Comments from the British Association of Dermatologists

i) Do you consider that all of the relevant evidence has been taken into account?
   Yes

ii) Do you consider that the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence, and that the preliminary views on the resource impact and implications for the NHS are appropriate?
    Yes, however we are concerned that the emphasis is on cost effectiveness and there is little comment on relative safety evidence. Because of the much wider clinical experience with the anti-TNF alpha agents in both Rheumatology and Dermatology, there are a lot more long term safety data. Perhaps the relative quantity of longer term safety data ought to attract heavier weighting for a drug which has a biological effect which lasts so long.

iii) Do you consider that the provisional recommendations of the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance to the NHS?
     Yes

iv) Are there any equality related issues that need special consideration that are not covered in the ACD?
    No

- Because of the lack of longterm safety data it would be useful to state that it should be mandatory that all patients commenced on the drug are entered onto the BADBIR register. This is the BAD Biologics register which is already established and being used to monitor patients on the other biologic agents for psoriasis.

- We fully support the planned MTA

- We have no comments on the executable model