Preserving & Strengthening FDA's Accelerated Approval Pathway





For more than 30 years, the FDA's <u>accelerated approval (AA) pathway</u> has facilitated earlier patient access to drugs for severe or life-threatening illnesses with limited to no treatment options. And for more than a decade, thanks to Congressional action, this pathway has been utilized to approve drugs treating rare diseases so that many more patients in need could benefit. More than 270 treatments have been approved through the pathway.



FDA approval through this pathway is based on clinical trials that study the drug or treatment's effect on a surrogate endpoint, a biologic marker that is reasonably likely to predict clinical benefit (e.g., laboratory measurement, radiographic image, physical sign, or intermediate clinical endpoint). Using a surrogate endpoint can save valuable years in the drug approval process for patients. Following approval, confirmatory clinical trials are conducted to confirm the predicted clinical benefit.

The AA Pathway is Important for Realizing the Promise of Gene Therapies

Gene therapies are different from traditional medicines in that they are delivered as one-time treatments that can offer long-lasting – sometimes lifelong – benefits for patients and the healthcare system alike. By targeting the cause of disease at the DNA level, gene therapies have the potential to fundamentally reshape the trajectory of many diseases.

The AA pathway can be an important option for certain gene therapies. The science of gene therapy development and surrogate endpoint development have the following synergies:

 For certain diseases, the DNA-level changes enabled by gene therapies serve to repair the root cause of disease and restore biological pathways. The restoration of biological pathway function in many, if not all cases, meets the threshold for a biomarker to be determined "reasonably likely to predict clinical benefit."

- Assessment of surrogate endpoints is especially important for diseases that progress over long periods of time or in diseases where functional outcome measures may be subject to a lot of variability.
- Gene therapies aim to target some of the most severe diseases, usually genetic, which often impact children, thereby aligning with Congress' intent in expanding this pathway to include rare diseases.

The AA pathway allows these innovative and potentially transformative therapies to reach patients years in advance of the traditional FDA approval route. One study of oncology products found that the AA pathway brought treatments to patients 4.7 years sooner than the traditional pathway.

While not all gene therapies will be approved through the AA pathway, it will be helpful for certain gene therapies that target either rare diseases or serious conditions with unmet medical needs such as neuromuscular conditions, sickle cell disease, hemophilia, etc.





Misperceptions Are Driving Attacks on AA

MYTH vs FACT

The accelerated approval pathway is not as rigorous as traditional approval.

Surrogate endpoints are inferior to clinical outcome measures.

Treatments approved via the accelerated approval pathway are responsible for big increases in state Medicaid spending.

Treatments approved via the accelerated approval pathway should be considered experimental.

The AA pathway has gone too far afield of original intent for HIV/AIDS – too many treatments are approved through this pathway

Treatments approved via the AA pathway are subject to the same FDA standards for proving safety and efficacy as traditional drug approvals.

Surrogate endpoints can have advantages over clinical outcomes, especially in cases where they can more accurately capture real-time disease progression or improvement.

Spending on drugs approved via the accelerated approval pathway accounted for less than one percent of annual Medicaid spending between 2007 and 2018.

Treatments approved via the AA pathway are subject to the same FDA standards for proving safety and efficacy as traditional drug approvals. Policies that treat them differently diminish Congress' intent in creating the pathway.

Over the past decade, only 15% of drugs approved by the FDA were approved via this pathway. The intent remains the same — to speed up the availability of treatments for patients with lifethreatening diseases

Such misperceptions have resulted in calls for rash changes to the pathway itself as well as access restrictions. Some have proposed limiting the types of treatments that can be approved and setting arbitrary timelines for confirmatory trials, among other modifications that would result in significant delays in patient access. Proposals within the Medicare and Medicaid programs would restrict coverage for drugs approved under the pathway and/or reduce reimbursement rates. If implemented, these proposals could affect the incentives to develop innovative treatments and ultimately result in fewer patients and families getting the care that they need.



AA Can Be a Lifeline for Millions of Patients with Serious Diseases

We must preserve and strengthen the pathway to help ensure patients have access to safe and effective gene therapies as quickly as possible.

Learn more from our Patient Advocacy Advisory
Council Member, the EveryLife Foundation, at
everylifefoundation.org/accelerated-approval/#about