



Resource impact summary report

Resource impact

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NICE has recommended GreenLight XPS as an option for treating benign prostatic hyperplasia (BPH) in adults.

Data should continue to be collected on cost-saving outcomes when using GreenLight XPS compared with other treatments in people who may be considered high risk, including those with larger prostates and a higher risk of bleeding.

We do not expect the updated guidance to have a significant impact on NHS resources. GreenLight XPS is now recommended for people with BPH, including those in high-risk groups. Treatment options already exist for these groups in current guidance. It is not anticipated that there will be a significant switch from current treatment options to GreenLight XPS.

Based on the economic evidence GreenLight XPS would be cost saving, per person, compared with transurethral resection of the prostate (TURP) and with holmium laser enucleation of the prostate (HoLEP). Any potential cost savings at a local level would depend on the proportions of procedures carried out as a day-case at individual trusts. The committee agreed that setting up day-case services at an individual trust level would be of key importance to optimise the potential savings with GreenLight XPS.

Around 4.3 million adults aged 50 years and over have benign prostatic hyperplasia in England. Of these, around 0.76% (33,000 people) are eligible for surgical treatments of which GreenLight XPS is an option alongside other NICE recommended medical technologies:

- Rezum for treating lower urinary tract symptoms secondary to benign prostatic hyperplasia
- The PLASMA system for transurethral resection and haemostasis of the prostate
- <u>UroLift for treating lower urinary tract symptoms of benign prostatic hyperplasia</u>.

Also, <u>NICE's guideline on the management of lower urinary tract symptoms in men</u>, recommends surgery for men with prostates larger than 80 g.

The company stated that a GreenLight XPS laser console is usually provided free to the NHS, as part of a contractual arrangement with the company to purchase a minimum number of laser fibres over a specified time period at an average price of £500 per fibre (excluding VAT). Also, if more than 1 fibre is needed per person, this additional fibre is provided by the company at no extra cost.

Because GreenLight XPS can be done as a day-case procedure, compared with other treatment options, it may reduce the number of bed days needed by people with BPH, giving providers more bed capacity. The reduction in bed days is a non-cash releasing capacity saving.

Risk of postoperative bleeding is low with GreenLight XPS therefore continuous bladder irrigation (to prevent clot formation) is not normally needed after GreenLight XPS surgery, which reduces nursing requirements and improves the patient experience.

A <u>resource impact template for benign prostatic technologies is available</u> alongside this report and can be used to estimate any potential resource impact.

This medical technology is commissioned by integrated care systems. Providers are NHS hospital trusts. GreenLight XPS is one of the technologies covered by the $\underline{\mathsf{MedTech}}$ funding mandate in the financial year 2022/23.