European Commission expands labelling for INVOKANA® and VOKANAMET® to include positive data on cardiovascular and renal outcomes

- *INVOKANA® (canagliflozin) and VOKANAMET® (canagliflozin and metformin) labelling now approved to include positive cardiovascular and renal outcomes from the CANVAS programme which show a reduction in morbidity and mortality*
- Janssen has a partnership with the Mundipharma global network of associate companies, who are the exclusive distributor for both Invokana® and Vokanamet® in countries in the European Economic Area (EEA) and Switzerland where the products currently have positive Pricing and Reimbursement status. This is with the exception of Spain, where the product is co-promoted by both Janssen and Mundipharma.

CAMBRIDGE, UK: 7 July 2018 (TBC) - As the European distributor of **Invokana**® (canagliflozin) and **Vokanamet**® (canagliflozin and metformin) Mundipharma welcomes the announcement from the Janssen Pharmaceutical Companies of Johnson & Johnson that the European Commission (EC) has granted approval to update the Invokana® (canagliflozin) and Vokanamet® (canagliflozin and metformin) labels to include changes to the indication statement for the treatment of adults with insufficiently controlled type 2 diabetes mellitus (T2DM) as an adjunct to diet and exercise.

The approved product information now includes additional results from the CANVAS Programme, specifically a reduction in the relative risk of major adverse cardiovascular events by 14%, hospitalisation for heart failure by 33%. In addition there were renal benefits, seen as a reduction in the doubling of serum creatinine, the need for renal replacement therapy and renal death by 47% and, the progression of albuminuria by 27% in people with type 2 diabetes and either a history of CV disease or at least two CV risk factors.[1,2]

"We hope this approval will not only provide clinicians with a more detailed overview of canagliflozin but also help them when making informed treatment decisions which are most appropriate for their patients. Type 2 diabetes mellitus is one of the most common forms of diabetes and accounts for the majority of diabetes cases worldwide so it is extremely important that we continue improving outcomes for these patients," said Paul Schofield, European Medical Lead, Diabetes.

The EC's decision follows a recommendation from the Committee for Medical Products for Human Use (CHMP) that was based on data from the CANVAS programme, the largest completed cardiovascular (CV) outcomes trial to date for an SGLT2 inhibitor.[2]

Canagliflozin was approved in the European Union by the European Commission in November 2013 and is indicated for the treatment of adults with insufficiently controlled type 2 diabetes mellitus.[3] Approval was based on a comprehensive global Phase 3 clinical trial programme.

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Notes to editors

About the CANVAS programme

The CANVAS programme (N=10,142) comprises the two large canagliflozin cardiovascular outcome studies, CANVAS and CANVAS-R, and includes a pre-specified integrated analysis of these two studies to evaluate the potential for CV protection of canagliflozin in patients with type 2 diabetes mellitus (T2DM) who had either a prior history of CV disease or at least two CV risk factors. The integrated analysis also evaluated the effects of canagliflozin on renal and safety outcomes.[2]

Canagliflozin met the primary outcome by significantly reducing the rates of the composite of major adverse CV events (MACE) comprised of CV mortality, non-fatal myocardial infarction (MI), or non-fatal stroke (26.9 vs. 31.5/1000 patient-years, hazard ratio (HR) 0.86; 95% confidence interval (CI 0.75-0.97; P<0.0001 for noninferiority; P=0.0158 for superiority) compared with placebo, respectively. All 3 components of MACE composite (CV death, non-fatal MI, and non-fatal stroke) exhibited point estimates of effect suggesting benefit with canagliflozin.[2]

Adverse events reported in the CANVAS programme were generally consistent with the known safety profile of canagliflozin.[2] However, the study found that, in patients with type 2 diabetes who had established CV disease or at least two risk factors for CV disease, canagliflozin was associated with an approximately 2-fold increased risk of lower limb amputation with the rate of amputation over standard of care being 0.63/100 patient years for canagliflozin versus 0.34/100 patient years for placebo which corresponds to an additional risk of 0.29/100 patient years.[2] The risk of amputations across the class has previously been investigated by the EMA, and this is reflected in a warning in the labelling of all SGLT2 inhibitors.

About INVOKANA®

INVOKANA® (canagliflozin) is an oral, once-daily medication which belongs to a new class of medications called sodium glucose co-transporter 2 (SGLT2) inhibitors. SGLT2 inhibitors work by inhibiting SGLT2, which promotes the loss of glucose via the urine, lowering blood glucose levels in adults with type 2 diabetes. Canagliflozin was approved in the European Union by the European Commission in November 2013. INVOKANA® is indicated for the treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise. Approval was based on a comprehensive global Phase 3 clinical trial programme.[3]

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About VOKANAMET®

VOKANAMET® (a fixed-dose combination of canagliflozin and metformin) is approved in the European Union for the treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise. VOKANAMET® combines two oral glucose-lowering medicinal products with different and complementary mechanisms of action.[4]

About the Mundipharma network

The Mundipharma global network of privately-owned independent associated companies was founded in 1956 by doctors and now operates in over 120 countries worldwide. We are focused on developing business partnerships to identify and accelerate meaningful technology across an increasingly diverse portfolio of therapy areas including respiratory, oncology, pain, and biosimilars. Consistent with our entrepreneurial heritage, we like to think we see what others don't by challenging conventional wisdom and asking different and challenging questions. By working in partnership with all our stakeholders, the Mundipharma network develops medicines that create value for patients, payers and wider healthcare systems.

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[2] Neal B et al. Canagliflozin and Cardiovascular and Renal Events in Type 2 Diabetes, 2017; The New England Journal of Medicine
[3] INVOKANA SmPC. Available at: http://www.ema.europa.eu/docs/en_GB/document_library/EPAR_-_Product_Information/human/002649/WC500156456.pdf Last accessed August 2018.
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