Somatrogon: Adis Evaluation

Clinical Considerations

- Long-acting rhGH that allows for once-weekly administration
- Non-inferior to once-daily somatropin in increasing height velocity in children with GHD
- Associated with a lower treatment burden than once-daily somatropin
- Generally well tolerated, with a tolerability profile consistent with that of somatropin

Plain Language Summary

Background and rationale

- Growth hormone deficiency (GHD) is a rare cause of growth failure in children. Affected children are usually much shorter than their peers and over time will tend to drop farther below the normal range
- When GHD is recognised, children ordinarily begin treatment with recombinant human growth hormone (rhGH; somatropin) administered once daily, which while effective, has been associated with non-adherence and thus impaired therapeutic response
- Somatrogon (NGENLA®) is a novel long-acting rhGH that allows once-weekly administration

Clinical findings

- Administered as a once-weekly subcutaneous injection in a clinical trial in pre-pubertal children diagnosed with GHD who had not received prior rhGH therapy, somatrogon was no less effective than once-daily somatropin in terms of annualised height velocity following 12 months of treatment, with catch-up growth continuing over the longer term. In another clinical trial, once-weekly somatrogon reduced treatment burden relative to once-daily somatropin in treatment-experienced paediatric patients with GHD
- When used to treat paediatric GHD, somatrogon was generally well tolerated, with a tolerability profile consistent with that of somatropin; most adverse events were mild or moderate in severity

Conclusion

Somatrogon is a valuable new treatment option for children and adolescents aged ≥ 3 years with growth disturbance due to insufficient GH secretion, and offers the convenience of once-weekly administration