NICE National Institute for Health and Care Excellence

NICE guidance

Nogapendekin alfa inbakicept with BCG for non-muscle-invasive bladder cancer with carcinoma in situ that is unresponsive to BCG (terminated evaluation)

Technology appraisal guidance
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www.nice.org.uk/guidance/ta1163

Contents

Advice

NICE is unable to make a recommendation about the use in the NHS of nogapendekin alfa inbakicept with Bacillus Calmette-Guérin (BCG) for treating non-muscle-invasive bladder cancer with carcinoma in situ, with or without papillary tumours, that is unresponsive to BCG in adults. This is because ImmunityBio has confirmed that it does not intend to make an evidence submission for the evaluation. ImmunityBio considers that the technology is unlikely to be a cost-effective use of NHS resources.

NICE will review the position if the company decides that it wants to make an evidence submission.

What this means in practice

Nogapendekin alfa inbakicept with BCG should not be routinely commissioned in the NHS in England for the condition and population stated in this terminated evaluation.

This is because an evidence submission was not provided, so NICE is unable to evaluate whether nogapendekin alfa inbakicept with BCG offers benefit and is value for money in this population.

If NHS organisations wish to consider nogapendekin alfa inbakicept with BCG for this indication, they should follow the advice on local decision making in the NHS Constitution for England and the NHS Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012. These outline the approach that should be taken when there is no NICE guidance.

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