



## Resource impact statement

Resource impact

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## No significant resource impact is anticipated

NICE has recommended venetoclax with low dose cytarabine as an option for untreated acute myeloid leukaemia in adults when intensive chemotherapy is unsuitable, only if:

- they have over 30% bone marrow blasts
- the company provides venetoclax according to the commercial arrangement.

This is not intended to affect treatment with venetoclax with low dose cytarabine that was started in the NHS before this guidance was published. People having treatment outside this recommendation may continue without change to the funding arrangements in place for them before this guidance was published, until they and their NHS clinician consider it appropriate to stop.

We do not expect this guidance to have a significant impact on resources; that is, the resource impact of implementing the recommendations in England will be less than £5 million per year (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million people).

This is because venetoclax with low dose cytarabine is a further treatment option available at a similar price to the current treatment options and the population size is small.

A resource impact template is provided for completion at a local level. The <u>resource impact</u> template for TA765 has been updated and been replaced to include venetoclax with low dose cytarabine and includes all other treatment options for untreated acute myeloid leukaemia in adults when intensive chemotherapy is unsuitable.

Venetoclax has a discount that is commercial in confidence. For enquiries about the patient access scheme contact <a href="mailto:pricing@abbvie.com">pricing@abbvie.com</a>.

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