



Resource impact statement

Resource impact

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NICE has recommended [crizanlizumab](#) as an option for preventing recurrent sickle cell crises in people aged 16 or over with sickle cell disease only if the conditions in the managed access agreement are followed.

Crizanlizumab will be available to the NHS in line with the [managed access agreement](#) with NHS England. As part of this, NHS England and Novartis have a commercial access agreement that makes crizanlizumab available to the NHS at a reduced cost. The financial terms of the agreement are commercial in confidence. The managed access agreement includes the collection of more data to address uncertainties in the evidence.

It is estimated that between 300 and 500 people per year with sickle cell disease are expected to choose crizanlizumab through the managed access agreement. The NICE guidance, however, does not restrict use from the licence, therefore all patients covered by the marketing authorisation for crizanlizumab are eligible for treatment within the NICE guidance.

When NICE recommends a treatment as an option for use within a managed access agreement, NHS England will make it available according to the conditions in the managed access agreement. This means that, if a patient has sickle cell disease with recurrent sickle cell crises and the doctor responsible for their care thinks that crizanlizumab is the right treatment, it should be available for use, in line with NICE's recommendations and the criteria in the managed access agreement.

The guidance will be reviewed when the primary analysis from the STAND trial is available (clinical study report expected December 2025). After this, NICE will decide whether or not to recommend it for standard use in the NHS and update the guidance.

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