THE PRESCRIRE AWARDS FOR 2022

The annual Prescrire Awards are granted in total independence by the Prescrire Editorial staff. The rules governing them are available online (in French) at english.prescrire.org > Topics > Annual Prescrire Awards > The Prescrire Drug Awards for 2022

2022 Prescrire Drug Awards

Every month, *Prescrire*'s Editorial Staff help our readers decide which of the multitude of newly authorised products or indications are worth adding to their list of useful treatment options, and which are to be avoided. We do this by conducting systematic analyses of the relevant evaluation data available on new drugs, new indications, new pharmaceutical forms and new dose strengths authorised in Europe or in France. European authorisations account for the majority, and these are the focus of our English edition, *Prescrire International*. The 2022 Prescrire Drug Awards are based on the analyses published in the Marketing Authorisations section of our French edition in 2022.

Prescrire's multidisciplinary team has been conducting and publishing independent drug analyses for 42 years, free from the influence of any companies or organisations involved in the healthcare sector.

No Pilule d'Or in 2022, and only two drug awards

None of the drugs examined by Prescrire in 2022 represented a major therapeutic advance worthy of a Pilule d'Or (Golden Pill Award). Only two drugs received an award, one earning a place on the Honours List and the other a place on the Noteworthy list.

Honours List: nirmatrelvir + ritonavir (Paxlovid°) in covid-19: fewer complications in symptomatic patients at risk of developing severe disease. A 5-day course of the combination of *nirmatrelvir (a Sars-CoV-2 protease inhibitor)* + *ritonavir* (an inhibitor of the cytochrome P450 isoenzyme CYP3A4) was compared with placebo in a double-blind randomised trial in 2246 adults with covid-19 who had had symptoms for 5 days at most, but showed no signs of severe disease. Most were infected with the Sars-CoV-2 Delta variant, and they all had at least one risk factor for developing severe covid-19 (mainly obesity, hypertension or diabetes). Only 22% of them were aged 60 years or over. None of the patients had been vaccinated against covid-19, but half of them had anti-Sars-CoV-2 antibodies, indicating prior infection with this virus. In the month following the start of treatment, 0.8% of patients in the *nirmatrelvir* + *ritonavir* group were hospitalised, versus 6% in the placebo group ($p<0.0001$).

Epidemiological data from a later period suggest that *nirmatrelvir* + *ritonavir* reduces the risk of hospitalisation or death due to covid-19 in adults when the Omicron variant is predominant, including in those vaccinated against covid-19. These data provide lower-quality evidence than the results of the single trial available, but they are consistent with the trial data, which is not surprising given that the mechanism of action of this combination is independent of the spike protein mutations that characterise the different Sars-CoV-2 variants. Very little is known about *nirmatrelvir*'s adverse effects. Treatment with *nirmatrelvir* + *ritonavir* is difficult to manage due to the risk of major drug interactions and the risk of overdose in patients with renal impairment.

The combination of *nirmatrelvir* + *ritonavir* was developed sufficiently rapidly to reduce the number of hospitalisations and limit the burden placed on hospitals by covid-19, especially when infection rates were at their highest, thus earning it a place on the 2022 **Honours List**.

Noteworthy: azacitidine (Onureg°) as "maintenance" therapy in acute myeloid leukaemia: substantially longer survival. The cytotoxic drug *azacitidine* was evaluated as oral "maintenance" therapy in acute myeloid leukaemia in a single double-blind randomised placebo-controlled trial in 472 patients, aged 55 years or over, enrolled within 4 months of achieving remission. Median survival in the *azacitidine* group was longer than in the placebo group: 25 months versus 15 months.

Azacitidine can cause serious adverse effects, including haematological and gastrointestinal disorders, dyspnoea, pericarditis and necrotising fasciitis.

Azacitidine (Onureg°) was awarded a place as a **Noteworthy** drug because of the substantial increase in survival it offers a group of patients whose prognosis is poor. It failed to earn a place on the Honours List due to the severity of its adverse effects, which reduce patients' quality of life, and because these trial results have yet to be confirmed in another trial.

©Prescrire

► Translated from *Rev Prescrire* February 2023
Volume 43 N° 472 • Pages 84-85

2022 Pilule d'Or/Golden Pill

A Pilule d'Or (Golden Pill) is awarded to drugs that represent a major therapeutic advance in a particularly poorly served field.

Not awarded in 2022

2022 Honours List

Drugs included on the Honours List constitute a clear advance for some patients compared with existing therapeutic options, albeit with limitations.

Paxlovid° (*nirmatrelvir + ritonavir*)
Pfizer

In adults with mild to moderate symptomatic covid-19, at risk of developing severe covid-19 (Prescrire Int n° 238 and 244).

Noteworthy in 2022

Drugs deemed "Noteworthy" provide a modest improvement in patient care.

Onureg° (*azacitidine*)
Bristol-Myers Squibb

In acute myeloid leukaemia, as "maintenance" therapy (Prescrire Int n° 244).

Downloaded from english.prescrire.org on 26/04/2024
Copyright(c)Prescrire. For personal use only.