Ranibizumab and pegaptanib for wet age-related macular degeneration

This leaflet is about when ranibizumab and pegaptanib should be used to treat people with wet age-related macular degeneration (AMD) in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people with wet AMD but it may also be useful for their families or carers or anyone with an interest in the condition.

It does not describe wet AMD or the treatments in detail – a member of your healthcare team should discuss these with you. Some sources of further information and support are on the back page.
These may not be the only possible treatments for wet AMD. Your healthcare team should talk to you about whether they are suitable for you and about other treatment options available.

What has NICE said?

**Ranibizumab** is recommended as a possible treatment for people with wet AMD if all the following apply to their eye.

- The best possible visual acuity after correction with glasses or contact lenses is between 6/12 and 6/96.
- There is no permanent damage to the fovea (the part of the eye that helps people to see things in sharp detail).
- The area affected by AMD is no larger than 12 times the size of the area inside the eye where the optic nerve connects to the retina.
- There are signs that the condition has been getting worse.

Treatment should be stopped if a person’s vision gets worse and there are changes inside the eye which show that treatment isn’t working.

The NHS should cover the drug cost of ranibizumab for the first 14 injections in each eye being treated. If people need more than 14 injections per eye, the manufacturer of ranibizumab has agreed to take over the drug cost from the NHS.

**Pegaptanib** is not recommended for people with wet AMD.

Healthcare professionals should not immediately stop prescribing pegaptanib for people who were already taking it when the guidance was issued. These people should be able to carry on taking pegaptanib until they and their healthcare professionals decide that it is the right time to stop treatment.

Age-related macular degeneration

Macular degeneration affects the eye. Because it is usually seen in older people it is also known as ‘age-related macular degeneration’ (AMD).

There are two types of AMD – ‘dry’ and ‘wet’. In both types of AMD part of the back of the eye, called the macula, is damaged. The fovea, in the centre of the macula, provides the sharpest vision. Damage to the macula causes a loss of vision, in particular the ability to see straight ahead and to see things in detail. The wet form of AMD is caused by bleeding at the back of the eye and the loss of vision can be quicker than the dry form.

Healthcare professionals use a visual acuity score to work out how AMD is affecting a person’s vision. Visual acuity measures the clarity and detail that a person is able to see.
Ranibizumab and pegaptanib

Ranibizumab and pegaptanib both work by blocking a substance that causes new blood vessels to grow in the eye (known as vascular endothelial growth factor or VEGF). These medicines stop the bleeding at the back of the eye which causes the wet form of AMD.

Ranibizumab and pegaptanib are given by injection into the eye.

What does this mean for me?

When NICE recommends a treatment, the NHS must ensure it is available to those people it could help, normally within 3 months of the guidance being issued. So, if you have wet AMD, and your doctor thinks that ranibizumab is the right treatment for you, you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you appear to be eligible for the treatment but it is not available.

NICE looks at how well treatments work and also at how well they work in relation to how much they cost the NHS.

There was evidence that pegaptanib would not represent value for money for the NHS. This means that for the time being pegaptanib should not be prescribed routinely on the NHS. Your doctor should talk to you about other treatment options available to you.

If you are already taking pegaptanib for wet AMD, you should be able to continue taking it until you and your specialist decide it is the right time to stop.
More information

The organisations below can provide more information and support for people with wet AMD. Please note that NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- Macular Disease Society, 0845 241 2041
  www.maculardisease.org
- Royal National Institute of Blind People, 0845 766 9999
  www.rnib.org.uk

NHS Direct online (www.nhsdirect.nhs.uk) may be a good starting point for finding out more. Your local Patient Advice and Liaison Service (PALS) may also be able to give you further advice and support.

About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating different medical conditions. The guidance is written by independent experts including healthcare professionals and people representing patients and carers. They consider all the research on the disease or treatment, talk to people affected by it, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This leaflet and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/TA155

You can order printed copies of this leaflet from NICE publications (phone 0845 003 7783 or email publications@nice.org.uk and quote reference N1665 for the standard print version and N1666 for the large print version).

NICE has also produced an audio version of this leaflet. This is available at www.nice.org.uk/TA155

We encourage NHS and voluntary sector organisations to use text from this leaflet in their own information about wet AMD.