#### **NICE** National Institute for Health and Care Excellence

# Resource impact summary report

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# **Resource impact summary report**

This summary report is based on the NICE assumptions used in the <u>resource impact</u> <u>template</u>. Users can amend the 'inputs and eligible population' and 'unit costs' worksheets in the template to reflect local data and assumptions.

#### Recommendation

NICE has recommended futibatinib, within its marketing authorisation, as an option for treating locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that has progressed after at least 1 line of systemic treatment in adults. Futibatinib is only recommended if the company provides it according to the <u>commercial arrangement</u>.

### Eligible population for futibatinib

Table 1 shows the population who are eligible for futibatinib and the number of people who are expected to have futibatinib in each of the next 5 years, including population growth.

Eligible population and uptake	Current practice	2024-25	2025-26	2026-27	2027-28	2028-29
People eligible for futibatinib	35	35	36	36	36	36
Uptake for futibatinib (%)	0	40	50	50	50	50
People having futibatinib each year	0	14	18	18	18	18

Table 1 Population expected to be eligible for and have futibatinib in England

The assumptions used to calculate the eligible population in table 1 are detailed in the <u>resource impact template</u>.

The uptake for futibatinib is based on the NHS England expert opinion.

#### Treatment options for the eligible population

The comparator treatment for the eligible population is pemigatinib.

There are no clinical trials directly comparing futibatinib with pemigatinib. An indirect comparison of futibatinib and pemigatinib suggests that they may have similar effectiveness, but this is uncertain.

Futibatinib and pemigatinib are both administered orally.

For more information about the treatments, such as dose and average treatment duration, see the <u>resource impact template</u>.

### Financial resource impact (cash items)

The company has a <u>commercial arrangement</u>. This makes futibatinib available to the NHS with a discount.

Users can input the confidential price of futibatinib and amend other variables in the <u>resource impact template</u>.

The payment mechanism for the technology is determined by the responsible commissioner and depends on the technology being classified as high cost.

We expect the resource impact of implementing the recommendations in England will be less than £5 million per year (or approximately £8,800 per 100,000 population, based on a population for England of 57.16 million people).

This is because the technology is a further treatment option and the overall cost of treatment will be similar for this population.

For further analysis or to calculate the financial impact of cash items, see the resource impact template.

## Capacity impact

There is no expected impact on capacity because of this guidance, as both treatment

options are administered orally.

For further analysis or to calculate the financial capacity impact from a commissioner (national) and provider (local) perspective and to incorporate population, see the resource impact template.

#### **Key information**

**Table 2 Key information** 

Time from publication to routine commissioning funding	90 days
Programme budgeting category	PBC 02B
Commissioner(s)	NHS England
Provider(s)	NHS hospital trusts
Pathway position	Second line

#### About this resource impact summary report

This resource impact summary report accompanies the NICE guidance on futibatinib for previously treated advanced cholangiocarcinoma with FGFR2 fusion or rearrangement and should be read with it. See terms and conditions on the NICE website.

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