NICE National Institute for Health and Care Excellence

Resource impact summary report

Resource impact

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Resource impact summary report

This summary report is based on the NICE assumptions used in the resource impact template. 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 elacestrant as an option for treating oestrogen receptor (ER)-positive HER2-negative locally advanced or metastatic breast cancer with an activating ESR1 mutation that has progressed after at least 1 line of endocrine therapy plus a cyclin-dependent kinase (CDK) 4 and 6 inhibitor in:

- women, trans men and non-binary people who have been through the menopause
- trans women and men.

Elacestrant is recommended only if:

- the cancer has progressed after at least 12 months of endocrine treatment plus a CDK 4 and 6 inhibitor, and
- the company provides it according to the commercial arrangement.

This recommendation is not intended to affect treatment with elacestrant that was started in the NHS before this guidance was published. People having treatment outside this recommendation may continue without change to the funding arrangements in place for them before this guidance was published, until they and their NHS healthcare professional consider it appropriate to stop.

Eligible population for elacestrant

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

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

Eligible population and uptake	Current practice	2025 to 2026	2026 to 2027	2027 to 2028	2028 to 2029	2029 to 2030
People eligible for elacestrant	1,050	1,060	1,070	1,080	1,090	1,100
Uptake for elacestrant (%)	0	45	90	90	90	90
People having elacestrant each year (rounded to nearest 10)	0	480	970	970	980	990

The uptake for elacestrant is based on clinical expert opinion from NHS England.

Treatment options for the eligible population

The comparator treatments for the eligible population are everolimus plus exemestane and alpelisib plus fulvestrant. Elacestrant, everolimus, exemestane and alpelisib are all oral treatments and can be taken at home by patients, fulvestrant is administered as an injection in each buttock and requires about 2 minutes per injection. Therefore, when alpelisib plus fulvestrant is displaced, there is a capacity saving benefit.

For more information about the treatments, such as dose and average treatment duration, see the resource impact template. The treatment duration of elacestrant is commercial in confidence and not included in the template, the treatment durations for everolimus plus exemestane and alpelisib plus fulvestrant are based on previous appraisals TA421 and TA816 respectively.

Financial resource impact (cash items)

The company has a commercial arrangement. This makes elacestrant available to the NHS with a discount.

Users can input the confidential price of elacestrant and amend other variables in the resource impact template.

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

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

impact template.

Capacity impact

Table 2 shows the impact on capacity activity in each of the next 5 years.

Table 2 Capacity impact (activity) in England

Capacity impact	Current practice	2024 to 2025	2025 to 2026	2026 to 2027	2027 to 2028	2028 to 2029
Number of administration appointments	2,700	1,700	280	280	280	280
Number of tests for ESR1 mutation	2,200	2,300	2,300	2,300	2,300	2,300

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

Key information

Table 3 Key information

Time from publication to routine commissioning funding	90
Programme budgeting category	Cancers and Tumours, Cancer, Breast
Commissioner(s)	NHS England
Provider(s)	NHS hospital trusts
Pathway position	Second line after treatment with a CDK 4 and 6 inhibitor

About this resource impact summary report

This resource impact summary report accompanies the NICE guidance on elacestrant for treating oestrogen receptor-positive, HER2-negative advanced breast cancer with an ESR1 mutation after endocrine treatment and should be read with it. See terms and conditions on the NICE website.

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