

Comment on the Appraisal Consultation Document for the NICE Single Technology Appraisal

Golimumab for the treatment of psoriatic arthritis

The Royal College of Pathologists understands that NICE has not recommended golimumab or the treatment of active and progressive psoriatic arthritis in adults when the response to previous disease-modifying anti-rheumatic drug therapy has been inadequate.

NICE has recommended adalimumab, etanercept and infliximab for the treatment of psoriatic arthritis when the psoriatic arthritis has not responded to adequate trials of at least two standard DMARDs

Although all anti TNF drugs act on TNF cytokine pathway, the exact mechanisms of the actions of various anti TNF agents are not identical hence, not recommending golimumab from the armoury for the treatment of psoriatic arthritis, reduces the chance of identifying a subgroup of patients who might benefit from this.

It is known that the route and frequency of golimumab administration is beneficial for some patients compared to some other anti TNF agents. This disadvantages some patients who are significantly disabled from the disease, if Golimumab is not recommended.

In the first instance, the Royal College of Pathologists would request NICE to recommend golimumab in patients with psoriatic arthritis who have not responded to DMARD and two anti-TNF agents.

NICE should recommend further head to head trials with established anti TNF agents with golimumab and maintain a register for adverse reactions.

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(Representing the Royal College of Pathologists)