



# 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

Enfortumab vedotin with pembrolizumab can be used, within its marketing authorisation, as an option for untreated unresectable or metastatic urothelial cancer in adults when platinum-based chemotherapy is suitable.

## Eligible population for enfortumab vedotin

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

**Table 1 Population expected to be eligible for and have enfortumab vedotin with pembrolizumab in England**

Eligible population and uptake	People eligible for enfortumab vedotin with pembrolizumab	Uptake for enfortumab vedotin with pembrolizumab (%)	People starting treatment each year	People continuing treatment from previous year	People having enfortumab vedotin with pembrolizumab each year
Current practice without enfortumab vedotin with pembrolizumab	1,299	0%	0	0	0
Year 1	1,310	55%	720	0	720
Year 2	1,322	74%	978	720	1,698
Year 3	1,33	80%	1,066	978	2,044
Year 4	1,345	80%	1,076	1,066	2,142

Eligible population and uptake	People eligible for enfortumab vedotin with pembrolizumab	Uptake for enfortumab vedotin with pembrolizumab (%)	People starting treatment each year	People continuing treatment from previous year	People having enfortumab vedotin with pembrolizumab each year
Year 5	1,357	80%	1,085	1,076	2,161

The following assumptions have been used to calculate the eligible population:

- there are an estimated 10,900 cases of bladder cancer each year of which 90% of people will have urothelial cancer and of which 1,900 people will have unresectable or metastatic urothelial cancer
- 68.45% of this group of people are estimated to be receiving first-line treatment and are therefore eligible for enfortumab vedotin with pembrolizumab.

The market share for enfortumab vedotin with pembrolizumab is based on a NICE assumption calculated using the company and NHS England submission.

## Treatment options for the eligible population

The comparator treatments for the eligible population are cisplatin with gemcitabine or cisplatin with carboplatin, followed by avelumab maintenance treatment if there is no disease progression.

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

## Financial resource impact (cash items)

The companies have [commercial arrangements](#). These make enfortumab vedotin and pembrolizumab available to the NHS with a discount.

Users can input the confidential price of both enfortumab vedotin and pembrolizumab and amend other variables in the [resource impact template](#).

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

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

impact template.

## Capacity impact

People receiving enfortumab vedotin with pembrolizumab will not receive avelumab maintenance treatment. Based on EV-302 data, the company assumed in its base case that 30% of people on platinum-based chemotherapy would have avelumab maintenance treatment. The committee concluded that the proportion of people on avelumab from EV-302 (30%) was plausible, as confirmed by Blumeteq data.

Subsequent treatment rates and number of cycles are for local input in the [resource impact template](#) because the data is marked as commercial in confidence

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	PBC 02X, Cancers and Tumours
Commissioners	NHS England
Providers	NHS hospital trusts
Pathway position	First line

## About this resource impact summary report

This resource impact summary report accompanies the [NICE technology appraisal guidance on enfortumab vedotin with pembrolizumab for treating untreated unresectable or metastatic urothelial cancer when platinum-based chemotherapy is suitable](#) and should be read with it.

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