



Welcome to RxOutlook®, the OptumRx quarterly report summarizing the latest pipeline drug information, trend news, upcoming generic launches, and emerging therapies in today's pharmaceutical market.

This edition focuses on twelve near-term pipeline drugs that are expected to receive an FDA approval decision by the end of 2019, with an emphasis on the 4th quarter. These drugs are notable because of their potential for clinical impact, economic impact, or public health interest. This edition is a slight departure from previous issues because many of the highlighted drugs are intended for mainstream conditions affecting large populations, whereas previous issues focused on rare conditions and orphan drugs, many of which were specialty drugs.

Eight drugs in this issue will be available as oral formulations while four could be covered under the medical benefit due to their route of administration (eg, intraocular injection, implant). The central nervous system therapeutic category is featured very prominently with five drugs including two new treatments for acute migraine headache, a condition that has not seen a new mechanism of action in two decades. Migraine headache is an area that will continue to see ongoing development activity in 2020. Finally, many of the drugs included in this report are entering therapeutic areas with multiple existing treatment options, including generic alternatives. Understanding the defining characteristics of these pipeline drugs will be vital to identifying their potential place in therapy and recognizing what questions remain to be answered.

Key pipeline drugs with FDA approval decisions expected by the end of the 4th quarter 2019

| Drug Name | Manufacturer | Indication/Use | Expected FDA Decision Date |
|--------------------------|----------------------------|---|---------------------------------|
| Darolutamide | Bayer | Prostate cancer | 7/30/2019 (Approved) |
| Fedratinib | Celgene | Primary or secondary myelofibrosis* | 8/16/2019 (Approved) |
| Tenapanor | Ardelyx | Irritable bowel syndrome with constipation | 9/13/2019 |
| Diroximel fumarate | Alkermes/Biogen | Multiple sclerosis | 10/17/2019 |
| Brolucizumab | Novartis | Neovascular age-related macular degeneration | 11/2019 |
| Lasmiditan | Eli Lilly | Acute migraine headache | 11/14/2019 |
| Ubrogepant | Allergan | Acute migraine headache | 12/2019 |
| RVT-802 | Enzyvant/Roivant | Congenital athymia* | 12/2019 |
| Luspatercept | Celgene/Acceleron | Beta-thalassemia*; myelodysplastic syndromes (MDS)* | 12/4/2019 (beta-thalassemia) |
| Lemborexant | Eisai/Imbrium Therapeutics | Insomnia | 12/27/2019 |
| Lumateperone | Intra-Cellular Therapies | Schizophrenia | 12/27/2019 |
| Cabotegravir/rilpivirine | ViiV Healthcare | HIV-1 infection | 12/29/2019 |

* Orphan Drug Designation

OptumRx closely monitors and evaluates the drug development pipeline to identify noteworthy upcoming drug approvals and reports the essential findings here in RxOutlook. The report is organized in the following manner:

Detailed Drug Insights

This section reviews the important characteristics (eg, therapeutic use, clinical profile, competitive environment and regulatory timeline) for key pipeline drugs with potential FDA approvals by the end of the 4th quarter.

[Read more](#)

Extended Generic Pipeline Forecast

This section provides a summary of upcoming first-time generic drugs and biosimilars that may be approved in the upcoming two years.

[Read more](#)

Extended Brand Pipeline Forecast

This table provides a summary of developmental drugs, including both traditional and specialty medications that may be approved in the upcoming two years.

[Read more](#)

Key Pending Indication Forecast

This table provides a summary of key new indications that are currently under review by the FDA and may be approved in the upcoming 12 months.

[Read more](#)

Past and future reviews

Please note that RxOutlook highlights select near-term approvals. Some drugs may not appear in this issue because they have been reviewed in previous editions of RxOutlook. Drugs of interest that are earlier in development or with expected approvals beyond 4th quarter 2019 may appear in future reports; however, for those who need an initial look at the full pipeline, please refer to the [Brand Pipeline Forecast Table](#) found later in this report.

Drugs reviewed in detail in the 1Q:2019 and 2Q:2019 report:

- Afamelanotide
- Celiprolol (Edsivo™)
- Dolutegravir/lamivudine (Dovato®)
- Entrectinib
- Esketamine (Spravato™)
- Golodirsen
- Mannitol (inhaled formulation)
- Metoclopramide (Gimoti™)
- NKTR-181
- Onasemnogene abeparovvec (Zolgensma®)
- Pexidartinib
- Pitolisant
- Polatuzumab vedotin
- Quizartinib
- Risankizumab (Skyrizi™)
- Selinexor (Xpovio™)
- Semaglutide (oral formulation)
- Tafamidis (Vyndaqel®) and tafamidis meglumine (Vyndamax®)
- Upadacitinib

Past issues of RxOutlook can be found at <https://professionals.optumrx.com/publications.html>.

Getting acquainted with pipeline forecast terms

Clinical trial phases

| | |
|------------------|---|
| Phase I trials | Researchers test an experimental drug or treatment in a small group of people for the first time to evaluate its safety, determine a safe dosage range, and identify side effects. |
| Phase II trials | The experimental study drug or treatment is given to a larger group of people to see if it is effective and to further evaluate its safety. |
| Phase III trials | The experimental study drug or treatment is given to large groups of people to confirm its effectiveness, monitor side effects, compare it to commonly used treatments, and collect information that will allow the experimental drug or treatment to be used safely. |
| Phase IV trials | Post marketing studies delineate additional information including the drug's risks, benefits, and optimal use. |

Pipeline acronyms

| | |
|-----------|---|
| ANDA | Abbreviated New Drug Application |
| BLA | Biologic License Application |
| CRL | Complete Response Letter |
| FDA | Food and Drug Administration |
| MOA | Mechanism of Action |
| NME | New Molecular Entity |
| NDA | New Drug Application |
| sBLA | Supplemental Biologic License Application |
| sNDA | Supplemental New Drug Application |
| OTC Drugs | Over-the-Counter Drugs |
| PDUFA | Prescription Drug User Fee Act |
| REMS | Risk Evaluation and Mitigation Strategy |

Detailed insights
on key drugs



Darolutamide (Brand Name: Nubeqa®)

Manufacturer: Bayer/Orion

Regulatory designations: Fast Track

FDA approval date: 7/30/2019 (*approved ahead of originally anticipated approval date*)

Therapeutic use

Darolutamide was approved for the treatment of patients with non-metastatic castration-resistant prostate cancer (nmCRPC).

Prostate cancer is the third most commonly diagnosed malignancy in the U.S. In 2019, it is estimated that there will be 174,650 new cases of prostate cancer and an estimated 31,620 people will die of the disease.

CRPC is an advanced form of the disease where the cancer keeps progressing even when the amount of testosterone is reduced to very low levels in the body. Most men with advanced prostate cancer eventually stop responding to androgen deprivation therapy (ie, castration) and require additional therapy when prostate specific antigen (PSA) levels begin to rapidly rise.

Clinical profile

Darolutamide is an androgen receptor inhibitor with a distinct chemical structure that competitively inhibits androgen binding, androgen receptor nuclear translocation, and androgen receptor-mediated transcription. Darolutamide decreased prostate cancer cell proliferation in vitro and tumor volume in mouse xenograft models of prostate cancer.

Pivotal trial data:

Darolutamide was evaluated in a double-blind, placebo-controlled, randomized study (ARAMIS) in 1,509 patients with nmCRPC. All patients received a gonadotropin-releasing hormone analog (GnRH) concurrently or had a bilateral orchiectomy. The major efficacy endpoint was metastasis free survival (MFS). The median MFS was 40.4 months for darolutamide-treated patients vs. 18.4 months for the placebo group (hazard ratio 0.41; 95% CI: 0.34, 0.50; $p < 0.0001$). Overall survival data were not mature at the time of final MFS analysis.

Safety:

The most common adverse events with darolutamide use were fatigue, pain in extremity, and rash.

Dosing:

The recommended dose of darolutamide is 600 mg (two 300 mg tablets) orally, twice daily. Patients receiving darolutamide should also receive a GnRH analog concurrently or should have had a bilateral orchiectomy.

- Treatment of patients with nmCRPC

- Androgen receptor inhibitor
- Oral formulation
- Median MFS: 40.4 months vs. 18.4 months for placebo ($p < 0.0001$)
- Common AEs: fatigue, pain in extremity, rash
- Dosing: twice a day

Darolutamide (Brand Name: Nubeqa) (continued...)

Competitive environment

Darolutamide provides an additional oral treatment option for patients with nmCRPC. Erleada™ (apalutamide) and Xtandi® (enzalutamide) are androgen receptor inhibitors also approved for nmCRPC; however, darolutamide's distinct chemical structure appears to provide a superior safety profile vs. both of those products (eg, Erleada and Xtandi both carry a warning for increased risk of falls/fractures and seizures).

However, the efficacy (eg, improvement in median MFS) of darolutamide appears to be similar to Erleada and Xtandi and darolutamide was not compared against either product in clinical trials. In addition, darolutamide must be dosed orally twice a day whereas Erleada and Xtandi are both once a day.

The WAC for darolutamide is \$11,550 per 30 days.

- Advantages: additional treatment option for nmCRPC, safety advantages vs. competitors (Erleada, Xtandi), oral
- Disadvantages: similar efficacy to existing treatment options, lack of head-to-head trial data vs. Erleada and Xtandi, twice a day dosing
- WAC = \$11,550 per 30 days

Fedratinib (Brand Name: Inrebic®)

Manufacturer: Celgene

Regulatory designations: Orphan Drug

FDA approval date: 8/16/2019

Therapeutic use

Fedratinib was approved for the treatment of adult patients with intermediate-2 or high-risk primary or secondary (post-polycythemia vera or post-essential thrombocythemia) myelofibrosis (MF)

Myelofibrosis is a rare bone marrow disorder that disrupts the body's normal production of blood cells. Bone marrow is gradually replaced with fibrous scar tissue, which limits the ability of the bone marrow to make red blood cells. A key hallmark of the disease is an enlarged spleen. In the U.S. myelofibrosis occurs in 1.5 of every 100,000 people each year.

The only curative treatment is hematopoietic stem cell transplantation (HSCT) which is reserved for patients with severe myelofibrosis.

Fedratinib (continued...)

- Treatment of patients with primary or secondary myelofibrosis

Clinical profile

Fedratinib is a highly selective Janus Associated Kinase 2 (JAK2) inhibitor. Abnormal activation of JAK2 is associated with myeloproliferative neoplasms, including myelofibrosis and polycythemia vera.

Pivotal trial data:

Fedratinib was evaluated in a double-blind, placebo-controlled, randomized study (JAKARTA) in 289 patients with primary or secondary myelofibrosis, as well as a single-arm, open-label study (JAKARTA2) in 97 patients with primary or secondary myelofibrosis previously exposed to Jakafi® (ruxolitinib). Jakafi is a JAK1/JAK2 inhibitor also approved for myelofibrosis. The primary endpoint in both studies was spleen response rate at week 24 (or 6 cycles), defined as the proportion of patients who had a reduction in spleen volume (as determined by a blinded CT and MRI) of at least 35%.

In the JAKARTA study, a significant reduction in spleen volume was achieved in 37% of patients receiving fedratinib vs. 1% with placebo ($p < 0.0001$). In JAKARTA2 (previous treatment with ruxolitinib), 31% (95% CI: 22, 41) of patients treated with fedratinib achieved the primary endpoint of spleen volume reduction.

Safety:

The most common adverse events with fedratinib use were anemia, diarrhea, nausea, and vomiting.

Dosing:

In the pivotal trials, fedratinib was administered orally once a day.

Competitive environment

Fedratinib offers an additional treatment option for myelofibrosis. There is a high unmet need for treatment of this condition, particularly in patients who are non-responders or cannot tolerate Jakafi. In addition, fedratinib is dosed orally once a day while Jakafi is dosed twice a day.

However, a safety signal for Wernicke's encephalopathy, a rare neurological disorder associated with vitamin B1 deficiency, was identified after the JAKARTA trial which originally halted development for fedratinib. A boxed warning for encephalopathy is included in the fedratinib drug label.

In addition, there are no head-to-head data comparing fedratinib vs. Jakafi and no overall survival (OS) data is currently available for fedratinib.

For reference, the WAC price for Jakafi is \$13,000 per 30 days.

- JAK2 inhibitor
- Oral formulation
- Spleen response rate: 37% vs. 1% with placebo ($p < 0.0001$)
- Spleen response rate (in prior Jakafi-treated patients): 31% (95% CI: 22, 41)
- anemia, diarrhea, nausea, vomiting
- Dosing: once daily

- Advantages: additional treatment option for myelofibrosis, high unmet need, oral, once a day
- Disadvantages: boxed warning for encephalopathy, lack of head-to-head data vs. Jakafi, lack of OS data
- Reference WAC (Jakafi) = \$13,000 per 30 days

Tenapanor (Brand Name: Ibsrela)

Manufacturer: Ardelyx

Expected FDA decision: 9/13/2019

Therapeutic use

Tenapanor is in development for the treatment of patients with irritable bowel syndrome with constipation (IBS-C).

IBS is a chronic gastrointestinal (GI) disorder characterized by abdominal pain and altered bowel habits. In patients with IBS-C, chronic abdominal pain is associated with constipation. It is estimated that about 11 million people in the U.S. are affected by IBS-C.

Clinical profile

Tenapanor is a novel sodium transporter sodium-hydrogen exchanger 3 (NHE3) inhibitor. It is believed to work in IBS-C by reducing sodium absorption in the GI tract which increases intestinal fluid. Data from preclinical studies also suggest that tenapanor reduces abdominal pain caused by IBS-C through the inhibition of transient receptor potential vanilloid 1 (TRPV-1) dependent signaling. TRPV-1 is a pain target known for transmitting painful stimuli.

Pivotal trial data:

Tenapanor was evaluated in two, double-blind, placebo-controlled, randomized trials (T3MPO-1 and T3MPO-2) in 1,203 patients with IBS-C. The primary endpoint was the combined responder rate (6/12 weeks), which was defined as at least a 30% reduction in abdominal pain and an increase of one or more complete spontaneous bowel movements in the same week for at least 6 of the 12 weeks of the treatment period.

In the T3MPO-1 trial, a greater proportion of tenapanor-treated patients vs. placebo-treated patients achieved the primary endpoint (27.0% vs. 18.7%, respectively; $p = 0.02$). Similar results were observed in T3MPO-2, with 36.5% and 23.7% of patients meeting the primary endpoint with tenapanor and placebo, respectively ($p < 0.001$).

Safety:

The most common adverse events with tenapanor use were diarrhea, nausea, and abdominal distension.

Dosing:

In the pivotal trials, tenapanor was administered orally twice a day.

- Treatment of patients with IBS-C

- Sodium transporter NHE3 inhibitor
- Oral formulation
- Responder rate: 27.0% to 36.5% vs. 18.7 to 23.7% with placebo
- Common AEs: diarrhea, nausea, abdominal distension
- Dosing: twice a day

Tenapanor (continued...)

Competitive environment

Tenapanor offers a novel mechanism of action (MOA) for the treatment of IBS-C. There is an unmet need for novel therapies for IBC, particularly due to the heterogeneity of the condition. In addition, tenapanor is also in development for the treatment of hyperphosphatemia, which could potentially add to its future market potential.

While tenapanor does offer a novel MOA for the treatment of IBS-C, it is a relatively late market entry and there are several alternatives available, including Linzess® (linaclotide), Trulance® (plecanatide), and Amitiza® (lubiprostone). Tenapanor also demonstrated modest efficacy in the trials and compared indirectly, does not appear to be more efficacious vs. existing treatment options. Tenapanor also must be dosed twice a day whereas several treatment options currently available may be dosed once a day (eg, Trulance, Linzess).

For reference, the WAC price for Linzess and Trulance is approximately \$5,000 per year.

- Advantages: novel MOA, unmet need, oral, also in development for the treatment of hyperphosphatemia
- Disadvantages: alternatives available, modest efficacy, twice a day dosing
- Reference WAC (Linzess, Trulance) = ~\$5,000 per year

Diroximel fumarate (Brand Name: Vumerity)

Manufacturer: Alkermes/Biogen

Expected FDA decision: 10/17/2019

Therapeutic use

Diroximel fumarate is in development for the treatment of relapsing forms of multiple sclerosis (MS).

MS is a chronic, inflammatory, autoimmune disease of the central nervous system. MS affects nearly 1 million people in the U.S. and it is among the most common causes of neurological disability in young adults.

Clinical profile

Diroximel fumarate is designed to be rapidly metabolized to monomethyl fumarate, which is the active metabolite of Tecfidera® (dimethyl fumarate). Tecfidera is also approved for the treatment of relapsing MS.

