Drug assessment at a glance: A25-145[1]

Tezepelumab (chronic rhinosinusitis with nasal polyps)

10 August 2026

[1] This is a courtesy translation of the summary provided as a service by IQWiG. For further information on the subject matter and the result of the assessment, please refer to the dossier assessment for Project A25-145. The G-BA decides on the added benefit.

Research question for the benefit assessment

Population	Adults with severe CRSwNP for whom therapy with SCS, and/or surgery do not provide adequate disease control
Intervention	tezepelumab + INCS
Comparator	• dupilumab or • omalizumab or • mepolizumab in each case in combination with intranasal corticosteroids (budesonide or mometasone furoate)
Outcomes	At least one patient-relevant outcome

Overview of positive and negative effects

	Size of the effects	Informative value of the effects
Mortality	ø	–
Morbidity	↔ (SNOT-22 total score)	–
Symptoms	↑ (Nasal congestion/obstruction) ↑↑ (Reduction/loss of smell) ↑ (Nasal discharge) ↔ (Mucus in the throat) ↔ (Facial pain)	★ ★ ★ – –
Health-related quality of life	↔	–
Side effects	ø	–
	ø No (suitable) data ↔ No advantage or disadvantage ↑ / ↓ Small advantage/disadvantage ↑↑ / ↓↓ Moderate advantage/disadvantage ↑↑↑ / ↓↓↓ Large advantage/disadvantage	– Not applicable ★ Low ★★ Moderate ★★★ High

Overall: An advantage of unclear magnitude with low informative value

Evidence base and noteworthy aspects

- Evidence base: adjusted indirect comparison according to Bucher, based on the WAYPOINT study (relevant subpopulation: tezepelumab + INCS [N = 144] vs. placebo + INCS [N = 147]) and the SYNAPSE study (mepolizumab + INCS [N = 206] vs. placebo + INCS [N = 201]) using the common comparator placebo + INCS. For all patients included in the indirect comparison, at least one operation for nasal polyps was documented in their medical history.
- Whilst in the SYNAPSE study, nasal polyp surgery could be conducted at any point during the study course and had no impact on the planned 52-week course of treatment with the study medication, in the WAYPOINT study, nasal polyp surgery resulted directly in premature treatment discontinuation.
- Despite uncertainties regarding the outcomes in the WAYPOINT study, it was assumed, on the basis of different analysis strategies and sensitivity analyses, that the results for the outcomes in the categories of morbidity and health-related quality of life were sufficiently reliable.
- There was too much uncertainty regarding outcomes in the ‘side effects’ category and other outcomes to allow for an indirect comparison

Key study findings

Outcome category Outcome Comparison Study	tezepelumab + INCS or mepolizumab + INCS N	 Patients with event n (%)	placebo + INCS N	 Patients with event n (%)	Group difference RR [95% CI]; p-value
Morbidity (Week 52)					
Nasal congestion/obstruction					
WAYPOINT (NPSD [NRS])	144	134 (93.1)	147	97 (66.0)	0.71 [0.63; 0.81]; < 0.001
SYNAPSE (VAS)	206	155 (75.0)	201	132 (66.0)	0.87 [0.76; 0.99]; 0.037
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.82 [0.69; 0.98]; 0.032
Reduction/loss of smell					
WAYPOINT (NPSD [NRS])	144	94 (65.3)	147	40 (27.2)	0.41 [0.31; 0.54]; < 0.001
SYNAPSE (VAS)	206	100 (49.0)	201	71 (35.0)	0.73 [0.57; 0.95]; 0.007
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.56 [0.38; 0.82]; 0.003
Nasal discharge					
WAYPOINT (NPSD [NRS])	144	126 (87.5)	147	83 (56.5)	0.65 [0.56; 0.76]; < 0.001
SYNAPSE (VAS)	206	155 (75.0)	201	132 (66.0)	0.87 [0.76; 0.99]; 0.037
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.75 [0.61; 0.92]; 0.005

Outcome category Outcome Comparison Study	tezepelumab + INCS or mepolizumab + INCS N	 Patients with event n (%)	placebo + INCS N	 Patients with event n (%)	Group difference RR [95% CI]; p-value
Mucus in the throat					
WAYPOINT (NPSD [NRS])	144	103 (71.5)	147	85 (57.8)	0.81 [0.69; 0.97]; 0.019
SYNAPSE (VAS)	206	148 (72.0)	201	130 (65.0)	0.90 [0.78; 1.03]; 0.129
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.90 [0.73; 1.13]; 0.373
Facial pain					
WAYPOINT (NPSD [NRS])	144	90 (62.5)	147	76 (51.7)	0.83 [0.68; 1.02]; 0.074
SYNAPSE (VAS)	206	141 (68.0)	201	119 (59.0)	0.86 [0.74; 1.00]; 0.054
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.97 [0.75; 1.25]; 0.802
SNOT-22 total score					
WAYPOINT	144	129 (89.6)	147	97 (66.0)	0.74 [0.65; 0.84]; < 0.001
SYNAPSE	205	157 (76.6)	198	122 (61.6)	0.80 [0.69; 0.93]; 0.001
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					0.92 [0.76; 1.12]; 0.412
Health-related quality of life (Week 52)					
SF-36v2					
Physical Component Summary (PCS)					
WAYPOINT	144	69 (47.9)	147	49 (33.3)	0.70 [0.52; 0.93]; 0.013
SYNAPSE	205	86 (42.0)	198	46 (23.2)	0.55 [0.39; 0.76]; < 0.001
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					1.27 [0.82; 1.96]; 0.294

Outcome category Outcome Comparison Study	tezepelumab + INCS or mepolizumab + INCS N	 Patients with event n (%)	placebo + INCS N	 Patients with event n (%)	Group difference RR [95% CI]; p-value
Mental Component Summary (MCS)					
WAYPOINT	144	48 (33.3)	147	46 (31.3)	0.94 [0.67; 1.31]; 0.710
SYNAPSE	205	62 (30.2)	198	41 (20.7)	0.68 [0.47; 0.99]; 0.030
Indirect comparison: tezepelumab + INCS vs. mepolizumab + INCS					1.38 [0.84; 2.28]; 0.206
Mortality, side effects					
No suitable data for the indirect comparison					

References

Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen. Tezepelumab (chronische Rhinosinusitis mit Nasenpolypen); Nutzenbewertung gemäß § 35a SGB V; Dossierbewertung [online]. 2026 [Accessed: 29.04.2026]. URL: https://doi.org/10.60584/A25-145.

Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen. Tezepelumab (chronische Rhinosinusitis mit Nasenpolypen); Addendum zum Projekt A25-145 (Dossierbewertung) [online]. 2026 [Accessed: 29.04.2026]. URL: https://doi.org/10.60584/A26-32.

Gemeinsamer Bundesausschuss. Nutzenbewertungsverfahren zum Wirkstoff Tezepelumab (Neues Anwendungsgebiet: Chronische Rhinosinusitis mit Nasenpolypen) [online]. 2026 [Accessed: 29.04.2026]. URL: https://www.g-ba.de/bewertungsverfahren/nutzenbewertung/1281/.

English translations for this project are published at https://www.iqwig.de/en/projects/a25-145.html and https://www.iqwig.de/en/projects/a26-32.html.

Publisher details

Publisher

Institute for Quality and Efficiency in Health Care (IQWiG)

Address

Siegburger Str. 237
50679 Köln
Germany

Phone: +49 221 35685-0
Fax: +49 221 35685-1
Email: info@iqwig.de
Internet: www.iqwig.de