

Omalizumab for the treatment of severe persistent allergic asthma in children aged 6 and over and adults (review of TA133 and TA201)

The United Kingdom Clinical Pharmacy Association (UKCPA) welcomes this MTA, and supports the review process for its use in children aged 6 and over and adults.

Omalizumab is the first anti-IgE medication licensed for use in severe persistent allergic asthma. Since its introduction and approval for use by NICE, it has transformed the lives of many patients who were on optimised standard asthma therapy but who continued to have uncontrolled disease. Prior to its introduction, these patients would have otherwise had very few options, if any at all. However, in a resource limited NHS, the use of this effective but expensive therapy should only be made available in a clinical and cost effective manner.

Based on the current evidence available, the UKCPA would like to endorse the use of this medicine and be given a positive NICE recommendation in the following instances:

- Patients should be assessed by a respiratory specialist, in a respiratory specialist centre, prior to initiating omalizumab
- Sufficient efforts should be made to ensure that patients are adherent to current asthma therapy and that a minimum of two sources of information are reviewed as part of a pre-omalizumab assessment where possible:
 - These may include asking the patient, checking prescription issue data from the GP and an adherence assessment by a pharmacist
- For use in a clearly defined group of patients who continue to suffer from severe exacerbations requiring treatment and/or admission(s) despite optimised standard asthma therapy
- Use should not only be restricted to patients who have had 2 or more admissions into hospital over the course of a year. In line with the Scottish Medicines Committee guidance, this should also be made available to patients who are on maintenance oral corticosteroid therapy (for 3 months or more) or those who have had 4 or more acute courses of oral corticosteroids over the past year
- To ensure the cost-effective use of this therapy and that the appropriate patients receive this, following the 16 week review, repeat assessments should be made at 6 monthly intervals to ensure that the patient has continued to receive benefits from this medicine and other asthma treatments are reviewed.

This submission is endorsed by the Royal Pharmaceutical Society, the professional body for pharmacy (www.rpharms.com).