The mechanism by which fumarate products exert their therapeutic effect in MS is unknown. Monomethyl fumarate has been shown to activate the Nuclear factor (erythroid-derived 2)-like 2 (Nrf2) pathway. The Nrf2 pathway is involved in the cellular response to oxidative stress.

Pivotal trial data:

Alkermes/Biogen are seeking approval of diroximel fumarate under the 505(b)(2) regulatory pathway, referencing Tecfidera efficacy data. In addition, the FDA filing was also supported by an open-label, two-year safety study in patients with relapsing forms of MS. In 696 MS patients, diroximel fumarate showed a significant reduction in the annualized relapse rate (ARR) by 79% over one year when compared to baseline.

Safety:

The most common adverse events with diroximel fumarate use were flushing, pruritus, and GI side effects.

The GI tolerability of diroximel fumarate was compared vs. Tecfidera in a double-blind, active-controlled, five-week trial. The primary endpoint was the number of days patients reported GI symptoms with a symptom intensity score ≥ 2 on the Individual Gastrointestinal Symptom and Impact Scale (IGISIS) (0 = not at all; 10 = extreme). Diroximel fumarate was statistically superior to Tecfidera, with patients treated with diroximel fumarate self-reporting significantly fewer days of key GI symptoms with intensity scores ≥ 2 on the IGISIS ($p = 0.0003$). The most common adverse events reported in the study for both treatment groups were flushing, diarrhea and nausea (32.8%, 15.4% and 14.6% for diroximel fumarate; 40.6%, 22.3% and 20.7% for Tecfidera). The proportion of patients with an adverse event leading to study discontinuation was 1.6% for diroximel fumarate and 6.0% for Tecfidera. Of those, the proportion of patients who discontinued due to GI adverse events was 0.8% for diroximel fumarate and 4.8% for Tecfidera.

Dosing:

In the pivotal trials, diroximel fumarate was administered orally twice a day.

Diroximel fumarate (continued...)

- Treatment of relapsing forms of MS
- Nrf2 pathway activator
- Oral formulation
- ARR: 79% reduction over one year when compared to baseline
- Common AEs: flushing, pruritus, GI side effects
- Dosing: twice a day

Competitive environment

If approved, diroximel fumarate would provide an additional oral treatment option for MS with potentially superior GI tolerability vs. Tecfidera.

However, diroximel fumarate would be entering a crowded marketplace with several oral and injectable alternatives available for treating relapsing forms of MS. Diroximel fumarate has a similar clinical profile as Tecfidera with no data suggesting improved efficacy. Like Tecfidera, it must also be dosed twice a day.

For reference, the WAC price for Tecfidera is approximately \$95,000 per year.

- Advantages: potentially superior GI tolerability vs. Tecfidera, oral
- Disadvantages: alternatives available, similar clinical profile as Tecfidera, twice a day
- Reference WAC (Tecfidera) = ~\$95,000 per year

Brolucizumab (Brand Name: Beovu)

Manufacturer: Novartis

Expected FDA decision: 11/2019

Therapeutic use

Brolucizumab is in development for the treatment of neovascular (wet) age-related macular degeneration (AMD).

The American Academy of Ophthalmology estimates that 15 million North Americans currently have AMD with about 10% to 15% suffering from neovascular (wet) AMD. Wet AMD is a degenerative disease of the central portion of the retina characterized by growth of abnormal vessels in the subretinal space; this results in loss of central vision and, if untreated, can lead to blindness.

- Treatment of neovascular (wet) AMD

Brolucizumab (continued...)

Clinical profile

Brolucizumab is a vascular endothelial growth factor (VEGF) inhibitor. Increased signaling through the VEGF pathway is associated with pathologic ocular angiogenesis and retinal edema. Inhibition of the VEGF pathway has been shown to reduce the growth of neovascular lesions, resolve retinal edema and improve vision in patients with retinal vascular diseases.

Brolucizumab differs from currently available VEGF inhibitors because it is a humanized single-chain antibody fragment (others are full length monoclonal antibodies). Due to their small size, single-chain antibody fragments can provide enhanced tissue penetration and rapid clearance from systemic circulation.

Pivotal trial data:

The efficacy of brolucizumab was evaluated in two double-masked, active-controlled, randomized studies (HAWK and HARRIER) in 1,817 untreated wet AMD patients. Patients were randomized to brolucizumab or Eylea® (aflibercept). Brolucizumab was administered as a maintenance dose every 8 or 12 weeks (depending on disease activity) vs. every 8 weeks for Eylea. At week 48 in both trials, brolucizumab demonstrated noninferiority to Eylea for the primary endpoint of mean best-corrected visual acuity (BCVA) change from baseline ($p < 0.001$).

At week 16, fewer brolucizumab patients had disease activity vs. Eylea in HAWK (24.0% vs. 34.5%; $p = 0.001$) and HARRIER (22.7% vs. 32.2%; $p = 0.002$). Other anatomic retinal fluid outcomes also favored brolucizumab.

Safety:

The most common adverse events with brolucizumab use were conjunctival hemorrhage, reduced visual acuity, and eye pain.

Dosing:

In the pivotal trials, brolucizumab was administered as an intravitreal injection. Patients received a loading dose of three monthly injections, followed by injections every 12 weeks. The interval could be adjusted to every 8 weeks if disease activity was present.

Competitive environment

If approved, brolucizumab would provide an additional VEGF inhibitor treatment option for wet AMD. Other approved VEGF inhibitors for wet AMD include Eylea and Lucentis® (ranibizumab). While brolucizumab did not demonstrate superiority for the primary endpoint, key secondary outcomes did favor brolucizumab vs. Eylea. Brolucizumab may also be administered every 12 weeks. The recommended dosing frequency for Eylea is every 8 weeks. The dosing frequency for Eylea can be extended to every 12 weeks after one year of effective therapy but it is not as effective as the recommended every 8 week dosing regimen. The recommended dosing frequency for Lucentis is once every month (approximately 28 days)

However, in the clinical trials about 50% of brolucizumab-treated patients required dosing every 8 weeks. In addition, brolucizumab is a relatively late market entry for the treatment of wet AMD and the other VEGF inhibitors are also approved for other ophthalmic indications (eg, macular edema following retinal vein occlusion, diabetic macular edema, diabetic retinopathy). Brolucizumab may also face future competition as Allergan's abicipar pegol could be available in late 2020.

For reference, the WAC price for Eylea is approximately \$30,000 per year.

- VEGF inhibitor
- Intravitreal formulation
- Non-inferior to Eylea for mean BCVA change from baseline
- Demonstrated superiority to Eylea for improvements in disease activity and other anatomical retinal fluid outcomes
- Common AEs: conjunctival hemorrhage, reduced visual acuity, eye pain
- Maintenance dosing: every 8 to 12 weeks

- Advantages: potential improved efficacy vs. Eylea, potential for fewer intravitreal injections (every 12 weeks)
- Disadvantages: ~50% of patients still required injections every 8 weeks, late market entry, currently available VEGF inhibitors are also approved for other ophthalmic indications, potential future competition (eg, abicipar pegol)
- Reference WAC (Eylea) = ~\$30,000 per year

Lasmiditan (Brand Name: To be determined)

Manufacturer: Eli Lilly

Expected FDA decision: 11/14/2019

Therapeutic use

Lasmiditan is in development for the acute treatment of migraine headaches in adults.

Patients suffering from migraines have recurrent episodes of severe headache accompanied by other symptoms including nausea, vomiting, sensitivity to light and sound, and changes in vision. An estimated 30 million adults in the U.S. experience migraine headaches.

Clinical profile

Lasmiditan is a first-in-class drug which selectively targets serotonin 5-HT_{1F} receptors, including those expressed in the trigeminal pathway.

Triptans such as sumatriptan and rizatriptan are the current standard of care for the acute treatment of migraine headaches. Triptans are serotonin 5-HT_{1B/1D} receptor agonists. They can cause vasoconstriction due to activation of the 5-HT_{1B} receptors which is thought to drive a small increased risk of serious cardiovascular adverse events.

Pivotal trial data:

The efficacy of lasmiditan was evaluated in two double-blind, placebo-controlled, randomized trials (SAMURAI and SPARTAN). The co-primary endpoints were the proportion of patients headache pain-free and most bothersome symptom (MBS)-free (eg, sensitivity to light or sound, or nausea) at 2 hours post-dose.

In SAMURAI, more patients dosed with lasmiditan 100 mg and 200 mg were free of headache pain at 2 hours after dosing vs. placebo (28.2% and 32.2% vs. 15.3%, respectively; $p < 0.001$ for both doses). More patients dosed with lasmiditan 100 mg and 200 mg were also free of their MBS compared with placebo (40.9% and 40.7% vs. 29.5%; $p < 0.001$ for both doses).

Similar results were observed in the SPARTAN trial. Lasmiditan was associated with significantly more patients free of headache at 2 hours post-dose (lasmiditan 200 mg: 38.8%, $p < 0.001$; 100 mg: 31.4%, $p < 0.001$; 50 mg: 28.6%, $p = 0.003$ vs. placebo 21.3%) and freedom from MBS (lasmiditan 200 mg: 48.7%, $p < 0.001$; 100 mg: 44.2%, $p < 0.001$; 50 mg: 40.8%, $p = 0.009$ vs. placebo 33.5%).

Safety:

The most common adverse events with lasmiditan use were dizziness, somnolence, and paresthesia.

Dosing:

In the pivotal trials, lasmiditan was administered orally as needed after onset of migraine headache.

- Acute treatment of migraine headaches in adults
- Serotonin 5-HT_{1F} receptor agonist
- Oral formulation
- Headache pain-free at 2 hrs post-dose: 32.2% to 38.8% with lasmiditan 200 mg vs. 15.3% to 21.3% with placebo
- MBS-free at 2 hrs post-dose: 40.7% to 48.7% with lasmiditan 200 mg vs. 29.5% to 33.5% with placebo
- Safety: dizziness, somnolence, paresthesia
- Dosing: as needed after onset of migraine headache

Lasmiditan (continued...)

Competitive environment

If approved, lasmiditan would add to the treatment armamentarium for acute migraine treatment and it has a novel MOA as a selective serotonin 5-HT_{1F} agonist. Lasmiditan's selectivity for 5-HT_{1F} could make it a potentially attractive alternative treatment option in patients who have contraindications or are non-responders to triptan therapies.

The triptans and lasmiditan both target serotonin activity, but with different sub-receptor selectivity. There are lingering questions whether this difference in MOA will result in true efficacy or safety differences between the two classes. Lasmiditan would likely be reserved as a second-line agent due to the availability of several generic triptan alternatives and a lack of head-to-head data for lasmiditan vs. triptans. In addition, lasmiditan will potentially have competition for this niche of patients (triptan non-responders and patients unable to use triptans) as oral anti-calcitonin related-gene peptide (CGRP) antagonists are also in development for acute treatment of migraine.

The projected average WAC price for lasmiditan is approximately \$1,750 per year; however this will vary patient to patient since lasmiditan is administered as needed.

- Advantages: novel MOA, unmet need in patients who do not respond or cannot use triptans, oral
- Disadvantages: generic alternatives available, lack of head-to-head data vs. triptans, potential future competition with oral CGRP antagonists
- Projected WAC = ~\$1,750 per year

Ubrogepant (Brand Name: To be determined)

Manufacturer: Allergan

Expected FDA decision: 12/2019

Therapeutic use

Similar to lasmiditan, ubrogepant is also in development for the acute treatment of migraine headaches in adults.

Clinical profile

Ubrogepant is a highly potent CGRP receptor antagonist. CGRP and its receptors are expressed in regions of the nervous system associated with migraine pathophysiology.

Pivotal trial data:

The efficacy of ubrogepant was evaluated in two double-blind, placebo-controlled, randomized studies (ACHIEVE I and ACHIEVE II). The co-primary endpoints were the proportion of patients that were headache pain-free and MBS-free at 2 hours post-dose.

In the ACHIEVE I trial, more patients dosed with ubrogepant 50 mg and 100 mg were free of headache pain at 2 hours after dosing vs. placebo (19.2% and 21.2% vs. 11.8%, respectively; 50 mg vs. placebo $p = 0.0023$, 100 mg vs. placebo, $p = 0.0003$). More patients treated with ubrogepant were also free of their MBS compared with placebo, (38.6% and 37.7% vs. 27.8%, respectively, $p = 0.0023$ for both doses).

Similar results were observed in the ACHIEVE II trial, which evaluated ubrogepant 25 mg and 50 mg. More patients dosed with ubrogepant were free of headache pain at 2 hours after dosing vs. placebo (20.7% and 21.8% vs. 14.3%, respectively; 25 mg vs. placebo, $p = 0.0285$, 50 mg vs. placebo, $p = 0.0129$). Compared with placebo, more patients dosed with ubrogepant 50 mg were also free of their MBS (38.9% vs. 34.1%, $p = 0.0129$). However, ubrogepant 25 mg failed to demonstrate statistical significance vs. placebo for this endpoint ($p = 0.0711$).

Safety:

The most common adverse events with ubrogepant use were nausea, somnolence, dry mouth, and liver enzyme elevations.

Dosing:

In the pivotal trials, ubrogepant was administered orally as needed after onset of migraine headache.

- Acute treatment of migraine headaches in adults
- CGRP antagonist
- Oral formulation
- Headache pain-free at 2 hrs post-dose: 19.2% to 21.8% vs. 11.8% to 14.3% with placebo
- MBS-free at 2 hrs post-dose: 37.7% to 38.9% vs. 27.4% to 27.8% with placebo
- Common AEs: nausea, somnolence, dry mouth, liver enzyme elevations
- Dosing: as needed after onset of migraine headache

Ubrogepant (continued...)

Competitive environment

If approved, ubrogepant would represent the first approved oral CGRP antagonist. Subcutaneously administered CGRP antagonists are only approved for migraine prophylaxis. Similar to lasmiditan, ubrogepant would be a potential treatment option in acute migraine patients who have contraindications to triptans or who are non-responders to triptan therapy.

Ubrogepant would likely be reserved as a second-line agent due to the availability of generic triptan alternatives and a lack of head-to-head data vs. triptans, the well-established standard of care. It would also be competing with lasmiditan and other oral CGRP antagonists in development for acute migraine treatment (eg, rimegepant), which are expected to enter the market in 2020.

Compared indirectly vs. lasmiditan, ubrogepant appears to be better tolerated but also appears to be less efficacious for acute migraine treatment; however, it is difficult to compare results across different clinical trials.

The projected average WAC price for ubrogepant is approximately \$1,750 per year; however this will vary from patient to patient since it is administered as needed.

- Advantages: potentially first approved oral CGRP antagonist, unmet need in patients who do not respond to or cannot use triptans, oral
- Disadvantages: generic alternatives available, lack of head-to-head data vs. triptans, potential future competition with lasmiditan and other oral CGRP antagonists (eg, rimegepant)
- Projected WAC = ~\$1,750 per year

RVT-802 (Brand Name: To be determined)

Manufacturer: Enzyvant/Roivant

Regulatory designations: Orphan Drug, Breakthrough Therapy, Regenerative Medicine Advanced Therapy

Expected FDA decision: 12/2019

Therapeutic use

RVT-802 is in development for the treatment of primary immune deficiency resulting from congenital athymia.

Congenital athymia is a rare condition where patients are born without a thymus, resulting in a severe immunodeficiency due to the inability to produce normally functioning T cells. In a healthy, functioning immune system, T cells that start as stem cells in bone marrow become fully developed in the thymus. Approximately 20 infants are born each year in the U.S. with congenital athymia, which is fatal if untreated. Death typically occurs in the first 24 months of life due to infection.

Currently, there are no FDA-approved therapies for this condition and the standard of care has been investigational thymic tissue transplantation or HSCT.

- Treatment of primary immune deficiency resulting from congenital athymia

RVT-802 (continued...)

Clinical profile

RVT-802 is an allogeneic cultured postnatal thymus tissue-derived product manufactured from tissue obtained from unrelated donors under the age of 9 months. RVT-802 is designed to replicate this process in the absence of a thymus.

Pivotal trial data:

At the time of the FDA filing, a total of 93 patients received RVT-802 across multiple clinical studies, including 85 patients who met the criteria for inclusion in the efficacy analysis. The Kaplan-Meier estimates of survival at year 1 and year 2 post-treatment were 76% (95% CI: 66, 84) and 75% (95% CI: 66, 83), respectively. For patients surviving 12 months post-treatment, there was a 93% probability of surviving 10 years post-treatment.

Safety:

The most commonly reported adverse events with RVT-802 use include thrombocytopenia, neutropenia, pyrexia, and proteinuria.

Dosing:

RVT-802 is administered as a one-time therapy. It is inserted into a patient's quadriceps muscles by means of an open surgical procedure.

Competitive environment

While RVT-802 has been available as an investigational therapy, it could potentially be the first FDA-approved therapy for congenital athymia. There is a significant unmet need for the treatment of congenital athymia as death typically occurs in children within 24 months if untreated.

