



# Resource impact summary report

Resource impact

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# Resource impact summary report

## Guidance recommendation(s)

See [NICE's recommendations on cemiplimab for treating recurrent or metastatic cervical cancer that has progressed on or after platinum-based chemotherapy.](#)

## Financial and capacity resource impact

The key drivers of resource impact are that:

- The treatment duration of cemiplimab is longer than comparator treatments.
- The number of administrations in each cycle is less than comparator treatments.

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

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

## Eligible population for cemiplimab

The eligible population is estimated to be around 90 people. This is based on the high proportion of people who are expected to have pembrolizumab as part of their first-line therapy and would therefore be ineligible for cemiplimab at second line. Because the population is small, we have not produced a resource impact template.

## Treatment options for the eligible population

The comparator treatments for the eligible population are single-agent chemotherapies.

Cemiplimab, paclitaxel and gemcitabine are all administered via IV infusion but paclitaxel and gemcitabine both have two administrations per cycle.

## Key information

Table 1 Key information

Time from publication to routine commissioning funding	90 days
Programme budgeting category	02G cancers and tumours, gynaecological
Commissioner	NHS England
Providers	NHS hospital trusts
Pathway position	2nd line

## About this resource impact summary report

This resource impact summary report accompanies the [NICE technology appraisal guidance on cemiplimab for treating recurrent or metastatic cervical cancer that has progressed on or after platinum-based chemotherapy](#) and should be read with it.

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