



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 'population and treatments' and 'unit costs' worksheets in the template to reflect local data and assumptions.

Guidance recommendations

See [NICE's recommendations on fezolinetant for treating moderate to severe vasomotor symptoms associated with menopause](#).

Financial and capacity resource impact

The key drivers of resource impact are that:

- the annual drug cost of fezolinetant is higher than comparator treatment options
- all treatment options are administered orally
- liver monitoring is needed before treatment with fezolinetant. An estimated 3 liver function tests per year are assumed and this can be amended in the resource impact template to reflect local practice
- in more complex cases, fezolinetant may require prescription or support from secondary care for additional liver monitoring.

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

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 fezolinetant

Table 1 shows the estimated eligible population for fezolinetant, and the assumptions used

to calculate the eligible population.

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

Eligibility criteria	Proportion (%)	Eligible population
Women aged between 40 to 65		9,923,630
Prevalence of vasomotor symptoms; assumed moderate to severe	21.10%	2,093,886
Proportion seeking medical intervention/advice	58.27%	1,220,107
Proportion for whom hormone replacement therapy is unsuitable	30%	366,032

The market share percentages for future practice entered in the resource impact template are for illustrative purposes only and must be amended to reflect expected local change in practice. The comparator treatments are a NICE assumption based on Glynne et al. 2025 and committee opinion.

Treatment options for the eligible population

The comparator treatments for the eligible population are paroxetine, venlafaxine and oxybutynin which are all administered orally, or no treatment.

Table 2 shows the annual cost by treatment option for the eligible population.

Table 2 Drug cost per patient by treatment option

Treatment option	Unit cost (£)	Annual drug cost
Fezolinetant	£44.80	£627.20
Paroxetine	£1.23	£17.22
Venlafaxine	£2.91	£37.83
Oxybutynin	£2.46	£34.44

For further details such as average dose and number of cycles see the [resource impact template](#).

Key information

Table 3 Key information

Time from publication to routine commissioning funding	90 days
Programme budgeting category	PBC 17X
Commissioners	Integrated care boards
Providers	Primary care and secondary care providers
Pathway position	First line

About this resource impact summary report

This resource impact summary report accompanies the [NICE technology appraisal guidance on fezolinetant for treating moderate to severe vasomotor symptoms associated with menopause](#) and should be read with it.

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