While the number of patients treated with RVT-802 over several clinical studies is small, the survival estimates do appear to be strong (75% at two years post-treatment). RVT-802 does require implantation into the quadriceps muscles and administration may be limited to specific centers that are able to perform the procedure.

- Tissue-based therapy (allogeneic thymic tissue)
- Implantation via quadriceps
- Survival at year 2 post-treatment: 75% (95% CI: 66, 83)
- Common AEs: thrombocytopenia, neutropenia, pyrexia, proteinuria
- Dosing: one-time therapy

- Advantages: potentially first FDA-approved therapy for congenital athymia, significant unmet need
- Disadvantages: implantation via an open surgical procedure, administration likely to be limited to specific centers of care

Luspatercept (Brand Name: To be determined)

Manufacturer: Celgene/Acceleron

Regulatory designations: Orphan Drug, Fast Track

Expected FDA decision: 12/4/2019 (beta-thalassemia); 4/4/2020 (myelodysplastic syndromes [MDS])

Therapeutic use

Luspatercept is in development for the treatment of adult patients who require red blood cell (RBC) transfusions with: beta-thalassemia-associated anemia or very low to intermediate-risk MDS-associated anemia.

Beta-thalassemia is a rare hereditary blood disorder characterized by reduced levels of functional hemoglobin. Symptomatic cases occur in approximately 1 in 100,000 individuals. HSCT can be curative; however it is limited by availability of donors and risks associated with the procedure. The current standard of care for management of severe beta-thalassemia is life-long RBC transfusions and iron chelation.

MDS are a rare group of blood disorders that occur as a result of disordered development of blood cells within the bone marrow. RBCs, white blood cells and platelets are affected. In some affected individuals, MDS may progress to life-threatening failure of the bone marrow or develop into an acute leukemia. Approximately 20,000 new cases of MDS are diagnosed each year in the U.S. Similar to beta-thalassemia, HSCT is the only curative treatment. Supportive care for patients with anemia can include erythropoietin stimulating agents (ESAs) or RBC transfusions.

- Treatment of adult patients with beta-thalassemia-associated anemia or very low to intermediate-risk MDS-associated anemia

Luspatercept (continued...)

Clinical profile

Luspatercept is a novel, first-in-class erythroid maturation agent. Luspatercept inhibits members of the TGF-beta superfamily which are involved in late stages of erythropoiesis and which inhibit RBC maturation. Luspatercept attempts to restore RBC production.

Pivotal trial data:

The efficacy of luspatercept was evaluated in a double-blind, placebo-controlled, randomized study (BELIEVE) in 336 adult patients with beta-thalassemia-associated anemia who require RBC transfusions. Patients received luspatercept or placebo and all patients received background best supportive care. The primary endpoint was the proportion of patients experiencing a reduction in transfusion burden ($\geq 33\%$) during weeks 13 to 24. Overall, 21.4% of patients receiving luspatercept experienced a reduction in transfusion burden vs. 4.5% with placebo ($p < 0.0001$).

Luspatercept was also evaluated in a double-blind, placebo-controlled, randomized trial (MEDALIST) in 229 adults with RBC transfusion-dependent MDS who were either refractory, intolerant, or not candidates for ESA therapy. Transfusion independence for ≥ 8 weeks during first 24 weeks of the trial was achieved in 37.9% of patients treated with luspatercept vs. 13.2% with placebo ($p < 0.0001$).

Safety:

The most common adverse events with luspatercept use were thromboembolic events (deep venous thrombosis, pulmonary embolism, portal vein thrombosis, ischemic stroke, thrombophlebitis, and superficial phlebitis), bone pain, hypertension, diarrhea, and nausea.

Dosing:

In the pivotal trials, luspatercept was administered subcutaneously (SC) every 21 days.

Competitive environment

Luspatercept offers a novel MOA for the treatment of both beta-thalassemia and MDS. There is a high unmet need for treatments for both conditions and it would potentially be the first FDA-approved therapy for beta-thalassemia. Aside from curative HSCT, these conditions have primarily been managed with blood transfusions which can be costly and associated with complications (eg, iron overload).

Luspatercept does require SC administration by a healthcare provider and while it may reduce or eliminate the need for blood transfusions in some patients, luspatercept is a chronic therapy and it may soon have competition from a potentially curative therapy. LentiGlobin/Zynteglo is a one-time gene therapy treatment for beta-thalassemia that is preparing to file with the FDA and could become available in mid-to-late 2020.

Additionally, luspatercept was associated with a higher overall rate of thromboembolic events (3.6% vs. 0.9% with placebo) in the beta-thalassemia trial; although, all luspatercept-affected patients reportedly had multiple risk factors for thrombotic events.

- Erythroid maturation agent
 - SC formulation
 - Beta-thalassemia – reduction in transfusion burden at wks 13 to 24: 21.4% vs. 4.5% with placebo ($p < 0.0001$)
 - MDS – transfusion independence (for ≥ 8 wks of 24 wks): 37.9% vs. 13.2% with placebo ($p < 0.0001$)
 - Common AEs: thromboembolic events, bone pain, hypertension, diarrhea/nausea
 - Dosing: every 21 days
-
- Advantages: novel MOA, potentially first approved therapy for beta-thalassemia, high unmet need (can reduce or eliminate the need for blood transfusions)
 - Disadvantages: requires SC administration by a healthcare provider, not curative, potential future gene therapy competition for beta-thalassemia, potential safety signal for thromboembolic events

Lemborexant (Brand Name: To be determined)

Manufacturer: Eisai/Imbrium Therapeutics

Expected FDA decision: 12/27/2019

Therapeutic use

Lemborexant is in development for the treatment of insomnia in adult patients.

Insomnia affects approximately 30% of the adult population worldwide and is characterized by difficulty falling asleep, staying asleep, or both.

Clinical profile

Lemborexant inhibits orexin signaling by binding competitively to both orexin receptor subtypes (orexin receptor 1 and 2). In individuals with sleep-wake disorders, orexin signaling is believed to regulate wakefulness and inhibiting inappropriate orexin signaling may enable initiation and maintenance of sleep.

Pivotal trial data:

The efficacy of lemborexant was evaluated in a double-blind, placebo-controlled, active comparator, randomized trial (SUNRISE-1) in 1,006 patients 55 years and older with insomnia disorder. In this study, patients were randomized to receive placebo or one of three treatment regimens (lemborexant 5 mg, lemborexant 10 mg, zolpidem ER 6.25 mg). In addition, lemborexant was evaluated in a double-blind, placebo-controlled, randomized study (SUNRISE-2) in 949 patients between the ages of 18 to 88 years. SUNRISE-2 did not include zolpidem ER as an active control. The primary endpoint was sleep onset, as measured by latency to persistent sleep.

In the pooled analysis of both trials, median reductions from baseline in subjective sleep onset latency were larger for lemborexant 5 mg and 10 mg vs. placebo during the first seven days of treatment (-12.9 minutes for lemborexant 5 mg, -13.6 minutes for lemborexant 10 mg, -2.9 minutes for placebo) and at the end of month one of treatment (-16.1 minutes for lemborexant 5 mg, -17.9 minutes for lemborexant 10 mg, -5.2 minutes for placebo). Lemborexant also demonstrated superiority vs. placebo for key secondary sleep endpoints (eg, sleep efficiency, wake after sleep onset [WASO]) and demonstrated statistical superiority vs. zolpidem ER for WASO in the second half of the night.

Safety:

The most common adverse events with lemborexant use were somnolence, headache, and nasopharyngitis.

Dosing:

In the pivotal trials, lemborexant was administered orally once a day at bedtime.

- Treatment of insomnia in adult patients
- Orexin receptor 1 and 2 antagonist
- Oral formulation
- Superiority vs. placebo for all primary and key secondary sleep endpoints
- Common AEs: somnolence, headache, nasopharyngitis
- Dosing: once a day at bedtime

Lemborexant (continued...)

Competitive environment

Insomnia represents a large market with approximately 30% of the population affected by the disorder. The FDA also recently added a boxed warning for several insomnia drugs (ie, eszopiclone, zaleplon, and zolpidem), for rare but serious injuries due to sleep behaviors, including sleepwalking, sleep driving, and engaging in other activities while not fully awake. The label for Belsomra® (suvorexant), another orexin receptor antagonist, was not updated with this boxed warning; therefore it is unlikely that lemborexant would be impacted by this limitation as well.

However, many of the drugs used for insomnia are available generically and lemborexant is a late market entry. Aside from drugs with different MOAs, Belsomra has also been available since 2014. Similar to other insomnia drugs, including Belsomra, lemborexant would likely require DEA scheduling.

For reference, the WAC price for Belsomra is approximately \$350 per 30 days.

- Advantages: potential superiority vs. zolpidem ER, large market, oral, once a day
- Disadvantages: generic alternatives available, late market entry, likely DEA scheduling
- Reference WAC (Belsomra) = ~\$350 per 30 days

Lumateperone (Brand Name: To be determined)

Manufacturer: Intra-Cellular Therapies

Regulatory designations: Fast Track

Expected FDA decision: 12/27/2019

Therapeutic use

Lumateperone is in development for the treatment of adult patients with schizophrenia.

Schizophrenia is a common severe mental illness that affects approximately 2.4 million people in the U.S. It is characterized by positive symptoms (eg, hallucinations, delusions, disorganized thoughts), negative symptoms (eg, diminished expression, apathy), and impairments in cognition. Mood and anxiety symptoms are also common in schizophrenia.

Lumateperone (continued...)

- Treatment of adult patients with schizophrenia

Clinical profile

Lumateperone is a first-in-class serotonin, dopamine, and glutamate modulator. Lumateperone is a potent serotonin 5-HT_{2A} receptor antagonist, a dopamine receptor phosphoprotein modulator acting as a presynaptic partial agonist and postsynaptic antagonist at dopamine D₂ receptors, and a dopamine D₁ receptor-dependent indirect modulator of glutamate. In addition, lumateperone also has serotonin reuptake inhibitor properties.

Pivotal trial data:

The efficacy of lumateperone was evaluated in three double-blind, placebo-controlled, randomized pivotal trials. In two of the trials, risperidone, a second generation atypical antipsychotic, was also included as an active control. The primary endpoint in all three studies was the change from baseline in the Positive and Negative Syndrome Scale (PANSS) total score. In a pooled analysis of the three trials, lumateperone 60 mg demonstrated a statistically significant improvement in the PANSS total score vs. placebo ($p = 0.003$). The exact numerical differences between lumateperone and placebo from the pooled analysis have not been reported. However, in 1 of the 3 individual trials, lumateperone failed to demonstrate superiority vs. placebo.

Safety:

The most common adverse events with lumateperone use were somnolence and sedation.

Dosing:

In the pivotal trials, lumateperone was administered orally once a day.

Competitive environment

Lumateperone offers a novel MOA for the treatment of schizophrenia. Second-generation antipsychotics are the standard of care for schizophrenia treatment and they work as modulators of serotonin and dopamine. However, these drugs are primarily only effective in treating the positive symptoms of schizophrenia and can be associated with significant AEs. Of note, lumateperone demonstrated fewer metabolic disturbances and less weight gain vs. risperidone in the clinical trials.

However, there are many alternative oral treatment options for schizophrenia, some of which are available generically. Long-acting injectable antipsychotics are also available for patients who do not want the daily reminder of oral medications. In addition, while lumateperone may confer safety benefits vs. the current standard of care, lumateperone failed to achieve its primary endpoint vs. placebo in one of the pivotal trials and there is no data suggesting that lumateperone is superior to existing treatment options.

For reference, the WAC price for Vraylar® (cariprazine), a recently approved oral antipsychotic, is approximately \$14,500 per year.

- Serotonin, dopamine, and glutamate modulator
 - Oral formulation
 - Statistically significant improvement in the PANSS total score vs. placebo in a pooled analysis of three pivotal studies; failed to achieve primary endpoint in 1 of the 3 pivotal trials
 - Common AEs: somnolence, sedation
 - Dosing: once daily
-
- Advantages: novel MOA, potentially fewer AEs vs. second-generation atypical antipsychotics, oral, once a day
 - Disadvantages: generic oral and long-acting injectable alternatives available, failed to achieve primary endpoint vs. placebo in one clinical trial, lack of data demonstrating superiority vs. standard of care
 - Reference WAC (Vraylar) = ~\$14,500 per year

Cabotegravir/rilpivirine (Brand Name: To be determined)

Manufacturer: ViiV Healthcare

Expected FDA decision: 12/29/2019

Therapeutic use

Cabotegravir/rilpivirine is in development for the treatment of human immunodeficiency virus (HIV)-1 infection in adults whose viral load is suppressed and who are not resistant to cabotegravir or rilpivirine.

Clinical profile

Cabotegravir is a novel HIV integrase inhibitor and rilpivirine is a non-nucleoside reverse transcriptase inhibitor (NNRTI).

Pivotal trial data:

The efficacy of cabotegravir/rilpivirine was evaluated in two open-label, active-controlled, randomized non-inferiority pivotal trials (ATLAS and FLAIR) in over 1,100 patients with HIV-1 infection. In the ATLAS trial, cabotegravir/rilpivirine was assessed vs. continuation of a patient's current three-drug oral antiretroviral therapy. In the FLAIR trial, all patients received 20 weeks of induction therapy with Triumeq® tablets (abacavir, dolutegravir, and lamivudine) and then were randomized to cabotegravir/rilpivirine or continuation of Triumeq therapy.

In the ATLAS trial, cabotegravir/rilpivirine demonstrated non-inferiority as measured by the proportion of participants with detectable HIV, defined as plasma HIV-1 RNA \geq 50 copies/mL (cabotegravir/ rilpivirine: 1.6% vs. current antiretroviral therapy: 1.0%; $p < 0.05$). Similar viral results and non-inferiority were observed in the FLAIR trial.

Safety:

The most common adverse events with cabotegravir/rilpivirine use were injection site reactions, nasopharyngitis, headache, and diarrhea.

Dosing:

In the pivotal trials, cabotegravir/rilpivirine was administered as an intramuscular (IM) injection every 4 weeks.

As part of the regulatory submission package to the FDA, ViiV Healthcare also submitted a second New Drug Application for a single-agent, oral tablet formulation of cabotegravir. The oral formulation would be taken as a lead-in with an already-approved, once-daily, oral tablet formulation of rilpivirine.

Cabotegravir/rilpivirine (continued...)

- Treatment of HIV-1 infection in adults whose viral load is suppressed
- Cabotegravir: HIV integrase inhibitor; rilpivirine: NNRTI
- IM formulation
- Non-inferior for viral suppression vs. continuation of current antiretroviral therapy or Triumeq
- Common AEs: injection site reactions, nasopharyngitis, headache, diarrhea
- Dosing: once every 4 weeks

Competitive environment

If approved, cabotegravir/rilpivirine would be the first long-acting regimen for treatment of HIV-1 infection. The current standard of care includes multi-drug, oral regimens that require daily administration. A once monthly dosing schedule could be attractive in a niche of HIV-infected patients who struggle with adherence to oral medications or would otherwise benefit from less-frequent once monthly dosing. In the pivotal trials, the two-drug regimen was shown to be non-inferior to commonly used first-line, three-drug HIV regimens. In addition, an every 2 month dosing schedule is being investigated with topline results expected in the third quarter of 2019.

While cabotegravir/rilpivirine does offer an alternative long-acting treatment option, it is entering a crowded marketplace with many once daily oral options already available. Cabotegravir/rilpivirine also requires administration in a healthcare setting via IM injection into the gluteal muscles. Resistance is also a lingering concern with new two-drug HIV regimens vs. traditional three-drug regimens. This concern is heightened with cabotegravir/rilpivirine because a missed clinic visit or appointment could result in a prolonged duration of time that a patient is without antiretroviral therapy.

For reference, the WAC price for Dovato® (dolutegravir/lamivudine), a recently approved oral two-drug HIV regimen, is approximately \$28,000 per year.

