

**Addendum to Additional analysis commissioned by the
NHS R&D HTA Programme on behalf of the National
Institute for Health and Clinical Excellence**

**Ranibizumab and pegaptanib for the treatment of age-related
macular degeneration: further analysis requested by NICE in
response to consultation on ACD**

Produced by Southampton Health Technology Assessments Centre

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Reduced frequency dosage regime for ranibizumab – injection procedure costed as a day case

Predominantly classic lesions treated with ranibizumab, compared with PDT.

Effect of change in formula on base case results – zero. Result in assessment report is incremental cost of £8,998 and incremental QALYs of 0.34 (ICER = £26,102) – see Table 4.29, page 145 of the assessment report. For results with injection procedure costed as a day case and using the reduced dose frequency regime, see Table 39b below.

Table 39b: sensitivity analysis on number of injections (corrected analysis) for predominantly classic lesions treated with ranibizumab compared with PDT

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	8,998	0.34	26,102
9 injections in year 1	5,581	0.34	16,191
6.5 injections in year 1	2,734	0.34	7,932
5.6 injections in year 1	1,709	0.34	4,959
Notes: 9 was figure in Novartis submission for injections in year 1. 6.5 is based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD. 5.6 is value published in PRONTO publication (American Journal of Ophthalmology. 2007 143(4);566-583.			

Predominantly classic lesions treated with ranibizumab, compared with BSC.

Effect of change in formula on base case results – zero. Result in assessment report is incremental cost of £10,065 and incremental QALYs of 0.57 (ICER = £17,787) – see Table 4.30, page 146 of the assessment report. For results with injection procedure costed as a day case and using the reduced dose frequency regime, see Table 40b below.

Table 40b: sensitivity analysis on number of injections (corrected analysis) for predominantly classic lesions treated with ranibizumab compared with BSC

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	10,065	0.57	17,787
9 injections in year 1	6,648	0.57	11,749
6.5 injections in year 1	3,801	0.57	6,718

5.6 injections in year 1	2,776	0.57	4,906
Notes: 9 was figure in Novartis submission for injections in year 1. 6.5 is based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD. 5.6 is value published in PRONTO publication (American Journal of Ophthalmology. 2007 143(4);566-583.			

Minimally classic and occult no classic treated with ranibizumab

Effect of change in formula on base case results – zero. Result in assessment report is incremental cost of £24,246 and incremental QALYs of 0.69 (ICER = £35,157) – see Table 4.31, page 147 of the assessment report. For results with injection procedure costed as a day case and using the reduced dose frequency regime, see Table 41b below.

Table 41b: sensitivity analysis on number of injections (corrected analysis) for minimally classic and occult no classic lesions treated with ranibizumab

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	24,246	0.69	35,157
12 injections in yr 1, 9 in yr 2	21,087	0.69	30,577
9 injections in yr 1, 9 in yr 2	17,671	0.69	25,624
9 injections in yr 1, 6 in yr 2	14,513	0.69	21,043
9 injections in yr 1, 3.5 in yr 2	11,880	0.69	17,226
6.5 injections in yr 1, 3.5 in yr 2	9,034	0.69	13,099
Notes: 9 injections in year 1 and 6 in year 2 were used in Novartis submission. 6.5 in year 1 and 3.5 in year 2 are based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD.			

Reduced frequency dosage regime for ranibizumab – injection procedure costed as per Novartis

Predominantly classic lesions treated with ranibizumab, compared with PDT.

For results with injection procedure costed as a weighted average of the outpatient and day case procedure cost and using the reduced dose frequency regime, see Table 39c below.

Table 39c: sensitivity analysis on number of injections (corrected analysis) for predominantly classic lesions treated with ranibizumab compared with PDT

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	8,096	0.34	23,486
9 injections in year 1	4,905	0.34	14,229

6.5 injections in year 1	2,245	0.34	6,514
5.6 injections in year 1	1,288	0.34	3,736
Notes: 9 was figure in Novartis submission for injections in year 1. 6.5 is based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD. 5.6 is value published in PRONTO publication (American Journal of Ophthalmology. 2007 143(4);566-583.			

Predominantly classic lesions treated with ranibizumab, compared with BSC.

For results with injection procedure costed as a weighted average of the outpatient and day case procedure cost and using the reduced dose frequency regime, see Table 40c below.

Table 40c: sensitivity analysis on number of injections (corrected analysis) for predominantly classic lesions treated with ranibizumab compared with BSC

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	9,163	0.57	16,193
9 injections in year 1	5,971	0.57	10,553
6.5 injections in year 1	3,312	0.57	5,853
5.6 injections in year 1	2,355	0.57	4,162
Notes: 9 was figure in Novartis submission for injections in year 1. 6.5 is based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD. 5.6 is value published in PRONTO publication (American Journal of Ophthalmology. 2007 143(4);566-583.			

Minimally classic and occult no classic treated with ranibizumab

For results with injection procedure costed as a weighted average of the outpatient and day case procedure cost and using the reduced dose frequency regime, see Table 41c below.

Table 41c: sensitivity analysis on number of injections (corrected analysis) for minimally classic and occult no classic lesions treated with ranibizumab

Strategy	Incremental cost (£)	Incremental QALYs	ICER (£)
Base case	22,512	0.69	32,642
12 injections in yr 1, 9 in yr 2	19,561	0.69	28,364
9 injections in yr 1, 9 in yr 2	16,370	0.69	23,737
9 injections in yr 1, 6 in yr 2	13,420	0.69	19,459
9 injections in yr 1, 3.5 in yr 2	10,961	0.69	15,893
6.5 injections in yr 1, 3.5 in yr 2	8,302	0.69	12,038
Notes:			

9 injections in year 1 and 6 in year 2 were used in Novartis submission. 6.5 in year 1 and 3.5 in year 2 are based on two year average from the PRONTO study combined with survey of ophthalmologists opinion reported in responses to consultation on ACD.