



Resource impact summary report

Resource impact

Published: 27 January 2022

Last updated: 24 May 2022

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NICE has recommended SedaConDa-ACD for use in an intensive care (ICU) setting for sedation with volatile anaesthetics when sedation with isoflurane or sevoflurane is considered clinically appropriate. Further research is recommended to identify any groups of patients that could benefit from inhaled sedation with SedaConDa-ACD.

The eligible population is not identified in the guidance recommendations; therefore, it is not known how many of the people in critical care units will have inhaled sedation in the future. Clinical experts have suggested that 1 to 2 people per 500 people who are invasively ventilated in critical care units may have inhaled sedation with SedaConDa-ACD.

We 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 £5 million per year in England (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million people).

This is because SedaConDa-ACD is a further treatment option and the population size is small and any cost is likely to be offset by savings and benefits. There may be efficiency savings as a result of a reduced length of stay in intensive care units when using inhaled sedation with SedaConDa-ACD.

The costs to commissioners of bed days in intensive care are agreed locally. In the template reference costs have been used for illustrative purposes, these unit costs can be changed. Organisations are recommended to use their local prices in the [resource impact template](#). The assumed length of stay in intensive care units used in the local resource impact template can also be amended.

Volatile anaesthetics are halogenated chlorofluorocarbons or fluorinated hydrocarbons and are therefore potentially damaging to the earth's ozone layer. They also contribute to global warming if not properly captured and disposed of. It is anticipated that use of SedaConDa-ACD will help improve safe capture of volatile anaesthetics.

This technology is commissioned by integrated care systems (ICS) / clinical commissioning groups (CCGs). Providers are NHS Hospital Trusts.