



# 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.

## Guidance recommendations

See [NICE's recommendations on delgocitinib for treating moderate to severe chronic hand eczema](#).

## Financial and capacity resource impact

The key drivers of resource impact are that:

- there are fewer administrations of delgocitinib in each cycle than of comparator treatments
- there may be fewer follow-up attendances for monitoring associated with delgocitinib than with comparator treatments.

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

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

Delgocitinib is not classed as a high-cost drug and is assumed to be covered in tariff.

Table 1 shows the impact on capacity activity in each of the next 3 years.

**Table 1 Capacity impact (activity) in England**

Year	Number of administration appointments (outpatient follow-up appointments)	Number of administration appointments (outpatient procedures)	Total number of administration appointments
Current practice (without delgocitinib)	46,561	192,157	238,719
Year 1	50,574	161,539	212,113
Year 2	54,654	130,367	185,021
Year 3	58,802	131,513	190,315

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

## Eligible population for delgocitinib

Table 2 shows the population who are eligible for delgocitinib and the number of people who are expected to have delgocitinib in each of the next 3 years, including forecast population growth.

**Table 2 Population expected to be eligible for and have delgocitinib in England**

Eligible population and uptake	Number of people eligible for delgocitinib	Uptake for delgocitinib (%)	Number of people having delgocitinib each year
Current practice without delgocitinib	61,589	0	0
Year 1	62,130	5	3,107
Year 2	62,677	10	6,268
Year 3	63,227	15	9,484

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

- The prevalence of chronic hand eczema (CHE) in adults is estimated to be 3 million people in England. Of these, 85% are diagnosed by a healthcare professional ([Apfelbacher C et al. \[2025\]](#)).
- 30% of adults with CHE are diagnosed with moderate to severe CHE and 20% of these

are seen in secondary care (consultant dermatologist opinion).

- In 40% of adults with moderate to severe CHE, the CHE responds inadequately or there is a contraindication to topical corticosteroids ([Giménez-Arnau A et al. \[2025\]](#)).

The market share for delgocitinib is based on dermatology consultant opinion. It can be amended to reflect local practice in the [resource impact template](#).

## Treatment options for the eligible population

The comparator treatments for the eligible population are phototherapy (ultraviolet light therapy) or alitretinoin (only recommended for severe CHE).

Delgocitinib should be prescribed in secondary care by a dermatologist with experience in diagnosing and treating CHE.

Clinical experts described how phototherapy is inconvenient for most people because it involves regular visits to hospital (20 to 30 sessions). There will be a reduction in outpatient procedures if people have delgocitinib instead of phototherapy.

A high proportion of people have best supportive care because they do not want a systemic treatment with the associated monitoring and side effects or the need to attend hospital 2 to 3 times a week for 12 weeks.

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

## Key information

Table 3 Key information

Time from publication to routine commissioning funding	90 days
Programme budgeting category	14X - Problems of the Skin
Commissioner(s)	Integrated care boards
Provider(s)	NHS Hospital Trusts

Pathway position	Second line treatment when topical corticosteroids have not worked or are not suitable
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## About this resource impact summary report

This resource impact summary report accompanies the [NICE technology appraisal guidance on delgocitinib for treating moderate to severe chronic hand eczema](#) and should be read with it.

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