

Dear NICE

Thank you for your e-mail dated 22 September 2011 (below, for reference).

I have received comments from colleagues in the Department of Health, as follows:

"We have seen Asthma UK's submission and believe that this supports the continued use of omalizumab in the very small group of patients who have severe persistent allergic asthma.

Thankfully many with asthma have only mild disease. A further group have moderately troublesome disease requiring often expensive medication, but when this is offered with careful attention to convenient follow up, true shared decision making and appropriate self management support, are capable of being well controlled. A smaller percentage have difficult asthma and for these, very specialised protocolised approaches, often in tertiary centres, will be needed. A small number of these patients, after careful evaluation, are likely to benefit from omalizumab. A larger number, as a result of being assessed properly for its use, will have other successful managements instituted. Our impression is that the product has been used responsibly by the clinical profession to date, largely for those patients deemed suitable by NICE. It is clear that it has brought life changing benefits to the small number of suitable patients in whom other treatment options have been exhausted.

We welcome the opportunity this appraisal review provides to review the growing body of evidence for omalizumab, and particularly to reconsider the evidence in children between 6 and 11 years of age, who are currently not able to be prescribed omalizumab.

We would also like to point out that in an environment where more care is to be delivered as close to home as possible and using integrated care models, that stipulating a certain number of hospital attendances or admissions must have taken place as a condition for prescribing, may be increasingly irrelevant and potentially unhelpful as a criterion. Reducing hospital admissions in people with long term conditions and specifically in people under 19 with asthma are national indicators from the Outcomes Framework, and should such a pre-requisite continue to exist, this may encourage more people to attend hospital in order to be eligible for omalizumab".

Many thanks and best wishes

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Department of Health