

Testimony Before the FDA's Cardiovascular and Renal Drugs Advisory Committee Meeting Regarding Omecamtiv Mecarbil

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I have no financial conflicts of interest.

Introduction

Public Citizen strongly opposes FDA approval of omecamtiv mecarbil to reduce the risk of cardiovascular death and heart failure events in patients with symptomatic chronic heart failure with reduced ejection fraction.

- 1) The minimal benefits demonstrated in this single trial do not outweigh the significant risks, especially for some heart failure patients**
- 2) The evidence for the benefits of omecamtiv are not accompanied by confirmatory evidence**

Benefit-Risk Ratio

Benefits

- **8% lower relative risk compared to placebo**
- **2% lower absolute risk compared to placebo**
- **CV death endpoint did not meet statistical significance**

Risks

- **Higher incidence of myocardial ischemia compared to placebo**
- **Similar rate of CV death between groups**
- **But patients with AFF taking omecamtiv had an increased risk of CV death**

Adequacy of Evidence

- **The efficacy and safety of this drug are based on only one trial without adequate, reliable confirmatory evidence**
- **Limitations of post hoc analysis make it impossible to evaluate**
 - **the potential benefits of omecamtiv compared to placebo for patients whose LVEF at baseline was lower than 28%**
 - **the increased risk seen in AFF patients, especially in the subset of patients treated with digoxin**

Conclusion

- **Minimal treatment effect that cannot be considered a clinically meaningful improvement for patients**
- **Single clinical trial with no additional confirmatory evidence**
- **We agree with the FDA that “given the limitations inherent in post hoc analyses, one cannot be certain about differential risk in patient subgroups, thus impacting regulatory decision-making.”**

We therefore urge the committee to vote “No” on the voting question and strongly recommend that the FDA not approve omecamtiv mecarbil.