- Advantages: potentially first long-acting regimen for HIV, non-inferiority demonstrated vs. commonly used oral three-drug regimens
- Disadvantages: alternatives available, requires IM injection by a healthcare provider, concerns about long-term emergence of resistance
- Reference WAC (Dovato) = ~\$28,000 per year

Extended generic pipeline forecast



OptumRx generic pipeline forecast

| Brand name | Generic name | Brand manufacturer | Dosage form | Strengths available as generic | Possible launch date |
|---------------------------|---|-----------------------------|-------------------------------|--------------------------------|----------------------|
| 2019 Possible launch date | | | | | |
| CUVPOSA | glycopyrrolate | Merz | Oral solution | All | 2019 |
| PREPOPIK | citric acid/magnesium oxide/sodium picosulfate | Ferring Pharmaceuticals | Oral packet | All | 2019 |
| TRAVATAN Z | travoprost | Alcon | Ophthalmic | All | 2019 |
| BYETTA | exenatide | AstraZeneca | Subcutaneous | All | 2019 |
| DESONATE | desonide | LEO Pharma | Gel | All | 2019 |
| SUPRENZA | phentermine | Citius/Akrimax | Tablet, orally disintegrating | All | 2019 |
| VIVLODEX | meloxicam | Iroko/iCeutica | Capsule | All | 2019 |
| PRESTALIA | perindopril/amlodipine | Symplmed | Tablet | All | 2019 |
| APTENSIO XR | methylphenidate | Rhodes | Capsule, extended-release | All | 2H-2019 |
| NUVARING | etonogestrel/ethinyl estradiol | Merck | Vaginal ring | All | 2H-2019 |
| RITUXAN | rituxumab | Genentech/Roche/Biogen Idec | Intravenous | All | 2H-2019 |
| SAMSCA | tolvaptan | Otsuka | Tablet | All | 2H-2019 |
| PYLERA | bismuth subcitrate potassium/metronidazole/tetracycline | Allergan/Aptalis | Capsule | All | 2H-2019 |
| EVZIO | naloxone | Kaléo Pharma | Injection | All | 2H-2019 |
| ENBREL | etanercept | Amgen | Subcutaneous | All | 2H-2019 |
| RESTASIS | cyclosporine | Allergan | Ophthalmic | All | 2H-2019 |
| FORTEO | teriparatide | Eli Lilly | Injection | All | 2H-2019 |
| APRISO | mesalamine | Bausch Health | Capsule, extended-release | All | 08-2019 |
| EDLUAR | zolpidem | Meda/Orexo | Tablet, sublingual | All | 09-2019 |
| MYOBLOC | botulinum toxin type B | US WorldMeds | Intramuscular | All | 09-2019 |
| EMEND | fosaprepitant dimeglumine | Merck | Intravenous | 150 mg | 09-2019 |
| FERRIPROX | deferiprone | ApoPharma/Apotex | Tablet | All | 4Q-2019 |

| Brand name | Generic name | Brand manufacturer | Dosage form | Strengths available as generic | Possible launch date |
|---------------------------|--|----------------------|---------------------------|--------------------------------|----------------------|
| ZOXYDRO ER | hydrocodone | Persion/Currax | Capsule, extended-release | All | 4Q-2019 |
| JADENU | deferasirox | Novartis | Tablet; oral granules | All | 10-2019 |
| VERMOX | mebendazole | Janssen | Tablet, chewable | All | 10-2019 |
| OSMOPREP | sodium biphosphate/sodium phosphate | Bausch Health | Tablet | All | 11-2019 |
| AMELUZ | aminolevulinic acid | Biofrontera | Gel | All | 11-2019 |
| DUREZOL | difluprednate | Alcon | Ophthalmic | All | 11-2019 |
| OMNARIS | ciclesonide | Covis | Intranasal | All | 12-2019 |
| THALOMID | thalidomide | Celgene | Capsule | All | 12-2019 |
| 2020 Possible launch date | | | | | |
| MYCAMINE | micafungin | Astellas | Intravenous | All | 2020 |
| CIPRODEX | ciprofloxacin/dexamethasone | Alcon | Otic | All | 2020 |
| DORYX MPC | doxycycline hyclate | Mayne | Oral solution | All | 2020 |
| SYNDROS | dronabinol | Insys Therapeutics | Tablet, delayed-release | All | 2020 |
| SAPHRIS | asenapine | Allergan | Tablet, sublingual | All | 1H-2020 |
| NOXAFIL | posaconazole | Merck | Tablet; oral suspension | All | 01-2020 |
| DALIRESP | roflumilast | AstraZeneca | Tablet | All | 01-2020 |
| SILENOR | doxepin | Pernix | Tablet | All | 01-2020 |
| ELIGARD | leuprolide | QLT/Tolmar | Subcutaneous | All | 03-2020 |
| SOMATULINE DEPOT | lanreotide | Ipsen | Subcutaneous | All | 03-2020 |
| TAYTULLA | ethinyl estradiol/norethindrone/ferrous fumarate | Allergan | Tablet | All | 03-2020 |
| MOXEZA | moxifloxacin | Alcon | Ophthalmic | All | 03-2020 |
| ZORTRESS | everolimus | Novartis | Tablet | All | 03-2020 |
| RENOVA | tretinoin | Bausch Health | Cream | All | 03-2020 |
| TOTECT | dexrazoxane | Cumberland | Injection | All | 03-2020 |
| APTIVUS | tipranavir | Boehringer Ingelheim | Capsule; oral solution | All | 04-2020 |
| DEPO-SUBQ PROVERA | medroxyprogesterone | Pfizer | Subcutaneous | All | 05-2020 |
| NYMALIZE | nimodipine | Arbor | Oral solution | All | 05-2020 |

| Brand name | Generic name | Brand manufacturer | Dosage form | Strengths available as generic | Possible launch date |
|---------------------------|--|---|--------------------------------|--------------------------------|----------------------|
| MYDAYIS | amphetamine/ dextroamphetamine mixture | Shire | Capsule, extended-release | All | 06-2020 |
| DEXILANT | dexlansoprazole | Takeda | Capsule, delayed- release | All | 06-2020 |
| DENAVIR | penciclovir | Mylan | Cream | All | 06-2020 |
| LUCENTIS | ranibizumab | Roche | Intravitreal | All | 06-2020 |
| ENTEREG | alvimopan | Merck | Capsule | All | 2H-2020 |
| VELPHORO | sucroferric oxyhydroxide | Fresenius | Tablet, chewable | All | 3Q-2020 |
| KINERET | anakinra | Swedish Orphan Biovitrum/Savient/Amgen | Subcutaneous | All | 07-2020 |
| SYNERA | lidocaine/tetracaine | Galen | Transdermal patch | All | 07-2020 |
| PEGASYS | peginterferon alfa-2A | Roche | Subcutaneous | All | 08-2020 |
| PEG-INTRON | peginterferon alfa-2B | Merck | Subcutaneous | All | 08-2020 |
| MARQIBO KIT | vincristine | Talon Therapeutics/Spectrum | Intravenous | All | 09-2020 |
| TYKERB | lapatinib | Novartis | Tablet | All | 09-2020 |
| BIDIL | isosorbide dinitrate/hydrazaline | Arbor | Tablet | All | 09-2020 |
| TRUVADA | emtricitabine/tenofovir | Gilead | Tablet | 200 mg/300 mg | 09-2020 |
| ATRIPLA | efavirenz/emtricitabine/ tenofovir | Gilead/Bristol-Myers Squibb | Tablet | All | 09-2020 |
| KUVAN | sapropterin | BioMarin | Tablet; oral solution | All | 10-2020 |
| RISPERDAL CONSTA | risperidone | Janssen | Injection, extended-release | All | 11-2020 |
| XOLEGEL | ketoconazole | Almirall | Gel | All | 11-2020 |
| DULERA | formoterol fumarate/ mometasone furoate | Merck | Inhalation | All | 11-2020 |
| EPIDUO FORTE | adapalene/ benzoyl peroxide | Galderma | Gel | All | 12-2020 |
| OFIRMEV | acetaminophen | Mallinckrodt | Intravenous | All | 12-2020 |
| ABSORICA | isotretinoin | Sun | Capsule | All | 12-2020 |
| TOVIAZ | fesoterodine | Pfizer | Tablet, extended- release | All | 12-2020 |
| 2021 Possible launch date | | | | | |
| BEPREVE | bepotastine | Bausch Health | Ophthalmic | All | 2021 |
| ACTEMRA | tocilizumab | Roche/Chugai | Intravenous; subcutaneous | All | 2021 |

| Brand name | Generic name | Brand manufacturer | Dosage form | Strengths available as generic | Possible launch date |
|-----------------|-------------------------------|----------------------|-----------------------------|--------------------------------|----------------------|
| KERYDIN | tavaborole | Pfizer | Topical solution | All | 2021 |
| VIIBRYD | vilazodone | Forest/Allergan | Tablet | All | 2021 |
| EMTRIVA | emtricitabine | Gilead | Oral; capsule | All | 1H-2021 |
| AMITIZA | lubiprostone | Sucampo/Takeda | Capsule | All | 01-2021 |
| VELCADE | bortezomib | Takeda | Intravenous | All | 01-2021 |
| CRIXIVAN | indinavir | Merck | Capsule | All | 02-2021 |
| NORTHERA | droxidopa | H. Lundbeck | Capsule | All | 02-2021 |
| MYALEPT | metreleptin | Aegerion | Subcutaneous | All | 02-2021 |
| FORTICAL | calcitonin salmon recombinant | Upsher-Smith | Intranasal | All | 02-2021 |
| YONSA | abiraterone | Sun | Tablet | All | 03-2021 |
| IMPAVIDO | miltefosine | Knight Therapeutics | Capsule | All | 03-2021 |
| ACTOPLUS MET XR | pioglitazone/metformin | Takeda | Tablet, extended-release | All | 03-2021 |
| OVIDREL | choriogonadotropin | EMD Serono/Merck | Intramuscular; subcutaneous | All | 03-2021 |
| NEUPRO | rotigotine | UCB | Transdermal patch | All | 03-2021 |
| LYRICA CR | pregabalin | Pfizer | Tablet, extended-release | All | 04-2021 |
| ERAXIS | anidulafungin | Pfizer | Intravenous | All | 04-2021 |
| TECFIDERA | dimethyl fumarate | Biogen | Capsule, delayed-release | All | 05-2021 |
| ZOMIG | zolmitriptan | Impax/Grunenthal | Intranasal | All | 05-2021 |
| QUTENZA | capsaicin | Grunenthal | Transdermal patch | All | 06-2021 |
| PERFOROMIST | formoterol fumarate | Mylan | Inhalation | All | 06-2021 |
| APTiom | eslicarbazepine | Sunovion/Bial | Tablet | All | 06-2021 |
| SEEBRI NEOHALER | glycopyrrolate | Novartis | Inhalation | All | 06-2021 |
| INTELENCE | etravirine | Janssen | Tablet | All | 06-2021 |
| FLOVENT HFA | fluticasone propionate | GlaxoSmithKline | Inhalation; aerosol | All | 2H-2021 |
| ORENCIA | abatacept | Bristol-Myers Squibb | Intravenous; subcutaneous | All | 07-2021 |

| Brand name | Generic name | Brand manufacturer | Dosage form | Strengths available as generic | Possible launch date |
|-----------------------|--|----------------------|---------------------------|--------------------------------|----------------------|
| FERAHEME | ferumoxytol | AMAG Pharmaceuticals | Intravenous | All | 07-2021 |
| RESCULA | unoprostone isopropyl | R-Tech Ueno | Ophthalmic | All | 07-2021 |
| ALTRENO | tretinoin | Bausch Health | Lotion | All | 08-2021 |
| BALCOLTRA | levonorgestrel/ethinyl estradiol/ferrous bisglycinate | Avion | Tablet | All | 08-2021 |
| SUTENT | sunitinib | Pfizer | Capsule | All | 08-2021 |
| SELZENTRY | maraviroc | ViiV Healthcare | Tablet | All | 08-2021 |
| POMALYST | pomalidomide | Celgene | Capsule | All | 08-2021 |
| VERAMYST | fluticasone fumarate | GlaxoSmithKline | Intranasal | All | 08-2021 |
| JEVTANA KIT | cabazitaxel | Sanofi | Intravenous | All | 09-2021 |
| BYSTOLIC | nebivolol | Allergan | Tablet | All | 09-2021 |
| PRADAXA | dabigatran etexilate mesylate | Boehringer Ingelheim | Capsule | All | 4Q-2021 |
| INNOPRAN XL | propranolol | Ani Pharmaceuticals | Capsule, extended-release | All | 10-2021 |
| BIJUVA | estradiol/progesterone | TherapeuticsMD | Capsule | All | 10-2021 |
| MIRCERA | methoxy polyethylene glycol-epoetin beta | Roche/Royalty Pharma | Subcutaneous | All | 11-2021 |
| ENTYVIO | vedolizumab | Takeda | Intravenous | All | 11-2021 |
| BRYHALI | halobetasol | Bausch Health | Lotion | All | 11-2021 |
| BROVANA | arformoterol | Sunovion | Inhalation | All | 11-2021 |
| ONEXTON | clindamycin/benzoyl peroxide | Bausch Health | Gel | All | 12-2021 |
| EPANED KIT | enalapril | Silvergate | Oral solution | All | 12-2021 |
| CHANTIX | varenicline | Pfizer | Tablet | All | 12-2021 |
| CAYSTON | aztreonam lysine | Gilead | Inhalation | All | 12-2021 |
| BETHKIS | tobramycin | Chiesi | Inhalation | All | 12-2021 |
| MYTESI | crofelemer | Napo | Table, delayed-release | All | 12-2021 |
| EXPAREL | bupivacaine | Pacira | Injection | All | 12-2021 |
| SUPREP BOWEL PREP KIT | magnesium sulfate anhydrous/potassium sulfate / sodium sulfate | Braintree | Oral solution | All | 12-2021 |

