Abbott’s response to the Appraisal Consultation Document (ACD) of adalimumab, etanercept and infliximab for psoriatic arthritis

Abbott welcomes the opportunity to comment on the Appraisal Consultation Document (ACD) for the appraisal of adalimumab, etanercept and infliximab for the treatment of psoriatic arthritis. Abbott’s comments are set out under section headings containing the questions NICE asks consultees to comment on for the ACD.

1. Has all of the relevant evidence been taken into account?

Abbott is not aware of any relevant evidence that has not been taken into account when the Committee was making its preliminary recommendations.

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

Abbott considers that the summaries of clinical and cost-effectiveness are mostly reasonable interpretations of the evidence, however Abbott considers that the evidence supports that adalimumab and infliximab are more effective at treating the skin component of the disease than etanercept. This is in accordance with the conclusions of Heiberg et al1. “Although no head to head comparisons have been performed between the different TNF-blocking agents, similar magnitude of clinical response has been observed across trials with the different agents with respect to joint symptoms, whereas improvements in skin manifestations seem to be somewhat greater with the monoclonal antibodies.” This is also supported by the lower levels of PASI response estimated for etanercept compared to adalimumab and infliximab in indirect comparisons conducted for NICE appraisals in patients with plaque psoriasis2,3.

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

Abbott considers that the provisional recommendations are sound and constitute a suitable basis for the preparation of guidance to the NHS.

4. 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 that Abbott is aware of.

References