

Putting NICE guidance into practice

Resource impact report: Atezolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum containing chemotherapy (TA525)

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Summary

NICE has recommended atezolizumab as an option for treating locally advanced or metastatic urothelial carcinoma after platinum containing chemotherapy.

We estimate that:

- around 800 people with locally advanced or metastatic urothelial carcinoma are eligible for treatment with atezolizumab.
- around 360 people will have atezolizumab from year 2019/20 onwards once uptake has reached 45% as shown in table 1.

Table 1 Estimated number of people in England having atezolizumab

	2018/19	2019/20	2020/21	2021/22	2022/23
Population having atezolizumab each year	210	360	360	360	360

This report is supported by a local resource impact template because the list price of atezolizumab has a discount that is commercial in confidence. The discounted price of atezolizumab can be put into the template and other variables may be amended.

This technology is commissioned by NHS England. Providers are NHS hospital trusts.

1 Atezolizumab

1.1 NICE has [recommended atezolizumab as an option for treating locally advanced or metastatic urothelial carcinoma in adults who have had platinum containing chemotherapy](#). Treatment is recommended only if:

- atezolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses, and
- the company provides atezolizumab with the discount agreed in the patient access scheme.

1.2 Currently, pembrolizumab [NICE TA519] is recommended as a treatment option for this indication for use within the Cancer Drugs Fund (CDF). Atezolizumab is recommended as a further treatment option. In future practice, we have assumed an equal market share between these two options.

1.3 Atezolizumab is estimated to have a significant resource impact in in routine care. The resource impact of pembrolizumab is funded by the CDF budget.

2 Resource impact of the guidance

2.1 We estimate that:

- around 800 people with locally advanced or metastatic urothelial carcinoma are eligible for treatment with atezolizumab each year.
- around 360 people will have atezolizumab from year 2019/20 onwards once uptake has reached 45%.

2.2 The current treatment and future uptake figure assumptions are based on clinical expert opinion and are shown in the resource impact template.

2.3 Table 2 shows the number of people in England who are estimated to have atezolizumab by financial year.

Table 2 Estimated number of people having atezolizumab using NICE assumptions

	2018/19	2019/20	2020/21	2021/22	2022/23
Population having atezolizumab each year	210	360	360	360	360

2.4 This report is supported by a local resource impact template. Atezolizumab has a patient access scheme, agreed between the Department of Health and Social Care and Roche, which makes it available with a commercial in confidence discount to the list price. The discounted price of atezolizumab can be put into the template and other variables may be amended. For enquiries about the patient access scheme contact global.pas@roche.com.

3 Implications for commissioners

3.1 This technology is commissioned by NHS England. Providers are NHS hospital trusts.

3.2 Because atezolizumab has been available through the early access to medicines scheme, NHS England and commissioning groups have agreed to provide funding to implement this guidance 30 days after publication.

3.3 Atezolizumab falls within the programme budgeting category 2H 'Cancers and Tumours – Urological'.

4 How we estimated the resource impact

The population

4.1 In 2016 around 9,900 cases of bladder cancer were recorded in England [Office for National Statistics](#) (2018). Urothelial cancer

accounts for around 90% of bladder cancer cases in England with around a quarter of people presenting with locally advanced or metastatic disease (stage IV) at the time of diagnosis.

4.2 Table 3 shows the number of people eligible for treatment with atezolizumab.

Table 3 Number of people eligible for treatment in England

Population	Proportion of previous row (%)	Number of people
Adult population		43,482,790
Incidence of bladder cancer ¹	0.02	9,900
People who have urothelial cancer ²	90	8,900
People who have stage IV (locally advanced or metastatic) disease ³	26	2,300
People who have received platinum-containing chemotherapy as first-line treatment ⁴	58	1,300
People who go on to receive a second-line treatment ⁴	60	800
Total number of people eligible for treatment with atezolizumab		800
Total number of people estimated to have atezolizumab each year from year 2019/20	45	360
¹ Cancer registration statistics, England 2016 ² Types Bladder cancer Cancer Research UK ³ Bladder cancer statistics Cancer Research UK ⁴ Mid-point of 41% (see below) and 80% used per previous topic and NHSE estimate. Gupta S, Gill D et al (2017) Systemic immunotherapy for urothelial cancer. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5332938/		

Assumptions

4.3 The resource impact template assumes that:

- Currently people receive docetaxel monotherapy, paclitaxel monotherapy or best supportive care after a first-line platinum containing chemotherapy.

- The proportion of people who currently receive docetaxel monotherapy is 55%, the proportion receiving paclitaxel monotherapy is 35% and people receiving best supportive care is 10%.
- Future uptake of atezolizumab is estimated to be 45%.
- An equal market share of 45% is assumed for pembrolizumab [TA519] which has recently been recommended for use within the CDF.
- Future uptake of docetaxel and paclitaxel are assumed be nil for each therapy and best supportive care is assumed to be 10%.
- The average time a person receives treatment is around 6 months, this is equal to approximately 9 cycles.

Other factors

- 4.4 The local resource impact template uses the average number of cycles of atezolizumab given. This covers a period which is less than a year.

About this resource impact report

This resource impact report accompanies the NICE guidance on [Atezolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum containing chemotherapy](#) and should be read with it.

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