

Putting NICE guidance into practice

Costing statement: Implementing the NICE guideline on Irritable bowel syndrome in adults (CG61)

Published: February 2015

1 Introduction

1.1 NICE have updated Irritable bowel syndrome (IBS) in adults (NICE guideline CG61).

1.2 New recommendations have been added on

- dietary advice,
- constipation,
- tricyclic antidepressants (TCAs), selective serotonin reuptake inhibitors (SSRIs) and
- possible side effects when offering TCAs or SSRIs.

Only the recommendation on constipation is anticipated to have a resource impact. This should be considered at a local level.

1.3 The commissioners for services are clinical commissioning groups (CCGs) and services are delivered by both primary and secondary care providers.

2 Recommendations with a potential resource impact

2.1 The following new recommendation may have a resource implication locally:

Consider linaclotide for people with IBS only if:

- optimal or maximum tolerated doses of previous laxatives from different classes have not helped **and**
- they have had constipation for at least 12 months (**recommendation 1.6.1.4**)

3 Resource impact considerations

Linaclotide capsules 290 micrograms, net price 28-cap pack = £37.56.

This is equivalent to £488 per annum per person. The impact of implementing this recommendation in the guidance will depend on current clinical practice.

About this costing statement

This costing statement accompanies Irritable bowel syndrome in adults (NICE guideline CG61)

Issue date: February 2015

This statement is written in the following context

This statement represents the view of NICE, which was arrived at after careful consideration of the available data and through consulting healthcare professionals. It should be read in conjunction with the NICE guideline. The statement is an implementation tool and focuses on those areas that were considered to have potential impact on resource utilisation.

The cost and activity assessments in the statement are estimates based on a number of assumptions. They provide an indication of the potential impact of the principal recommendations and are not absolute figures.

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