

Recommendations from York and Scarborough Medicines Commissioning Committee September 2019

	Drug name	Indication	Recommendation, rationale and place in therapy	RAG status	Potential full year cost impact
CCG commissioned Technology Appraisals					
1.	TA596 : Risankizumab for treating moderate to severe plaque psoriasis		<p>Risankizumab is recommended as an option for treating plaque psoriasis in adults, only if:</p> <ul style="list-style-type: none"> the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and the company provides the drug according to the commercial arrangement. Stop risankizumab treatment at 16 weeks if the psoriasis has not responded adequately. 	RED	<p>NICE do not expect this guidance to have a significant impact on resources; that is, the resource impact of implementing the recommendations in England will be less than £9,000 per 100,000 population. This is because the technology is a further treatment option and the overall cost of treatment will be similar.</p> <p>Note: 30 day implementation TA from 21.8.2019</p>
2.	TA597 : Dapagliflozin with insulin for treating type 1 diabetes		<p>Dapagliflozin with insulin is recommended as an option for treating type 1 diabetes in adults with a body mass index (BMI) of at least 27 kg/m², when insulin alone does not provide adequate glycaemic control despite optimal insulin therapy, only if:</p> <ul style="list-style-type: none"> they are on insulin doses of more than 0.5 units/kg of body weight/day and they have completed a structured education programme that is evidence based, quality assured, delivered by trained educators and includes information about diabetic ketoacidosis treatment is started and supervised by a consultant physician specialising in endocrinology and diabetes <p>Assess haemoglobin A1c (HbA1c) levels after 6 months and regularly after this. Stop</p>	AMBER Specialist Initiation	<p>The costs according to NICE for implementing this guidance from year 2023/24 once steady state is reached is equivalent to around £6,100 per 100,000 population.</p>

		dapagliflozin if there has not been a sustained improvement in glycaemic control (that is, a fall in HbA1c level of at least 0.3%).		
NHSE commissioned Technology Appraisals – for noting				
3.	TA592 : Cemiplimab for treating metastatic or locally advanced cutaneous squamous cell carcinoma	Cemiplimab is recommended for use within the Cancer Drugs Fund as an option for treating locally advanced or metastatic cutaneous squamous cell carcinoma in adults when curative surgery or curative radiotherapy is not appropriate. It is recommended only if the conditions in the managed access agreement are followed. Treatment with cemiplimab should be continued until disease progression or for up to 24 months (whichever is sooner).	RED	No cost impact to CCGs as NHS England commissioned.
4.	TA593 : Ribociclib with fulvestrant for treating hormone receptor-positive, HER2-negative, advanced breast cancer	Ribociclib with fulvestrant is recommended for use within the Cancer Drugs Fund as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer in people who have had previous endocrine therapy only if: <ul style="list-style-type: none"> • exemestane plus everolimus is the most appropriate alternative to a cyclin-dependent kinase 4 and 6 (CDK 4/6) inhibitor and • the conditions in the managed access agreement for ribociclib with fulvestrant are followed. 	RED	No cost impact to CCGs as NHS England commissioned.
5.	TA594 : Brentuximab vedotin for untreated advanced Hodgkin lymphoma (terminated appraisal)	NICE is unable to make a recommendation about the use in the NHS of brentuximab vedotin for untreated advanced Hodgkin lymphoma because Takeda did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because it considers that, at this time, there is insufficient evidence to provide a UK submission for this appraisal. The company has confirmed that it does not intend to make a submission for the appraisal until data from a key study in this indication are available in	BLACK for this indication	No cost impact to CCGs as NHS England commissioned.

		June 2021.		
6.	TA595 : Dacomitinib for untreated EGFR mutation-positive non-small-cell lung cancer	Dacomitinib is recommended, within its marketing authorisation, as an option for untreated locally advanced or metastatic epidermal growth factor receptor (EGFR) mutation-positive non-small-cell lung cancer (NSCLC) in adults. It is recommended only if the company provides it according to the commercial arrangement	RED	No cost impact to CCGs as NHS England commissioned.
7.	TA598 : Olaparib for maintenance treatment of BRCA mutation-positive advanced ovarian, fallopian tube or peritoneal cancer after response to first-line platinum-based chemotherapy	Olaparib is recommended for use within the Cancer Drugs Fund as an option for the maintenance treatment of BRCA mutation-positive, advanced (FIGO stages 3 and 4), high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to first-line platinum-based chemotherapy in adults. It is recommended only if the conditions in the managed access agreement for olaparib are followed.	RED	No cost impact to CCGs as NHS England commissioned.
Formulary applications or amendments/pathways/guidelines				
8.	Acetylcysteine 600mg effervescent tablets	Formulary currently lists both Acetylcysteine 600mg effervescent tablets and capsules but there is significant cost difference. Agreed that formulary should be amended to only include Acetylcysteine 600mg effervescent tablets noting their sodium content, with NACSYS® being the current brand of choice.	n/a	No cost impact to CCGs expected as advising most cost-effective product be prescribed. Aceteff® 600 mg effervescent tablets = £16.50 per month NACSYS® 600 mg effervescent tablets = £16.50 per month Acetylcysteine 200 mg powder for oral solution = £1012 per month Acetylcysteine 600 mg capsules = £119.91 per month
9.	Alu-cap® (aluminium hydroxide) 475 mg Capsules	Product been discontinued and agreed to remove from formulary.	n/a	No cost impact to CCGs expected. ScR £205 and 20 issues in last 12 months VoY £754 and 37 issues in last 12 months
10.	Biologic Pathway for Psoriasis	New pathway for use of Biologics in Psoriasis approved. Pathway follows NICE guidance and relevant NICE TAs. Noted all biologics are currently RED drugs	n/a	No significant cost to CCGs expected as all the proposals are current practice and promotes use of the most cost-effective biologics