+ = may launch during the stated date or later

Extended brand pipeline forecast



OptumRx brand pipeline forecast

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--|--|-------------------------------|---|---------------------------------------|-------------------------|-------------------|------------------------|----------------|-------------|
| 2019 Possible launch date | | | | | | | | | |
| S-649266 | cefiderocol | Shionogi/ GlaxoSmithKiline | cephalosporin antibiotic | Bacterial infections | IV | Filed NDA | 8/14/2019 | Yes | No |
| Nouriast | istradefylline | Kyowa Hakko Kogyo | A2A adenosine receptor antagonist | Parkinson's disease | PO | Filed NDA | 8/27/2019 | No | No |
| Rexista XR | oxycodone ER | IntelliPharmaCeutic | opioid agonist | Pain | PO | Filed NDA | 8/28/2019 | No | No |
| NKTR-181 | NKTR-181 | Nektar | opioid agonist | Pain | PO | Filed NDA | 8/29/2019 | No | No |
| tadalafil VersaFilm | tadalafil VersaFilm | IntelGenx | phosphodiesterase-5 (PDE-5) inhibitor | Erectile dysfunction | PO | Filed NDA | Mid-2019 | Yes | No |
| fosphenytoin sodium/ sulfobutylether beta-cyclodextrin sodium | fosphenytoin sodium/ sulfobutylether beta-cyclodextrin sodium | Sedor | anticonvulsant | Seizures | IM/IV | Filed NDA | Mid-2019 | Yes | No |
| XeriSol Glucagon | glucagon | Xeris | glucagon analog | Diabetes mellitus | SC | Filed NDA | 9/10/2019 | No | No |
| RDX-5791 (AZD-1722) | tenapanor | Ardelyx | sodium-hydrogen exchanger-3 (NHE-3) inhibitor | Irritable bowel syndrome-constipation | PO | Filed NDA | 9/13/2019 | No | No |
| Imvamune; MVA-BN | Imvamune; MVA-BN | Bavarian Nordic | vaccine | Smallpox | SC | Filed BLA | 9/15/2019 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-----------------------------|--|--------------------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| NN-9924 (OG-217SC) | semaglutide (oral) | Novo Nordisk/ Emisphere Technologies | glucagon-like peptide-1 (GLP-1) receptor agonist | Diabetes mellitus | PO | Filed NDA | 9/20/2019 | Yes | No |
| Valtoco | diazepam | Neurelis | benzodiazepine | Seizures | Intranasal | Filed NDA | 2H2019 | No | Yes |
| Fasenra (self-administered) | benralizumab | AstraZeneca | interleukin-5 receptor (IL-5R) alpha inhibitor | Asthma | SC | Filed sNDA | 2H2019 | Yes | No |
| Scenesse | afamelanotide | Clinuvel | melanocortin receptor 1 (MC-1) agonist | Erythropoietic protoporphyria (EPP)/ Polymorphous light eruption (PLE/PMLE)/ Vitiligo | SC | Filed NDA | 10/6/2019 | Yes | Yes |
| PF-708 | teriparatide | Pfenex/ Alvogen | parathyroid hormone | Osteoporosis | SC | Filed NDA | 10/7/2019 | Yes | No |
| Vumerity | monomethyl fumarate (diroximel fumarate) | Biogen/ Alkermes | Nrf2 pathway activator | Multiple sclerosis (MS) | PO | Filed NDA | 10/17/2019 | Yes | No |
| HP-3070 | asenapine maleate | Noven Hisamitsu Pharmaceutical | 5-HT2a and dopamine D1/D2 antagonist | Schizophrenia | TOP | Filed NDA | 10/17/2019 | No | No |
| Xipere | triamcinolone acetonide | Clearside | corticosteroid | Macular edema | intraocular/ subretinal | Filed NDA | 10/19/2019 | Yes | No |
| synthetic ACTH depot | cosyntropin | Assertio | adrenocorticotrophic hormone (ACTH) | adrenocortical insufficiency | INJ | Filed NDA | 10/19/2019 | Yes | No |
| FMX-101 (ARK-E021) | minocycline | Foamix | tetracyclines | Acne vulgaris | TOP | Filed NDA | 10/20/2019 | No | No |
| ET-202 | phenylephrine | Eton | alpha-1 adrenergic receptor agonist | Hypotension | IV | Filed NDA | 10/21/2019 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-------------------------------|--|------------------------|---|--|-------------------------|-------------------|------------------------|----------------|-------------|
| JDP-205 | cetirizine | JDP Therapeutics | second generation antihistamine | Urticaria | IV | Filed NDA | 10/30/2019 | No | No |
| Zimhi | naloxone | Adamis | opioid antagonist | Opioid dependence | IM | Filed NDA | 10/31/2019 | No | No |
| RediTrex | methotrexate | Cumberland | dihydrofolate reductase (DHFR) inhibitor | Psoriasis; arthritis | SC | Filed NDA | 11/1/2019 | Yes | No |
| Talicia | rifabutin/ amoxicillin/ pantoprazole | RedHill Biopharma | RNA polymerase inhibitor/ penicillin/ proton pump inhibitor (PPI) | Bacterial infections | PO | Filed NDA | 11/2/2019 | No | No |
| Tlando | testosterone | Lipocine | androgen | Hypogonadism | PO | Filed NDA | 11/9/2019 | No | No |
| LY-573144 (COL-144) | lasmiditan | Eli Lilly | serotonin 5-HT1F receptor agonist | Acute migraines | PO | Filed NDA | 11/14/2019 | No | No |
| RTH-258 (ESBA-1008, DLX-1008) | brolicizumab | Novartis | anti-VEGF antibody | wet age-related (neovascular) macular degeneration (AMD) | Intravitreal | Filed BLA | 11/15/2019 | Yes | No |
| Twirla | ethinyl estradiol/ levonorgestrel | Agile Therapeutics | hormonal combination contraceptive | Pregnancy prevention | TOP | Filed NDA | 11/17/2019 | No | No |
| YKP-3089 | cenobamate | SK Biopharmaceuticals | undisclosed | Seizure | PO | Filed NDA | 11/21/2019 | Yes | No |
| AQST-117 | riluzole | Aquestive Therapeutics | glutamate release inhibitor | Amyotrophic lateral sclerosis (ALS) | SL/ Transmucosal | Filed NDA | 11/30/2019 | No | Yes |
| ACE-536 (RAP-536) | luspatercept | Celgene/ Acceleron | Modified type II activin receptor recombinant fusion protein | Anemia | SC | Filed BLA | 12/4/2019 | Yes | Yes |
| RVT-802 | RVT-802 | Enzyvant/Roivant | Tissue-based therapy | Congenital athymia | Implant | Filed NDA | 12/2019 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|---------------------------|---|--------------------------|---|------------------------------------|-------------------------|--------------------|------------------------|----------------|-------------|
| MK-1602 (AGN-241689) | ubrogepant | Allergan/ Merck | calcitonin gene-related peptide (CGRP) receptor antagonist | Acute migraines | PO | Filed NDA | 12/15/2019 | No | No |
| IDP-123 | IDP-123 | Bausch Health | retinoid | Acne | TOP | Filed NDA | 12/22/2019 | No | No |
| Brinavess (Kynapid) | vernakalant | Corveio | potassium channel blocker | Arrhythmia | IV | Filed NDA | 12/24/2019 | Yes | No |
| E-2006 | lemborexant | Eisai/ Purdue | orexin receptor antagonist | Insomnia | PO | Filed NDA | 12/27/2019 | No | No |
| ITI-007 (ITI-722) | lumateperone | Intra-Cellular Therapies | antipsychotic | Schizophrenia | PO | Filed NDA | 12/27/2019 | No | No |
| Posidur | SABER-bupivacaine CR | Novartis/ Durect | local anesthetic | Pain | SC | Filed NDA | 12/27/2019 | No | No |
| S-265744 (S/GSK-1265744) | cabotegravir | ViiV Healthcare | HIV integrase inhibitor | Human immunodeficiency virus (HIV) | PO | Filed NDA | 12/29/2019 | Yes | No |
| TMC-278-LA | cabotegravir (long-acting)/ rilpivirine (long-acting) | ViiV Healthcare | HIV integrase inhibitor/ non-nucleoside reverse transcriptase inhibitor (NNRTI) | HIV-1 | IM | Filed NDA | 12/29/2019 | Yes | No |
| MitoGel | mitomycin C | UroGen | alkylating agent | Bladder cancer | Intravesical | InTrial | 4Q2019 | No | Yes |
| Xyrosa | doxycycline | Sun Pharma | tetracyclines | Rosacea | PO | Tentative Approval | 4Q2019 | No | No |
| 2020 Possible launch date | | | | | | | | | |
| OMS-721 | narsoplimab | Omeros | anti-MASP-2 | Hemolytic uremic | IV/SC | InTrial | 2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------------|----------------------------|--|----------------------------------|--|-------------------------|-------------------|------------------------|----------------|-------------|
| | | | monoclonal antibody | syndrome (HUS)/ Renal diseases | | | | | |
| CCP-08 | CCP-08 | Tris Pharma | undisclosed | Viral rhinitis | PO | CRL | 2020 | Yes | No |
| tamsulosin DRS | tamsulosin delayed-release | Veru | alpha-adrenergic antagonist | Benign prostatic hyperplasia (BPH) | PO | InTrial | 2020 | No | No |
| Zalviso | sufentanil, ARX-01 | AcelRx | opioid analgesic | Pain | SL | CRL | 2020 | Yes | No |
| ELI-200 | oxycodone/naltrexone | Elite | opioid agonist | Pain | PO | CRL | 2020 | No | No |
| APL-130277 | apomorphine | Sumitomo Dainippon/ MonoSol Rx/ Sunovion | non-ergoline dopamine agonist | Parkinson's disease | SL | CRL | 2020 | No | No |
| Entyvio (SC formulation) | vedolizumab | Takeda | integrin receptor antagonist | Ulcerative colitis (UC)/ Crohn's disease (CD) | SC | Filed sBLA | 1/1/2020 | Yes | No |
| AR-101 | AR-101 | Aimmune/ Regeneron/ Sanofi | peanut protein capsule | Peanut allergy | PO | Filed BLA | 1/2020 | No | No |
| SEG-101 | crizanlizumab | Novartis | P-selectin antagonist | Sickle cell disease | IV | Filed BLA | 1/15/2020 | Yes | Yes |
| E-7438 (EPZ-6438) | tazemetostat | Epizyme/ Eisai | methyltransferase EZH2 inhibitor | Sarcoma | PO | Filed NDA | 1/23/2020 | Yes | Yes |
| Rykindo | risperidone ER | Luye | atypical antipsychotic | Schizophrenia/ Schizoaffective disorder | IM | Filed NDA | 1/28/2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------------|---------------------------|---|---|--|-------------------------|-------------------|------------------------|----------------|-------------|
| FP-001 (LMIS) | leuprolide mesylate | Foresee | gonadotropin-releasing hormone (GnRH) analog | Prostate cancer | SC | Filed NDA | 1/29/2020 | Yes | No |
| ALN-AS1 | givosiran | Alnylam | RNAi therapeutic agent | Porphyria | SC | Filed NDA | 2/4/2020 | Yes | Yes |
| BLU-285 | avapritinib | Blueprint Medicines | selective KIT and PDGFRa inhibitor | Gastrointestinal stromal tumors (GIST) | PO | Filed NDA | 2/14/2020 | Yes | Yes |
| BMS-927711 (BHV-3000) | rimegepant sulfate | Portage Biotech/ Biohaven/ Bristol-Myers Squibb | calcitonin gene-related peptide (CGRP) receptor antagonist | Acute migraines | PO | Filed NDA | 2/20/2020 | Yes | No |
| ETC-1002 | bempedoic acid | Esperion Therapeutics | ATP citrate (pro-S)-lyase and stimulating AMP-activated protein kinase (AMPK) | Hypercholesterolemia | PO | Filed NDA | 2/21/2020 | No | No |
| ALD-403 | eptinezumab | Alder | calcitonin gene-related peptide (CGRP) receptor antagonist | Migraine prevention | IV/SC | Filed BLA | 2/22/2020 | No | No |
| ETC-1002/ ezetimibe | bempedoic acid/ ezetimibe | Esperion Therapeutics | ATP citrate (pro-S)-lyase and stimulating AMP-activated protein kinase (AMPK)/ cholesterol absorption inhibitor | Hypercholesterolemia | PO | Filed NDA | 2/26/2020 | No | No |
| CD-5789 | trifarotene | Galderma | retinoid receptor agonist | Acne | TOP | Filed NDA | 2/28/2020 | No | No |
| RV-001 (Roche-1, R-1507) | teprotumumab | Horizon/ Chugai/ Roche/ Genmab | insulin-like growth factor 1 (IGF-1) receptor antagonist | Thyroid eye disease | IV | Filed BLA | 3/6/2020 | Yes | Yes |
| naloxone nasal spray | naloxone | Insys Therapeutics | opioid antagonist | Opioid dependence | Intranasal | Filed NDA | 3/15/2020 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--|------------------------------|------------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| ASG-22M6E (ASG-22CE, ASG-22ME) | enfortumab vedotin | Astellas/ Seattle Genetics | nectin-4 antagonist | Bladder cancer | IV | Filed BLA | 3/16/2020 | Yes | No |
| ET-105 | lamotrigine | Eton | anticonvulsant | Epilepsy | PO | Filed NDA | 3/17/2020 | No | No |
| VX-445 | elexacaftor | Vertex | cystic fibrosis transmembrane conductance regulator (CFTR) corrector | Cystic fibrosis (CF) | PO | Filed NDA | 3/20/2020 | Yes | No |
| ozanimod | ozanimod | Celgene | sphingosine 1-phosphate 1 (S1PR1) and 5 (S1PR5) receptor modulator | Multiple sclerosis/ Ulcerative colitis (UC) | PO | Filed NDA | 3/25/2020 | Yes | No |
| Corplex | donepezil transdermal system | Corium International | anticholinergic | Alzheimer's disease | TOP | InTrial | 1Q2020 | No | No |
| ITCA-650 (sustained release exenatide) | exenatide sustained-release | Intarcia/ Quintiles/ Servier | glucagon-like peptide-1 (GLP-1) receptor agonist | Diabetes mellitus | SC implant | CRL | 1Q2020 | Yes | No |
| PPP-002 | PPP-002 | Tetra Bio-Pharma | botanical drug | Pain | Undisclosed | InTrial | 1Q2020 | No | No |
| Barhemsys | amisulpride | Acacia | dopamine receptor antagonist | Nausea/ Vomiting | IV | CRL | 1Q2020 | No | No |
| Bronchitol | mannitol | Pharmaxis | osmotic gradient enhancer; mucus clearance enhancer | Asthma/ Cystic fibrosis | INH | CRL | 1Q2020 | No | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--|---|---|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| Prochymal | remestemcel-L | Mesoblast/ JCR/ Mallinckrodt/ Osiris Therapeutics | mesenchymal stem cells | Graft vs. Host disease (GvHD)/ Crohn's disease/ Gastrointestinal injury post radiation exposure/ Heart failure (HF) | IV | InTrial | 1Q2020 | Yes | Yes |
| LCI-699 | osilodrostat | Novartis | aldosterone synthase inhibitor | Cushing's syndrome | PO | Filed NDA | 1Q2020 | No | Yes |
| TG-1303 | ublituximab/ TGR-1202 | TG Therapeutics | CD-20 monoclonal antibody/ phosphoinositide-3 kinase (PI3K) delta inhibitor | Chronic lymphocytic leukemia (CLL)/ Diffuse large B-cell lymphoma (DLBCL)/ Non-Hodgkin lymphoma (NHL) | IV/PO | InTrial | 1Q2020 | Yes | Yes |
| empagliflozin, linagliptin, metformin XR | empagliflozin, linagliptin, metformin XR | Eli Lilly/ Boehringer Ingelheim | sodium glucose co-transporter-2 (SGLT-2) inhibitor, dipeptidyl peptidase 4 (DPP4) inhibitor, biguanide | Diabetes mellitus | PO | Filed NDA | 1Q2020 | No | No |
| Taclantis | paclitaxel injection concentrate for suspension | Sun Pharma Advanced Research Company (SPARC) | taxane | Breast Cancer; Lung Cancer; Pancreatic Cancer | IV | Filed NDA | 1Q2020 | No | No |
| bimatoprost sustained release | bimatoprost sustained release | Allergan | prostaglandin agonist | Glaucoma | Implant | Filed NDA | 4/1/2020 | N/A | No |
| UX-007 | triheptanoin | Ultragenyx/ Baylor Research Institute/ Uniquist | medium chain fatty acid | Glucose transport type 1 deficiency syndrome (G1DS) | PO | Filed NDA | 4/1/2020 | Yes | Yes |
| CNS-7056 (ONO- | remimazolam | Cosmo/ Hana/ | benzodiazepine | Procedural sedation | IV | Filed NDA | 4/3/2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|----------------------------------|--|--|---|--|-------------------------|-------------------|------------------------|----------------|-------------|
| 2745) | | Paion/ Pharmascience/ R- Pharm/ Yichang Humanwell | | | | | | | |
| Viaskin Peanut | Viaskin Peanut | DBV Technologies | Immunotherapy | Peanut allergy | TOP | Filed BLA | 4/7/2020 | No | No |
| Men Quad TT | meningococcal polysaccharide (serogroups A, C, Y, and W135) tetanus toxoid conjugate vaccine | Sanofi | antibacterial | meninococcus/ tetanus | IM | Filed BLA | 4/25/2020 | No | No |
| Ongentys | opicapone | Neurocrine Biosciences/ Bial/ Ono | catechol-O-methyltransferase (COMT) inhibitor | Parkinson disease | PO | Filed NDA | 4/26/2020 | No | No |
| Trevynt | treprostinil | SteadyMed | prostacyclin analog | Pulmonary arterial hypertension (PAH) | SC | Filed NDA | 4/27/2020 | Yes | Yes |
| isatuximab | isatuximab | Sanofi/ ImmunoGen | CD38 antagonist | Multiple myeloma/ Acute lymphoblastic leukemia (ALL) or lymphoblastic lymphoma (LBL) | IV | Filed BLA | 4/30/2020 | Yes | Yes |
| SEP-225289 (DSP-225289, SEP-289) | dasotraline | Sumitomo Dainippon/ Sunovion | triple reuptake inhibitor | Attention deficit hyperactivity disorder (ADHD)/ Eating disorders | PO | Filed NDA | 5/14/2020 | No | No |
| FMX-103 | minocycline | Foamix | tetracyclines | Rosacea | TOP | InTrial | 6/5/2020 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-----------|--|---------------------------------|-----------------------------------|---|-------------------------|--------------------|------------------------|----------------|-------------|
| Bafiertam | monomethyl fumarate | Banner Life Sciences | prodrug | Multiple sclerosis | PO | Tentative Approval | 6/20/2020 | Yes | No |
| V-114 | pneumococcal conjugate vaccine | Merck | vaccine | Bacterial infection | IM | InTrial | 2Q2020 | Yes | No |
| KP-415 | D-threo-methylphenidate controlled-release | KemPharm | CNS stimulant | Attention deficit hyperactivity disorder (ADHD) | PO | InTrial | 2Q2020 | No | No |
| Gimoti | metoclopramide | Evoke Pharma | antidopaminergics | Diabetic gastroparesis | Intranasal | CRL | 2Q2020 | No | No |
| PEGPH-20 | pegvorhyaluronidase alfa | Halozyme/ Nektar | hyaluronic acid | Pancreatic cancer/ Non-small cell lung cancer (NSCLC) | IV | InTrial | 1H2020 | Yes | Yes |
| ZEBOV | VS-EBOV (rVSV-EBOV; rVSV-ZEBOV-GP) | Merck/ NewLink Genetics | vaccine | Ebola | IM | Filed BLA | 1H2020 | Yes | No |
| Lenti-D | elivaldogene tavalentivec | Bluebird Bio | gene therapy | Adrenomyeloneuropathy | Undisclosed | InTrial | 1H2020 | Yes | Yes |
