



2010 Prescribe Drug Awards

Products evaluated during the previous year in the New Products section of our French edition are eligible for the Prescribe Awards for new drugs and indications (in 2010: issues 315 to 326).

Each month, the *Prescribe* editorial staff presents systematic and comparative analyses of available data on all newly approved drugs in France, and on new therapeutic indications granted for existing drugs. The goal is to help the reader distinguish, among the plethora of lavishly promoted commercial products, those medications worth adding to their drug list, or worth using instead of existing drugs.

This evaluation follows rigorous procedures that include a thorough literature search, a large panel of reviewers (specific to each project) and a quality control system to verify that the text is consistent with the data in the references.

Total independence. This work is carried out by the editorial staff in total independence. *Prescribe* is financed exclusively by individual readers' subscriptions: neither the French nor the English edition carries any paid advertising, nor do we receive grants or subsidies of any kind (see our annual financial report in each *Prescribe International* June issue).

At the end of each year, the *Prescribe* Drug Awards are based on the review articles published that year, and take into account any new data available since the initial articles were published. The rules governing the Drug Awards are available online, at www.english.prescribe.org.

Therapeutic advance is defined as better efficacy, fewer or less severe adverse effects (for similar efficacy), or safer or more convenient administration.

2010: only one major advance, and only for a few patients. As in 2008 and 2009, the Golden Pill Award was not attributed this year (see above and page 79). However, three drugs are worthy of note. *Imatinib* had already been on the market since 2002 for the treatment of inoperable or metastatic gastrointestinal stromal tumours. In the small number of patients concerned, after several years of follow-up, it has emerged that *imatinib* prolongs overall survival by more than 4 years, albeit at a cost of frequent and sometimes serious adverse effects. Its

Pilule d'Or/Golden Pill

The "Golden Pill" award is granted to drugs that provide a major therapeutic advance in a field in which no effective treatment was previously available.

NOT ATTRIBUTED in 2010

Honours list

Drugs included on the Honours List provide a clear advantage for some patients in comparison to existing therapeutic options, albeit with certain limitations.

<i>imatinib</i>	GLIVEC [®] Novartis Pharma	inoperable or metastatic gastrointestinal stromal tumours (a second look) (this issue page 61)
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Noteworthy

The following drugs (in alphabetical order of their international nonproprietary names – the INN is a drug's "real name") made a modest improvement in patient care:

<i>azacitidine</i>	VIDAZA [®] Celgene	poor-prognosis myelodysplastic syndromes and related disorders in adults not qualifying for haematopoietic stem cell allografting (Prescribe Int n° 113)
<i>Japanese encephalitis vaccine</i>	IXIARO [®] Novartis Vaccines and Diagnostics	active immunisation of some adult travellers against Japanese encephalitis (Prescribe Int n° 106)

place as an adjuvant to surgical excision remains uncertain.

In some patients with poor-prognosis myelodysplastic syndromes and related disorders, adding *azacitidine* to symptomatic treatments prolongs overall survival by several months relative to standard cytotoxic drugs. But the assessment must continue, and haematological and gastrointestinal adverse effects must be taken into account.

Japanese encephalitis vaccine is useful for selected adults travelling to Asia in certain conditions. It is strongly immunogenic for at least a year, but we do not know how effectively it prevents clinical infections, or their accompanying sequelae and mortality. A risk of rare but serious adverse effects cannot be ruled out. This vaccine should be used with caution.

30 years of Prescribe Awards.

Since 1981, only 14 new drugs have provided patients and caregivers with decisive advantages over existing options, sometimes reassessed after lengthy follow-up, or in indications other than those initially licensed. About 60 new drugs represented clear progress (see page 79). In recent years, however, about 20 commercial novelties are cluttering the market annually, and expose patients to unjustifiable risk. A good clean-out is needed.

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