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.

Recommendations

Guselkumab can be used as an option for previously treated moderately to severely active Crohn's disease in adults, when:

- conventional or biological treatment:
  - has not worked (that is, the condition has not responded well enough or lost response to treatment), or
  - cannot be tolerated, and
- a tumour necrosis factor (TNF)-alpha inhibitor has not worked, cannot be tolerated or is not suitable.

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

Mirikizumab can be used as an option to treat moderately to severely active Crohn's disease in adults, only if:

- the disease has not responded well enough or stopped responding to a previous biological treatment, or
- a previous biological treatment was not tolerated, or
- tumour necrosis factor (TNF)-alpha inhibitors are not suitable.

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

Eligible population for guselkumab and mirikizumab

Table 1 shows the population who are eligible for the new treatments in each of the next 5 years.

Table 1 Population expected to be eligible for guselkumab and mirikizumab in England

Eligible population and uptake	Current practice	Year 1	Year 2	Year 3	Year 4	Year 5
People eligible for guselkumab and mirikizumab	30,800	31,100	31,300	31,600	31,900	32,200

As guselkumab and mirikizumab have both been assessed by the cost comparison route, a local template has been produced and uptake across the various treatment options for Crohn's disease has not been estimated.

Treatment options for the eligible population

The treatment options for the eligible population are risankizumab, ustekinumab, vedolizumab and upadacitinib. Risankizumab, ustekinumab, and vedolizumab are administered as an IV induction followed by subcutaneous maintenance. Vedolizumab can also be administered as IV induction followed by IV maintenance. Upadacitinib is an oral tablet in both induction and maintenance.

Guselkumab can be used as either an IV induction or a subcutaneous induction, both methods followed by subcutaneous maintenance. Mirikizumab is administered as an IV induction and subcutaneous maintenance.

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

Financial resource impact (cash items)

Eli Lilly has a commercial arrangement for mirikizumab. This makes mirikizumab available to the NHS with a discount. The size of the discount is commercial in confidence.

Janssen-Cilag has a commercial arrangement for guselkumab. This makes guselkumab

available to the NHS with a discount. The size of the discount is commercial in confidence.

Users can input the confidential prices of guselkumab and mirikizumab 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.

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).

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

Capacity impact

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	30 days
Programme budgeting category	04X, endocrine, nutritional and metabolic problems
Commissioner(s)	Integrated Care Boards
Provider(s)	NHS hospital trusts
Pathway position	When conventional or biological treatment has not worked

About this resource impact summary report

This resource impact summary report accompanies the NICE technology appraisal

guidance on mirikizumab for previously treated moderately to severely active Crohn's disease and the NICE technology appraisal guidance on guselkumab for previously treated moderately to severely active Crohn's disease and should be read with them.

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