| IMMU-132 | sacituzumab govitecan | Immunomedics/ Royalty Pharma | RS7-SN-38 antibody-drug conjugate | Breast cancer/ Pancreatic cancer/ Pancreatic cancer/ Small cell lung cancer (SCLC)/ Non-small cell lung cancer (NSCLC)/ Colorectal cancer/ Esophageal cancer/ Urinary bladder cancer | IV | CRL | 1H2020 | Yes | Yes |
| FT-218 | sodium oxybate | Avadel | dopamine receptor | Narcolepsy | PO | InTrial | 1H2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-------------------------|--------------------------------------|--------------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| | extended-release | | agonist | | | | | | |
| Apealea (Paclical) | paclitaxel | Oasmia | taxane | Ovarian cancer | IV | InTrial | 1H2020 | Yes | Yes |
| Traumakine | interferon-beta -1a | Faron/ Maruishi | interferon | Acute respiratory distress syndrome (ARDS) | IV | InTrial | 1H2020 | Yes | No |
| ropeginterferon alfa-2b | ropeginterferon alfa-2b | PharmaEssentia/ AOP Orphan | interferon | Polycythemia vera (PV)/ Myelofibrosis (MF)/ Essential thrombocythemia (ET) | SC | InTrial | 1H2020 | Yes | Yes |
| Rizaport (VersaFilm) | rizatriptan | IntelGenx / Red Hill Biopharma | triptans | Acute migraines | PO | CRL | 1H2020 | No | No |
| Zynteglo (LentiGlobin) | lentiviral beta-globin gene transfer | Bluebird Bio | gene therapy | Sickle cell disease/ Beta thalassemia | IV | InTrial | 1H2020 | Yes | Yes |
| MC2-01 (MC-201) | calcipotriene/ betamethasone | MC2 Therapeutics | vitamin D analog/ corticosteroid | Psoriasis | TOP | InTrial | 1H2020 | No | No |
| R-667 (RG-667) | palovarotene | Clementia/ Roche | selective retinoic acid receptor agonist (RAR-gamma) | Fibrodysplasia ossificans progressiva (FOP) | PO | InTrial | 1H2020 | Yes | Yes |
| DS-8201 | [fam-] trastuzumab deruxtecan | Daiichi Sankyo | HER2-targeting antibody-drug conjugate | Breast cancer | IV | InTrial | 1H2020 | Yes | No |
| SA-237 (RG-6168) | satralizumab | Roche/ Chugai | interleukin-6 (IL-6) monoclonal antibody | Neuromyelitis optica (NMO) | SC | InTrial | 1H2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------|--------------------------------------|-----------------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| FG-4592 (ASP-1517) | roxadustat | FibroGen/ Astellas/ AstraZeneca | hypoxia-inducible factor prolyl hydroxylase (HIF-PHI) | Anemia | PO | InTrial | 1H2020 | Yes | No |
| RT-002 | daxibotulinumtoxinA | Revance Therapeutics | botulinum toxins | Cosmetic/ Cervical dystonia/ Plantar fasciitis | IM | InTrial | 1H2020 | Yes | Yes |
| Ryplazim | human plasminogen | ProMetic/ Hematech | plasminogen | Plasminogen deficiency | IV | InTrial | 1H2020 | Yes | Yes |
| JCAR-017 | lisocabtagene maraleucel | Juno/ Celgene | chimeric antigen receptor (CAR) T cell therapy | Diffuse large B-cell lymphoma (DLBCL)/ Acute lymphocytic leukemia (ALL)/ Follicular lymphoma/ Mantle cell lymphoma | IV | InTrial | Mid-2020 | Yes | Yes |
| Sarasar | lonafarnib | Eiger Biopharmaceuticals | prenylation inhibitor | Hepatitis D (HDV); Hutchinson-Gilford Progeria Syndrome (HGPS or progeria) and progeroid laminopathies | PO | InTrial | Mid-2020 | Yes | Yes |
| GSK-2857916 | GSK-2857916 | GlaxoSmithKline/ Seattle Genetics | anti-BCMA antibody-drug conjugate | Multiple myeloma | SC | InTrial | Mid-2020 | Yes | Yes |
| Ryaltris | mometasone furoate/ olopatadine HCl | Glenmark | corticosteroid/ antihistamine | Allergic rhinitis | NA | CRL | Mid-2020 | No | No |
| QVM-149 | indacaterol/ glycopyrronium bromide/ | Novartis/ Sosei | long-acting beta 2 adrenergic receptor agonist (LABA)/ long- | Asthma | INH | InTrial | Mid-2020 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|----------------------|---|---------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| | mometasone furoate | | acting muscarinic receptor antagonist (LAMA)/ corticosteroid | | | | | | |
| RG-7916 (RO-7034067) | Risdiplam | Roche/ PTC Therapeutics | SMN2 splicing modifier | Spinal muscular atrophy | PO | InTrial | Mid-2020 | Yes | Yes |
| SRP-4045 | casimersen | Sarepta | morpholino antisense oligonucleotide | Duchenne muscular dystrophy (DMD) | IV | InTrial | Mid-2020 | Yes | Yes |
| idebenone | idebenone | Santhera | co-enzyme Q-10 analog | Duchenne muscular dystrophy | PO | CRL | Mid-2020 | Yes | Yes |
| Amphora | Amphora | Neothetics | spermicidal agent | Pregnancy prevention/ Bacterial infections | VG | CRL | Mid-2020 | No | No |
| GBT-440 (GTx-011) | voxelotor | Global Blood Therapeutics | hemoglobin modulator | Sickle cell anemia | PO | InTrial | Mid-2020 | Yes | Yes |
| TGR-1202 | umbralisib | TG Therapeutics/ Rhizen | phosphoinositide-3 kinase (PI3K) delta inhibitor | Diffuse large B-cell lymphoma (DLBCL)/ Chronic lymphocytic leukemia (CLL) | PO | InTrial | Mid-2020 | Yes | Yes |
| 3-F8 (Hu-3F8) | naxitamab | Y-mAbs Therapeutics | GD2 antagonist | Neuroblastoma | IV | InTrial | Mid-2020 | Yes | Yes |
| Winlevi/ Breezula | cortexolone 17alpha-propionate (CB-03-01) | Intrepid | androgen antagonist | Acne vulgaris/ alopecia | TOP | InTrial | Mid-2020 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--|--|-----------------------------|---|--|-------------------------|--------------------|------------------------|----------------|-------------|
| Darzalex | daratumumab (with recombinant human hyaluronidase) | Johnson & Johnson / Genmab | humanized anti-CD38 monoclonal antibody | Multiple myeloma/ Amyloidosis | SC | Filed BLA | 7/10/2020 | Yes | Yes |
| BMN-270 | valoctocogene roxaparvovec | BioMarin | gene therapy | Hemophilia | IV | InTrial | 3Q2020 | Yes | Yes |
| TBR-652 (TAK-652, CVC) | cenicriviroc | Tobira Therapeutics/ Takeda | C-C chemokine receptor 5 (CCR5) and receptor 2 antagonist | HIV/ Non-alcoholic steatohepatitis (NASH) | PO | InTrial | 3Q2020 | Yes | No |
| BCX-7353 | BCX-7353 | BioCryst | kallikrein inhibitor | Hereditary angioedema (HAE) | PO | InTrial | 3Q2020 | Yes | Yes |
| PPP-001 | delta-9-tetrahydrocannabinol/ cannabidiol | PhytoPain Pharma | cannabinoid product | Pain | INH | InTrial | 3Q2020 | Yes | Yes |
| TRC-101 | TRC-101 | Tricida | carrier protein modulator | Chronic kidney disease (CKD) | PO | InTrial | 3Q2020 | Yes | No |
| Brixadi | buprenorphine | Camurus/ Braeburn | opioid receptor agonist (partial) | Opioid dependence/ Pain | SC | Tentative Approval | 11/1/2020 | Yes | No |
| IdeS (immunoglobulin G-degrading enzyme of Streptococcus pyogenes) | imlifidase | Hansa Medical | bacterial enzyme | Kidney transplant/ Thrombotic thrombocytopenic purpura (TTP)/Goodpasture's disease | IV | InTrial | 2H2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|---------------------------------|--|-----------------------------|---|--|-------------------------|-------------------|------------------------|----------------|-------------|
| INCB-54828 | pemigatinib | Incyte | selective FGFR1/2/3 inhibitor | Biliary tract cancer | PO | InTrial | 2H2020 | Yes | Yes |
| BMS-663068 (BMS-626529 prodrug) | fostemsavir (temsavir prodrug) | Bristol-Myers Squibb | HIV attachment inhibitor | Human immunodeficiency virus (HIV) | PO | InTrial | 2H2020 | Yes | No |
| LIQ-861 | treprostinil | Liquidia Technologies | prostacyclin analog | Pulmonary arterial hypertension (PAH) | INH | InTrial | 2H2020 | Yes | No |
| Olinvo | oliceridine | Trevena | opioid receptor agonist | Pain | IV | CRL | 2H2020 | No | No |
| INP-104 | POD-dihydroergotamine mesylate (POD-DHE) | Impel/ 3M | ergot derivative | Acute migraines | NA | InTrial | 2H2020 | No | No |
| BGB-3111 | zanubrutinib | BeiGene | selective inhibitor of Bruton tyrosine kinase (BTK) | Waldenström's Macroglobulinemia (WM)/ Chronic lymphocytic leukemia (CLL) | PO | InTrial | 2H2020 | Yes | Yes |
| EGP-437 | dexamethasone phosphate (iontophoretic) | EyeGate | corticosteroid | Uveitis | OP | InTrial | 2H2020 | Yes | No |
| Libervant | diazepam | Aquestive Therapeutics | benzodiazepine | Seizures | SL/ Transmucosal | InTrial | 2H2020 | No | Yes |
| EM-100 | ketotifen | Eton | antihistamine | Allergic conjunctivitis/ Dry eyes | OP | CRL | 2H2020 | No | No |
| MAGH-22 | margetuximab | MacroGenics/ Green Cross | HER2 oncoprotein antagonist | Breast cancer | IV | InTrial | 2H2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|------------------------------|----------------------|--|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| Sci-B-Vac | hepatitis B vaccine | VBI Vaccines | vaccine | Hepatitis B (HBV) | IM | InTrial | 2H2020 | No | No |
| sulopenem | sulopenem | Iterum | carbapenem | Bacterial infection | IV/PO | InTrial | 2H2020 | No | No |
| quizartinib | quizartinib | Daiichi Sankyo | FLT-3 receptor tyrosine kinase inhibitor | Acute myeloid leukemia (AML) | PO | CRL | 2H2020 | Yes | Yes |
| VP-102 | VP-102 | Verrica | antiviral | Molluscum/ Verruca vulgaris | TOP | InTrial | 2H2020 | No | No |
| GLPG-0634 | filgotinib | Galapagos NV/ Gilead | janus associated kinase-1 (JAK) inhibitor | Rheumatoid arthritis/ Crohn's disease/ Ulcerative colitis (UC)/ Sjogren's syndrome/ Ankylosing spondylitis/ Psoriatic arthritis | PO | InTrial | 2H2020 | Yes | No |
| NX-1207 (NYM-4805, REC 0482) | fexapotide trifluate | Nymox | pro-apoptotic | Benign prostatic hyperplasia (BPH)/ Prostate cancer | Intratumoral | InTrial | 2H2020 | Yes | No |
| AKB-6548 | vadadustat | Akebia Therapeutics | hypoxia-inducible factor-prolyl hydroxylase (HIF-PH) inhibitor | Anemia | PO | InTrial | 2H2020 | Yes | No |
| NexoBrid | bromelain | MediWound/ BL&H/ CrystalGenomics/ Kaken | peptide hydrolase replacement agent | Burns/ Skin injury | TOP | InTrial | 2H2020 | No | Yes |
| LOXO-292 | LOXO-292 | Loxo Oncology/ Eli Lilly | RET inhibitor | Solid tumors; non-small cell lung cancer (NSCLC); thyroid cancer | PO | InTrial | 2H2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|----------------------|--------------------------------------|--|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| NPI-2358 | plinabulin | BeyondSpring | tumor vascular disrupting agent (tVDA) | Neutropenia/ Non-small cell lung cancer (NSCLC) | IV | InTrial | 2H2020 | Yes | No |
| PXT-3003 | baclofen/ naltrexone/ sorbitol | Pharnext | gamma-aminobutyric acid (GABA)-ergic agonist/ opioid receptor antagonist/ sorbitol combination | Charcot-Marie Tooth disease | PO | InTrial | 2H2020 | No | Yes |
| ZP-4207 (ZP-GA-1) | dasiglucagon | Zealand Pharma | glucagon analog | Diabetes mellitus | SC | InTrial | 2H2020 | No | Yes |
| Zeftera | ceftobiprole | Basilea | cephalosporin antibiotic | Bacterial infections | IV | InTrial | 2H2020 | Yes | No |
| Vicinium (VB-4-845) | oportuzumab monatox | Eleven Biotherapeutics | anti-ECAM exotoxin A fusion protein | Bladder cancer | Intravesical | InTrial | 2H2020 | Yes | No |
| LJPC-0118 | LJPC-0118 | La Jolla Pharmaceutical | protozoacide | Malaria | Undisclosed | InTrial | 2H2020 | No | No |
| selumetinib | selumetinib | AstraZeneca/ Array BioPharma/ Cancer Research UK | selective MEK kinase inhibitor | Uveal melanoma/ Thyroid cancer | PO | InTrial | 2H2020 | Yes | Yes |
| Mycapssa (Octreolin) | octreotide | Chiasma | somatostatin analog | Acromegaly | PO | CRL | 2H2020 | Yes | Yes |
| Doria | risperidone | Laboratorios Farmacéuticos Rovi | atypical antipsychotic | Schizophrenia | IM | InTrial | 2H2020 | Yes | No |
| Iomab-B | iodine I 131 monoclonal antibody BC8 | Actinium | anti-CD45 monoclonal antibody | Acute myeloid leukemia (AML)/ Myelodysplastic syndrome (MDS) | IV | InTrial | 2H2020 | Yes | Yes |
| SPN-812 | SPN-812 | Supernus | selective norepinephrine reuptake inhibitor | Attention deficit hyperactivity disorder (ADHD) | PO | InTrial | 2H2020 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|------------------|--|-------------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| PRX-102 | alpha galactosidase (pegunigalsidase alfa) | Protalix | enzyme replacement | Fabry disease | IV | InTrial | 2H2020 | Yes | No |
| ASTX-727 | decitabine and E-7727 | Otsuka/ Astex Pharmaceuticals | nucleoside metabolic inhibitor | Myelodysplastic syndrome (MDS) | PO | InTrial | 2H2020 | Yes | No |
| arimoclomol | arimoclomol | Orphazyme | cytoprotectives | Niemann-Pick Disease (NPD)/ Sporadic Inclusion Body Myositis (IBM)/ Amyotrophic lateral sclerosis (ALS) | PO | InTrial | 2H2020 | Yes | Yes |
| PRT-201 | vonapanitase | Proteon Therapeutics | human elastase (recombinant) | End stage renal disease (ESRD)/Peripheral artery disease (PAD)/ Vascular access in hemodialysis | TOP | InTrial | 2H2020 | Yes | Yes |
| bb-2121 | idecabtagene vicleucel | Celgene/ Bluebird Bio | chimeric antigen receptor (CAR) T cell therapy | Multiple myeloma/ Brain cancer | IV | InTrial | 2H2020 | Yes | Yes |
| KPI-121 0.25% | loteprednol etabonate | Kala | corticosteroid | Dry eyes | OP | CRL | 2H2020 | No | No |
| Anti-VEGF DARPIn | abicipar pegol | Allergan | VEGF-A inhibitor | Age-related macular degeneration (AMD) | Intravitreal | InTrial | 2H2020 | Yes | No |
| AmnioFix | dehydrated human amnion/chorion membrane (dHACM) | MiMedx | amniotic tissue membrane | Plantar fasciitis/ Achilles tendonitis/ Osteoarthritis | INJ | InTrial | 4Q2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------------------|----------------------------------|--|---|---|-------------------------|-------------------|------------------------|----------------|-------------|
| tramadol | tramadol | Avenue Therapeutics | opioid receptor agonist | Pain | IV | InTrial | 4Q2020 | No | No |
| Estelle | estetrol/ drospirenone | Mithra/ Fuji/ Zhejiang Xianju | estrogen receptor agonist | Pregnancy prevention | PO/SL/ Transmucosal | InTrial | 4Q2020 | No | No |
| Infacort | hydrocortisone | Diurnal Group | corticosteroid | Adrenal insufficiency | PO | InTrial | 4Q2020 | No | Yes |
| MOR-208 (MOR-00208, XmAB-5574) | tafasitamab | MorphoSys/ Xencor | CD-19 antagonist | Diffuse large B-cell lymphoma (DLBCL)/ Acute lymphocytic leukemia (ALL)/ Chronic lymphocytic leukemia (CLL) | IV | InTrial | 4Q2020 | Yes | Yes |
| Melflufen (Ygalo) | melphalan- flufenamide | Oncopeptides AB | alkylating agent/ DNA synthesis inhibitor | Multiple myeloma/ Non-small cell lung cancer (NSCLC)/ Ovarian cancer | IV | InTrial | 4Q2020 | No | Yes |
| BLU-667 | BLU-667 | Blueprint Medicines | RET inhibitor | Non-Small Cell Lung Cancer (NSCLC) | PO | InTrial | 4Q2020 | Yes | Yes |
| Qtrypta | zolmitriptan | Zosano | triptans | Acute migraines | TOP | InTrial | 4Q2020 | No | No |
| Qarziba (Isqette) | dinutuximab beta | EUSA/ Aperion/ Endo/ Gen Ilac/ Medison | disialoganglioside | Neuroblastoma | SC | InTrial | 2020 | Yes | Yes |
| Multikine | Leukocyte Interleukin (CS-001P3) | CEL-SCI | immunomodulator | Head and Neck cancer/ Squamous cell carcinoma | SC | InTrial | 2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--|---------------------------------------|---------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| HTX-011 | bupivacaine/ meloxicam | Heron Therapeutics | anesthetic/ Nonsteroidal Anti-inflammatory Drug (NSAID) | Pain | Instillation | CRL | 2020 | No | No |
| ublituximab (LFB-R603, TG20, TGTX-1101, TG-1101, Utuxin) | ublituximab | TG Therapeutics | CD-20 monoclonal antibody | Chronic lymphocytic leukemia (CLL)/ Small cell lymphocytic lymphoma (SLL)/ Mantle cell lymphoma (MCL)/ Multiple sclerosis | IV | InTrial | 2020 | Yes | Yes |
| INCB-028060 | capmatinib | Novartis/ Incyte | cMET inhibitor | Non-small cell lung cancer (NSCLC) | PO | InTrial | 2020 | Yes | No |
| Oralair Mites | dust mite peptide | Stallergenes/ Shionogi | vaccine | Dust mite allergic rhinitis | SL | InTrial | 2020 | Yes | No |
| Deltyba | delamanid | Otsuka | mycolic acid biosynthesis inhibitor | Tuberculosis | PO | InTrial | 2020 | No | No |
| JNJ-872 (VX-787) | JNJ-872 (VX-787) | Johnson & Johnson/ Vertex | viral protein inhibitor | Influenza | PO | InTrial | 2020 | No | No |
| Zynquista | sotagliflozin | Sanofi/ Lexicon | sodium-dependent glucose transporter 1 (SGLT-1) and SGLT-2 inhibitor | Diabetes mellitus | PO | CRL | 2020 | No | No |
| NeoCart | autologous chondrocyte tissue implant | Histogenics/ Purpose | autologous chondrocyte tissue implant | Joint repair | Undisclosed | InTrial | 2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-------------------------|-----------------------------|----------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| NNC-0195-0092 (NN-8640) | somapacitan | Novo Nordisk | recombinant human growth hormone (rhGH) | Short stature/ Growth hormone deficiency | SC | InTrial | 2020 | Yes | No |
| Sativex | nabiximols | GW Pharmaceuticals/ Otsuka | cannabinoid product | Multiple sclerosis (MS)/ Pain | SL/ SPR | InTrial | 2020 | No | No |
