR Project Status Report is posted every other week, reflecting status as of the end of day Wednesday (4:00 pm ET) of that week.

2017-Feb-03 SR0441-000

<sup>&</sup>lt;sup>2</sup> Refer to Appendix 1 of the *Procedure for the CADTH Common Drug Review* (https://www.cadth.ca/media/cdr/process/CDR\_Procedure.pdf) for details regarding CDR application fee schedules.

<sup>&</sup>lt;sup>3</sup> Please refer to the *Procedure for the CADTH Common Drug Review* (https://www.cadth.ca/media/cdr/process/CDR\_Procedure.pdf) for complete details regarding the CDR process and targeted time frames for key milestones.

<sup>&</sup>lt;sup>4</sup> The call for patient group input is posted 20 business days inadvance of the applicant's anticipated date of filing the CDR application. Patient groups have a total of 35 business days for preparing and submitting patient input.

<sup>&</sup>lt;sup>5</sup>The embargoed CDEC recommendation is held in confidence by all stakeholders and not acted upon until after CADTH has issued the notice of *CDEC Final Recommendation*. The applicant may make a request for reconsideration or resubmission based on reduced price during the embargo period, and the drug plans may make a request for clarification, as applicable (see section 8 of the *Procedure for the CADTH Common Drug Review*).

<sup>&</sup>lt;sup>6</sup> The timing for posting the CDEC Final Recommendation and CDR review report(s) depends on several factors including the need for consultation with the applicant regarding redaction issues.