

## **CEDAC FINAL RECOMMENDATION and REASONS for RECOMMENDATION**

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### **DELTA-9-TETRAHYDROCANNABINOL (THC)/CANNABIDIOL (Sativex<sup>®</sup> Resubmission – Bayer Inc.)**

#### **Description:**

Delta-9-tetrahydrocannabinol (THC)/cannabidiol is a cannabinoid extract. The Canadian Expert Drug Advisory Committee (CEDAC) previously reviewed THC/cannabidiol for neuropathic pain in multiple sclerosis (see CEDAC Final Recommendation on THC/cannabidiol, September 26, 2007). This resubmission was based on a Notice of Compliance with Conditions (NOC/c) from Health Canada stating that THC/cannabidiol may be useful as adjunctive analgesic treatment in adult patients with advanced cancer who experience moderate to severe pain during the highest tolerated dose of strong opioid therapy for persistent background pain.

#### **Dosage Forms:**

Sativex<sup>®</sup> is available in a 5.5 mL vial for buccal administration by spray, containing THC 27 mg/mL and cannabidiol 25 mg/mL. The recommended dose is a maximum of one spray every four hours on the first day, up to a maximum of four sprays on the first day. On subsequent days the patient may gradually increase the total number of sprays as needed and tolerated.

#### **Recommendation:**

The Canadian Expert Drug Advisory Committee (CEDAC) recommends that THC/cannabidiol not be listed.

#### **Reasons for the Recommendation:**

1. The efficacy of THC/cannabidiol in patients with cancer-related pain has been evaluated in a two week randomized controlled trial (RCT), which reported that THC/cannabidiol resulted in a statistically significant, but clinically modest, improvement in pain relief compared to placebo. There was no difference in the use of escape medication between the two groups. This trial has not been fully published and the manufacturer has requested that unpublished information from this trial remain confidential, pursuant to the Confidentiality Guidelines of the Common Drug Review.
2. THC/cannabidiol costs \$124.95 per vial which contains up to 51 metered sprays. At the doses used in the clinical trial, daily cost of THC/cannabidiol is higher than other agents used to manage moderate to severe pain in patients with cancer.

#### **Summary of Committee Considerations:**

The Committee considered a systematic review of double-blind RCTs evaluating the effect of THC/cannabidiol in adult patients with moderate to severe cancer-related pain despite background opioid therapy. One RCT of two weeks duration in 118 patients comparing THC/cannabidiol with placebo met

the inclusion criteria for the systematic review. The manufacturer has requested that information from this trial remain confidential, pursuant to the Confidentiality Guidelines of the Common Drug Review.

The also Committee considered an economic evaluation submitted by the manufacturer. The manufacturer has requested that information from this evaluation remain confidential, pursuant to the Confidentiality Guidelines of the Common Drug Review. The Committee felt that the true cost-effectiveness of THC/cannabidiol is uncertain until further clinical trial data are available.

**Of Note:**

1. Both published and unpublished data were reviewed and taken into consideration in making this recommendation.
2. THC/cannabidiol (Sativex<sup>®</sup>) has received a NOC/c on the basis of promising clinical evidence while recognizing the need for confirmatory studies to verify its clinical benefits. The manufacturer may file a resubmission to the Common Drug Review when these confirmatory studies are completed.

**Background:**

CEDAC provides formulary listing recommendations to publicly funded drug plans. Recommendations are based on an evidence-based review of the medication's effectiveness and safety and an assessment of its cost-effectiveness in comparison to other available treatment options. For example, if a new medication is more expensive than other treatments, the Committee considers whether any advantages of the new medication justify the higher price. If the recommendation is not to list a drug, the Committee has concerns regarding the balance between benefit and harm for the medication, and/or concerns about whether the medication provides good value for public drug plans.