| Contepo | fosfomycin | Nabriva Therapeutics | cell wall inhibitor | Bacterial infections | IV | CRL | 2020 | Yes | No |
| VivaGel | astodimer sodium (SPL-7013) | Starpharma | viral attachment inhibitor | Bacterial infections | VG | CRL | 2020 | No | No |
| CM-AT | CM-AT | Curemark | protein absorption enhancer | Autism | PO | InTrial | 2020 | Yes | No |
| MLN-4924 (TAK-92) | pevonedistat | Takeda | Nedd 8 Activating Enzyme (NAE) antagonist | Acute myeloid leukemia (AML)/ Chronic myelogenous leukemia (CML)/ Myelodysplastic syndrome (MDS) | PO | InTrial | 2020 | Yes | No |
| N-1539 | meloxicam | Recro Pharma/ Alkermes | nonsteroidal anti-inflammatory drug (NSAID) | Pain | IV | CRL | 2020 | Yes | No |
| ND-0612H | levodopa/ carbidopa | NeuroDerm | dopamine precursor/ dopa-decarboxylase inhibitor | Parkinson's disease (PD) | SC | InTrial | 2020 | Yes | No |
| Pedmark (STS) | sodium thiosulfate | Fennec | reducing agent | Hearing loss | IV | InTrial | 2020 | Yes | Yes |
| ursodeoxycholic acid | ursodeoxycholic acid | Retrophin/ Asklepion | bile acid derivative | Primary biliary cirrhosis/cholangitis | PO | InTrial | 2020 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------------------------|---|-----------------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| Travivo | gepirone ER | GSK/Fabre-Kramer | 5-HT-1A receptor agonist | Major depressive disorder (MDD) | PO | CRL | 2020 | No | No |
| Dexasite | dexamethasone | InSite Vision | corticosteroid | Blepharitis/ Ocular inflammation | TOP | InTrial | 2020 | No | No |
| APC-8000 | tadalafil | Adamis | phosphodiesterase-5 (PDE-5) inhibitor | Erectile dysfunction | PO | CRL | 2020 | Yes | No |
| ND-0612L | levodopa/ carbidopa | NeuroDerm | dopamine precursor/ dopa-decarboxylase inhibitor | Parkinson's disease (PD) | SC | InTrial | 2020 | Yes | No |
| BGF-MDI (PT-010) | budesonide/ glycopyrronium/ formoterol | AstraZeneca | corticosteroid/ long-acting muscarinic receptor antagonist (LAMA)/ long-acting beta 2 adrenergic receptor agonist (LABA) | Chronic obstructive pulmonary disease (COPD)/ Asthma | INH | InTrial | 2020 | No | No |
| Tivopath (AV-951, KRN-951, ASP-4130) | tivozanib | Aveo/ Astellas/ Kyowa Hakko Kirin | VEGF inhibitor | Renal cell cancer | PO | InTrial | 2020 | Yes | No |
| DS-200 | DS-200 | Eton | undisclosed | Ophthalmological disease | SC | InTrial | 2020 | unknown | No |
| QMF-149 | indacaterol maleate/ mometasone furoate | Novartis/ Merck | long-acting beta 2 agonist/ corticosteroid | Asthma | INH | InTrial | 2020 | No | No |
| BHV-0223 | riluzole | Biohaven | glutamate release inhibitor | Amyotrophic lateral sclerosis (ALS) | SL/ Transmucosal | CRL | 2020 | No | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|------------------------------------|--|---------------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| MNK-812 | oxycodone | Mallinckrodt | opioid agonist | Pain | PO | CRL | 2020 | No | No |
| CPP-1X/ sulindac (DFMO) | eflornithine/ sulindac | Cancer Prevention Pharma/ Zeria | ornithine decarboxylase inhibitor/ non-steroidal anti-inflammatory drug (NSAID) | Familial adenomatous polyposis (FAP)/ Colorectal cancer | PO | InTrial | 2020 | Yes | Yes |
| GZ-402666 (NeoGAA) | neo-recombinant human acid alpha glucosidase | Sanofi | enzyme therapy | Pompe disease | IV | InTrial | 2020 | Yes | No |
| Numbrino | cocaine HCl | Lannett | anesthetic | Anesthesia | TOP | CRL | 2020 | No | No |
| cannabidiol | cannabidiol | Insys Therapeutics | cannabinoid product | Seizures/ Prader-Willi | PO | InTrial | Late 2020 | Yes | No |
| skQ1 | visomitin | Mitotech | plastoquinone derivative | Dry eyes | OP | InTrial | Late 2020 | Yes | No |
| tanezumab | tanezumab | Pfizer/ Eli Lilly | neurotrophic tyrosine kinase receptor type 1 (TrkA) antagonist (monoclonal antibody) | Osteoarthritis/ Pain | IV/SC | InTrial | Late 2020 | Yes | No |
| BMN-111 | vosoritide (vosoritide) | BioMarin/ Chugai | C-type natriuretic peptide (CNP) analog | Achondroplasia | SC | InTrial | Late 2020 | Yes | Yes |
| NS-2 (ALDX-1E1, ALDX-1E2, ADX-102) | reproxalap | Aldeyra Therapeutics | aldehyde antagonist | Uveitis/ Allergic conjunctivitis/ Dry eyes | OP | InTrial | Late 2020 | No | No |
| azacitidine | azacitidine | Celgene | DNA methylation inhibitor | Acute myeloid leukemia (AML)/ Myelodysplastic syndromes | PO | InTrial | Late 2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-----------------------|-------------------|-----------------------------|---|--|-------------------------|-------------------|------------------------|----------------|-------------|
| MVA-MUC1-IL2 | TG-4010 | Transgene | vaccine | Non-small cell lung cancer (NSCLC) | SC | InTrial | Late 2020 | No | No |
| QAW-039 (NVP-QAW-039) | fevipirant | Novartis | chemoattractant receptor-homologous molecule (CRTH2) antagonist | Asthma/ Atopic dermatitis | PO | InTrial | Late 2020 | Yes | No |
| Molgradex | molgramostim | Savara | granulocyte macrophage-colony stimulating factor | Pulmonary alveolar proteinosis (PAP) | INH | InTrial | Late 2020 | Yes | Yes |
| Translarna | ataluren | PTC Therapeutics | gene transcription modulator | Duchenne muscular dystrophy/ Mucopolysaccharidosis (MPS) | PO | CRL | Late 2020 | Yes | Yes |
| BIVV-009 (TNT-009) | sutimlimab | Sanofi | complement C1s subcomponent inhibitor | Cold agglutnin disease | IV | InTrial | Late 2020 | Yes | Yes |
| RG-3477 (ACT-128800) | ponesimod | Johnson & Johnson | sphingosine 1 phosphate receptor agonists | Multiple sclerosis | PO | InTrial | Late 2020 | Yes | No |
| Lucassin | terlipressin | Orphan Therapeutics/ Ikaria | V-1 (vasopressin) agonist | Hepato-renal syndrome (HRS) | IV | CRL | Late 2020 | Yes | Yes |
| HuMax-TF ADC | tisotumab vedotin | Genmab/ Seattle Genetics | tissue factor antibody | Solid tumors | Undisclosed | InTrial | Late 2020 | Yes | No |
| RE-024 | fosmetpantotenate | Retrophin | phosphopantothenate replacement therapy | Neurodegeneration | IV | InTrial | Late 2020 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------|---------------|---------------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| MK-0594 (VPD-737) | serlopitant | Menlo | NK-1 receptor antagonist | Atopic dermatitis/ Cough | PO | InTrial | Late 2020 | Yes | No |
| Linhaliq | ciprofloxacin | Aradigm/ Grifols | fluoroquinolone | Non-cystic fibrosis bronchiectasis/ Cystic fibrosis | INH | CRL | Late 2020 | Yes | Yes |
| MEDI-551 | inebilizumab | AstraZeneca | CD-19 antagonist | Neuromyelitis optica (NMO) | IV | InTrial | Late 2020 | Yes | Yes |
| TSR-042 | dostarlimab | AnaptysBio | PD-1 checkpoint inhibitor | Endometrial cancer | IV | InTrial | Late 2020 | Yes | No |
| LY-900014 (URLi) | LY-900014 | Eli Lilly | insulins | Diabetes mellitus | SC | InTrial | Late 2020 | No | No |
| SHP-621 | budesonide | Shire | corticosteroid | Eosinophilic esophagitis | PO | InTrial | Late 2020 | Yes | Yes |
| iclaprim | iclaprim | Motif Bio | tetrahydrofolate dehydrogenase inhibitor | Bacterial infections | IV | CRL | Late 2020 | Yes | Yes |
| GFT-505 | elafibranor | Genfit | selective peroxisome proliferator-activated receptor (PPAR) modulator | Non-alcoholic steatohepatitis (NASH)/ Primary biliary cirrhosis | PO | InTrial | Late 2020 | No | No |
| BIM-22493 (RM-493) | setmelanotide | Rhythm/ Camurus/ Ipsen | melanocortin 4 receptor (MC4R) agonist | Obesity/ Bardet-Biedl syndrome | SC | InTrial | Late 2020 | Yes | Yes |
| SCY-078 (MK-3118) | ibrexafungerp | Scynexis/ R-Pharm JSC/ Merck | glucan synthase inhibitors | Fungal infections | IV/PO | InTrial | Late 2020 | No | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-----------------------------|---------------------------------|--|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| 2021 Possible launch date | | | | | | | | | |
| Furoscix | furosemide | scPharmaceuticals | diuretic | Heart failure | SC | CRL | 1Q2021 | Yes | No |
| MK-4618 (KRP-114V, RVT-901) | vibegron | Roivant Sciences/ Urovant/ Kissei/ Kyorin/ Merck | selective beta 3 adrenergic receptor agonist | Overactive bladder | PO | InTrial | 1Q2021 | No | No |
| ALNG-01 (ALN-G-01) | lumasiran | Alnylam | glycolate oxidase antagonist | Hyperoxaluria | Intranasal | InTrial | 1Q2021 | Yes | Yes |
| SDP-037, SDN-037 | SDP-037, SDN-037 | Sun Pharma Advanced Research Company (SPARC) | Corticosteroid | Ocular inflammation/pain | OP | InTrial | 2Q2021 | No | No |
| UCB-4940 (CDP-4940) | bimekizumab | UCB | interleukin-17 (IL-17) receptor inhibitor | Psoriasis(Ps)/ Psoriatic arthritis (PsA)/ Ankylosing spondylitis (AS)/ Rheumatoid arthritis (RA) | IV | InTrial | 1H2021 | Yes | No |
| RGN-259 (GBT-201; RGN-352) | thymosin beta 4 | RegeneRx | actin regulating peptide | Neurotrophic keratitis (NK)/ Dry eyes | OP | InTrial | 1H2021 | No | Yes |
| WVE-210201 | WVE-210201 | Wave Life Sciences | oligonucleotide | Duchenne muscular dystrophy (DMD) | IV | InTrial | 1H2021 | Yes | Yes |
| ACER-001 | sodium phenylbutyrate | Acer Therapeutics | BCKDC kinase inhibitor | Maple Syrup Urine Disease | PO | InTrial | 1H2021 | No | Yes |
| AXS-05 | dextromethorph an/ bupropion | Axsome | N-methyl-D-aspartate (NMDA) antagonist/ antidepressant | Treatment-resistant depression/ Alzheimer's disease | PO | InTrial | 1H2021 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|------------------------|-------------------------------------|--|---|---|-------------------------|-------------------|------------------------|----------------|-------------|
| ACP-001 | TransCon Growth Hormone | Ascendis | growth hormone prodrug | Short stature/ Growth hormone deficiency | SC | InTrial | 1H2021 | Yes | No |
| CCX-168 | avacopan | ChemoCentryx/ Galencia | C5a receptor (C5aR) antagonist | Vasculitis/ Glomerulopathy | PO | InTrial | 1H2021 | Yes | Yes |
| GSK-2894512 (WBI-1001) | tapinarof | GSK/ Celestial/ Roivant Sciences/ Welichem Biotech | therapeutic aryl hydrocarbon receptor modulating agent (TAMA) | Atopic dermatitis (AD)/ Psoriasis | TOP | InTrial | 1H2021 | Yes | No |
| TadFin | tadalafil and finasteride | Veru | phosphodiesterase type 5 inhibitor /5-alpha-reductase inhibitor | Benign prostatic hyperplasia (BPH) | PO | InTrial | Mid-2021 | No | No |
| EBV-CTL (ATA-129) | tabelecleucel | Atara Biotherapeutics/ Memorial Sloan-Kettering Cancer Center | cell therapy | Lymphoproliferative disorder | IV | InTrial | Mid-2021 | Yes | Yes |
| RSV-F (ResVax) | respiratory syncytial virus vaccine | Novavax | vaccine | Respiratory syncytial virus (RSV) infection | IM | InTrial | Mid-2021 | Yes | No |
| Recorlev | levoketoconazole | Strongbridge Biopharma | azole antifungal | Cushing's syndrome | PO | InTrial | 3Q2021 | No | Yes |
| PDP-716 | brimonidine | Sun Pharma Advanced Research Company (SPARC) | alpha-2 agonist | Glaucoma | OP | InTrial | 3Q2021 | No | No |
| Otividex | dexamethasone sustained-release | Otonomy | corticosteroid | Meniere's disease | Intratympanic | InTrial | 2H2021 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|---------------------------------------|---|-------------------------------------|--|---|-------------------------|-------------------|------------------------|----------------|-------------|
| VBP-15 | vamorolone | Santhera | corticosteroid | Duchenne muscular dystrophy (DMD) | PO | InTrial | 2H2021 | Yes | Yes |
| PL-56 | budesonide | Calliditas/ Kyowa Hakko Kirin | corticosteroid | Nephropathy | PO | InTrial | 2H2021 | No | No |
| TWIN (S6G5T-1; S6G5T-3) | benzoyl peroxide/ tretinoin | Sol-Gel Technologies | retinoid | Acne vulgaris | TOP | InTrial | 2H2021 | No | No |
| 177Lu-PSMA-617 | Lutetium | Endocyte | Radiopharmaceutical | Prostate cancer | IV | InTrial | 2H2021 | Yes | No |
| LN-145 | lifileucel | lovance Biotherapeutics | tumor infiltrating lymphocyte | Cervical Cancer | IV | InTrial | 2H2021 | Yes | No |
| GS-010 | GS-010 | GenSight Biologics | gene therapy | Optic neuropathy | Intraocular | InTrial | 2H2021 | Yes | Yes |
| AMAG-423 | digoxin immune fab (DIF) | AMAG/ Velo | digitalis-like factor antagonist | Preeclampsia | IV | InTrial | 2H2021 | Yes | Yes |
| SPN-810 | molindone | Supernus | atypical antipsychotic | Attention deficit hyperactivity disorder (ADHD) | PO | InTrial | 2H2021 | No | No |
| R-1658 (RG-1658, JTT-705, RO-4607381) | dalcetrapib | DalCor/ Japan Tobacco/ Roche | cholesteryl ester transfer protein inhibitor | Acute coronary syndrome (ACS) | PO | InTrial | 2021 | Yes | No |
| Korsuva | difelikefalin | Cara Therapeutics/ Vifor/ Fresenius | opioid receptor agonist | Pruritus/ Pain/ Osteoarthritis | IV/PO | InTrial | 2021 | No | No |
| OTL-101 | ADA-transduced autologous stem cell therapy | Orchard Therapeutics | gene therapy | Adenosine deaminase (ADA)-deficient severe combined immunodeficiency (SCID) | Undisclosed | InTrial | 2021 | Yes | Yes |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|-----------------------|--|------------------------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| BMS-986089 (RG-6206) | BMS-986089 (RG-6206) | Roche/ Bristol-Myers Squibb | anti-myostatin adnectin | Duchenne muscular dystrophy (DMD) | SC | InTrial | 2021 | Yes | Yes |
| AZD-6094 (HMPL-504) | savolitinib (volitinib) | AstraZeneca (Hutchison MediPharma) | c-Met receptor tyrosine kinase inhibitor | Renal cell cancer (RCC)/ Non-small cell lung cancer (NSCLC) | PO | InTrial | 2021 | Yes | No |
| CT-100 | corticotrophin | Eton | adrenocorticotrophic hormone (ACTH) | Rheumatoid arthritis (RA) | INJ | InTrial | 2021 | No | No |
| SHP-647 (PF-00547659) | SHP-647 (PF-00547659) | Shire | MAdCAM-1 antagonist | Irritable bowel disease (IBD)/ Crohn's disease (CD)/ Ulcerative colitis (UC) | IV/SC | InTrial | 2021 | Yes | Yes |
| ABL-001 | asciminib | Novartis | allosteric Bcr-Abl inhibitor | Chronic myelogenous leukemia (CML) | PO | InTrial | 2021 | Yes | Yes |
| CMX-001 | brincidofovir hexadecyloxypropyl ester | Chimerix | DNA-directed DNA polymerase inhibitor | Adenovirus/ Cytomegalovirus (CMV)/ Smallpox | PO | InTrial | 2021 | No | Yes |
| S5G4T-1 (DER-45-EV) | benzoyl peroxide | Sol-Gel Technologies | benzoyl peroxide | Rosacea | TOP | InTrial | 2021 | No | No |
| POL-6326 | balixafortide | Polyphor | chemokine (CXCR4) antagonist | Transplant/ Breast cancer | IV | InTrial | 2021 | Yes | No |
| DS-100 | DS-100 | Eton | undisclosed | Ophthalmological disease | SC | InTrial | 2021 | unknown | No |
| Qizenday | MD-1003 | MedDay | biotin | Multiple sclerosis | PO | InTrial | 2021 | Yes | No |
| ATI-5923 | tecarfarin | ARYx Therapeutics/ Armetheon | vitamin K epoxide reductase enzyme inhibitor | Anticoagulation | PO | InTrial | 2021 | No | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|------------------------------|---|-----------------------|--|--|-------------------------|-------------------|------------------------|----------------|-------------|
| RG-7314 (RO-5285119) | balovaptan | Roche | V1A vasopressin receptor antagonist | Autism spectrum disorder | PO | InTrial | 2021 | Yes | No |
| Edsivo | celiprolol HCl | Acer Therapeutics | alpha-2/beta-1 adrenergic agent | vascular Ehlers-Danlos Syndrome (vEDS) | PO | CRL | 2021 | Yes | Yes |
| OSE-2101 (IDM-2101, EP-2101) | tedopi | OSE Pharma/ Takeda | vaccine | Non-small cell lung cancer (NSCLC) | SC | InTrial | 2021 | Yes | Yes |
| LY-686017 | tradipitant | Vanda Pharmaceuticals | neurokinin 1 receptor (NK-1R) antagonist | Motion sickness | PO | InTrial | 2021 | No | No |
| IMO-2125 | tilsotolimod | Idera | toll-like receptor 9 (TLR-9) agonist | Melanoma | SC/ intratumoral | InTrial | 2021 | Yes | Yes |
| gantenerumab | gantenerumab | Roche | beta-amyloid (Abeta) inhibitor | Alzheimer's disease | SC | InTrial | Late 2021 | Yes | No |
| Ultomiris SC | ravulizumab-cwvz | Alexion | C5 complement inhibitor | paroxysmal nocturnal hemoglobinuria (PNH); Hemolytic uremic syndrome (HUS) | SC | InTrial | Late 2021 | Yes | Yes |
| ONS-5010 | bevacizumab | Outlook Therapeutics | anti-VEGF antibody | wet age-related macular degeneration | Intravitreal | InTrial | Late 2021 | Yes | No |
| PF-06482077 | multivalent group B streptococcus vaccine | Pfizer | vaccine | Bacterial infection | IM | InTrial | Late 2021 | Yes | No |
| CAT-1004 | edasalonexent | Catabasis | NF-kB inhibitor | Duchenne muscular dystrophy (DMD) | PO | InTrial | Late 2021 | Yes | Yes |
| Humacyl | human acellular vessel | Humacyte | cellular therapy | End-stage renal disease (ESRD)/ Peripheral artery disease (PAD) | Implant | InTrial | Late 2021 | Yes | No |
| AMT-061 | AMT-061 | uniQure | gene therapy | Hemophilia B | IV | InTrial | Late 2021 | Yes | No |

