



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 dostarlimab with platinum-based chemotherapy as an option to treat primary advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency in adults when systemic therapy is suitable.

Dostarlimab can be used if the company provides it according to the commercial arrangement.

Eligible population for dostarlimab with platinum-based chemotherapy

The eligible population was calculated by taking the incidence of endometrial cancer then the proportion with advanced or metastatic disease on diagnosis and the proportion of people with early disease who progress to advanced or metastatic disease. This was then reduced to the proportion of people with high microsatellite instability or mismatch repair deficiency to give the eligible population.

Table 1 shows the population who are eligible for dostarlimab with platinum-based chemotherapy and the number of people who are expected to have dostarlimab with platinum-based chemotherapy in each of the next 5 years.

Table 1 Population expected to be eligible for and have dostarlimab with platinum-based chemotherapy in England

Eligible population and uptake	People eligible for dostarlimab with platinum-based chemotherapy	Uptake for dostarlimab with platinum-based chemotherapy (%)	People having dostarlimab with platinum-based chemotherapy each year
Current year	580	0	0
Year 1	580	37.5	220
Year 2	580	75	440
Year 3	580	75	440
Year 4	580	75	440
Year 5	580	75	440

The uptake for dostarlimab with platinum based chemotherapy is based on clinical expert opinion.

Treatment options for the eligible population

The comparator treatment for the eligible population is carboplatin plus paclitaxel.

Both treatments options are administered via intravenous injection.

Subsequent treatment options include carboplatin plus paclitaxel (dostarlimab with platinum-based chemotherapy only), doxorubicin, pembrolizumab, pembrolizumab with lenvatinib, letrozole, medroxyprogesterone acetate, and radiotherapy.

For more information about the treatments, such as dose and average treatment duration, see the [resource impact template](#).

Financial resource impact (cash items)

The company has a [commercial arrangement](#). This makes dostarlimab available to the NHS with a discount.

Users can input the confidential price of dostarlimab 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

Dostarlimab monotherapy is taken every 6 weeks after the initial doses with carboplatin and paclitaxel, while carboplatin and paclitaxel is taken every 3 weeks throughout the treatment. Depending on the respective treatment durations of the therapies this could lead to an increase or decrease in total administrations per year.

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 2 Key information

Time from publication to routine commissioning funding	90 days
Programme budgeting category	02G Cancer, gynaecological
Commissioner(s)	NHS England
Provider(s)	NHS hospital trusts
Pathway position	First line

About this resource impact summary report

This resource impact summary report accompanies the [NICE guidance on dostarlimab with carboplatin and paclitaxel for treating primary advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency](#) and should be read with it. See [terms and conditions on the NICE website](#).

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