

Following the release of the 2nd ACD for Dronedarone I would like to submit the following response.

- Has all of the relevant evidence been taken into account?

Yes, in my opinion the committee did review all of the available evidence and were able to hear informed opinion from and ask questions of the invited 'expert' panel. I am delighted that in light of this the committee has been able to reach the decision to recommend approval of dronedarone for use in suitable AF patients.

- Are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence?

I believe so.

- Are the provisional recommendations sound and a suitable basis for guidance to the NHS?

I believe that in recommending approval of dronedarone in certain categories of AF patients NICE will enable arrhythmia physicians to offer a new option where none is currently available and offer patients respite from symptomatic AF and a return to a much improved quality of life.

- Are there any aspects of the recommendations that need particular consideration to ensure we avoid unlawful discrimination against any group of people on the grounds of gender, race, disability, age, sexual orientation, religion or belief?

None to my knowledge.

I would like to thank Professor Clark and all members of Committee D for their care in reviewing the evidence, listening to invited 'expert' panel and in ensuring the high number of responses received following the first ACD for dronedarone were considered.

Very kind regards

████████

████████