| Drug name | Generic name | Company | Drug class | Therapeutic use | Route of administration | Regulatory status | Estimated release date | Specialty drug | Orphan drug |
|--------------------------|--------------------------|-----------------------------|---|---|-------------------------|-------------------|------------------------|----------------|-------------|
| PW-4142 (T-111) | nalbuphine ER | Trevi Therapeutics/ Endo | opioid agonist/ antagonist | Prurigo nodularis | PO | InTrial | Late 2021 | No | No |
| NNZ-2566 | trofinetide | Neuren | insulin-like growth factor 1 (IGF-1) derivative | Rett syndrome/ Fragile X syndrome/ Brain injury | IV/PO | InTrial | Late 2021 | Yes | Yes |
| GSK-2696274 (OTL-200) | GSK-2696274 (OTL-200) | GlaxoSmithKline | gene therapy | Leukodystrophy | IV | InTrial | Late 2021 | Yes | Yes |

IM = intramuscular, INH = inhalation, INJ = injection, IUD = intrauterine device, IV = intravenous, OP = ophthalmic, PO = oral, SC = subcutaneous, SL = sublingual, SPR = spray, TOP = topical, VG = vaginal, NSCLC = Non-small cell lung cancer

Key pending indication forecast



OptumRx key pending indication forecast

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|------------|---|----------------------|--|------------------------------------|---|-------------------------|-------------------------|
| Tecentriq | atezolizumab | Genentech | PD-L1 monoclonal antibody | Non-small cell lung cancer (NSCLC) | In combination with Abraxane (albumin-bound paclitaxel; nab-paclitaxel) and carboplatin for the initial (first-line) treatment of people with metastatic non-squamous non-small cell lung cancer (NSCLC) who do not have EGFR or ALK genomic tumour aberrations | IV | 9/2/2019 |
| Ofev | nintedanib | Boehringer Ingelheim | tyrosine kinase inhibitor | Systemic sclerosis | Treatment of systemic sclerosis associated with interstitial lung disease | PO | 9/7/2019 |
| Nucala | mepolizumab | GlaxoSmithKline | IL-5 antagonist monoclonal antibody | Eosinophilic asthma | Add-on treatment for severe eosinophilic asthma in pediatric patients aged six to 11 years | SC | 9/19/2019 |
| Pifeltro | doravirine | Merck | non-nucleoside reverse transcriptase inhibitor (NNRTI) | HIV infection | Use in people living with HIV-1 who are switching from a stable antiretroviral regimen and whose virus is suppressed (HIV-1 RNA < 50 copies/mL) | PO | 9/20/2019 |
| Delstrigo | doravirine/ lamivudine/ tenofovir disoproxil fumarate | Merck | non-nucleoside reverse transcriptase inhibitor (NNRTI)/ nucleoside reverse transcriptase inhibitor (NRTI)/ NRTI | HIV infection | Use in people living with HIV-1 who are switching from a stable antiretroviral regimen and whose virus is suppressed (HIV-1 RNA < 50 copies/mL) | PO | 9/20/2019 |

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|------------|---------------|-----------|--|-------------------------------|--|-------------------------|-------------------------|
| Invokana | canagliflozin | Janssen | sodium-dependent glucose transporter 2 (SGLT-2) inhibitor | Diabetes mellitus | To reduce the risk of end-stage kidney disease (ESKD), the doubling of serum creatinine, which is a key predictor of ESKD, and renal or cardiovascular death in adults with type 2 diabetes and chronic kidney disease | PO | 9/22/2019 |
| Darzalex | daratumumab | Janssen | CD 38 molecule agonist | Multiple myeloma | in combination with bortezomib, thalidomide and dexamethasone (VTd) for newly diagnosed patients with multiple myeloma who are eligible for autologous stem cell transplant (ASCT) | IV | 9/26/2019 |
| Xarelto | rivaroxaban | Janssen | factor Xa inhibitor | Anticoagulation | Prevention of venous thromboembolism (VTE), or blood clots, in medically ill patients. | PO | 10/14/2019 |
| Nplate | romiplostim | Amgen | thrombopoietin receptor agonist | Immune thrombocytopenia (ITP) | Treatment of adult patients with immune thrombocytopenia (ITP) who have had ITP for 12 months or less and an insufficient response to corticosteroids, immunoglobulins or splenectomy | SC | 10/15/2019 |
| Eylea | aflibercept | Regeneron | vascular endothelial growth factor-A (VEGF-A) inhibitor/ placental growth factor (PIGF) inhibitor | Macular degeneration | Prefilled-syringe formulation | INJ | 10/15/2019 |

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|------------|-------------------------|----------------------|---|------------------------------------|--|-------------------------|-------------------------|
| Zilretta | triamcinolone acetonide | Flexion Therapeutics | corticosteroids | Osteoarthritis | Label update: Repeat administration of Zilretta for treatment of osteoarthritis (OA) knee pain was safe and well tolerated with no deleterious impact on cartilage or joint structure observed through X-ray analysis. | Intra-articular | 10/17/2019 |
| Ultomiris | ravulizumab-cwvz | Alexion | C5 complement inhibitor | Hemolytic uremic syndrome (HUS) | Treatment of atypical hemolytic uremic syndrome | IV | 10/19/2019 |
| Stelara | ustekinumab | Janssen | human interleukin-12 and -23 antagonist | Ulcerative colitis | Treatment of ulcerative colitis (UC) | SC | 10/20/2019 |
| Baxdela | delafloxacin | Melinta Therapeutics | fluoroquinolone | Community Acquired Pneumonia (CAP) | Treatment of adult patients with community acquired pneumonia (CAP) | PO/IV | 10/24/2019 |
| Zejula | niraparib | Tesaro | poly (ADP-ribose) polymerase (PARP) inhibitor | Ovarian cancer | Treatment of advanced ovarian, fallopian tube, or primary peritoneal cancer patients who have been treated with three or more prior chemotherapy regimens and whose cancer | PO | 10/24/2019 |
| Erleada | apalutamide | Janssen | androgen receptor antagonist | Prostate cancer | Treatment of patients with metastatic castration-sensitive prostate cancer (mCSPC). | PO | 10/26/2019 |
| Belviq XR | lorcaserin | Arena/Eisai | 5-HT-2C receptor agonist | Obesity | Label update: to include long-term efficacy and safety data and remove the limitation of use related to the effect of Belviq on CV morbidity and mortality | PO | 10/31/2019 |
| Botox | onabotulinumtoxinA | Allergan | botulinum toxin analog | Lower spasticity | Treatment of pediatric patients (2 years of age and older) with lower limb spasticity | IM | 11/1/2019 |

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|------------|-----------------|------------------------|---|---|--|-------------------------|-------------------------|
| Xofluza | baloxavir | Genentech/ Shionogi | polymerase acidic (PA) endonuclease inhibitor | Influenza | Treatment of influenza in individuals at high-risk for influenza-related complications 12 years of age or older | PO | 11/4/2019 |
| Farxiga | dapagliflozin | AstraZeneca | sodium glucose cotransporter-2 (SGLT-2) inhibitor | Diabetes mellitus | Addition of cardiovascular outcomes trial data for Farxiga for type 2 diabetes. | PO | 12/1/2019 |
| Rituxan | rituximab | Roche/ Genentech | CD-20 antagonist | Granulomatosis with polyangiitis (GPA) and microscopic polyangiitis | In combination with glucocorticoids, for the treatment of granulomatosis with polyangiitis (GPA) and microscopic polyangiitis (MPA) in children two years of age and older | IV | 12/11/2019 |
| Vascepa | icosapent ethyl | Amarin | ethyl ester of eicosapentaenoic acid | Hyperlipidemia | Adjunct to diet in the treatment of adults with high triglycerides (≥ 200 mg/dL and < 500 mg/dL) and mixed dyslipidemia | PO | 12/28/2019 |
| Fiasp | insulin aspart | Novo Nordisk | insulins | Diabetes mellitus | To improve glycemic control in children and adolescents with type 1 diabetes | SC | 1/1/2020 |
| Ozempic | semaglutide | Novo Nordisk | glucagon-like peptide-1 (GLP-1) receptor agonist | Cardiovascular risk reduction | Cardiovascular risk reduction in adults with type 2 diabetes | SC | 1/20/2020 |

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|--------------|---------------|--------------------|--|---|--|-------------------------|-------------------------|
| Keytruda | pembrolizumab | Merck | anti-PD-1 inhibitor | Melanoma, classical Hodgkin lymphoma, primary mediastinal large B-cell lymphoma, gastric cancer, hepatocellular carcinoma and Merkel cell carcinoma | Updated dosing frequency: every-six-weeks (Q6W) dosing schedule option. | IV | 2/18/2020 |
| luspatercept | luspatercept | Celgene | modified type II activin receptor recombinant fusion protein | Myelodysplastic syndromes (MDS) | Treatment of adult patients with very low to intermediate risk myelodysplastic syndromes (MDS)-associated anemia who have ring sideroblasts and require red blood cell (RBC) transfusions | SC | 4/4/2020 |
| Otezla | apremilast | Celgene | phosphodiesterase 4 inhibitor | Scalp psoriasis | Treatment of moderate to severe scalp psoriasis | PO | 4/15/2020 |
| Nerlynx | neratinib | Puma Biotechnology | irreversible pan-ErbB receptor tyrosine kinase inhibitor | Breast cancer | In combination with capecitabine for the treatment of patients with HER2-positive metastatic breast cancer who have failed two or more prior lines of HER2-directed treatment (third-line disease) | PO | 5/1/2020 |
| Xtandi | enzalutamide | Astellas/ Pfizer | androgen receptor inhibitor | Prostate cancer | Treatment of metastatic hormone-sensitive prostate cancer (mHSPC) | PO | 5/30/2020 |

| Brand name | Generic name | Company | Drug class | Therapeutic use | Proposed new indication | Route of administration | Estimated approval date |
|------------|--------------|---------|---|------------------|--|-------------------------|-------------------------|
| Orilissa | elagolix | AbbVie | gonadotropin-releasing hormone (GnRH) receptor antagonist | Uterine fibroids | Management of heavy menstrual bleeding (HMB) associated with uterine fibroids in women | PO | 6/5/2020 |

IM = intramuscular, IV = intravenous, OPH = ophthalmic, PO = oral, SC = subcutaneous

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