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| rechnology appraisal (TA) Titles are hyperlinks to full guidance | Date of TA Release | Availability of medicine for NHS patients with this medical condition, as indicated by NICE | Yes | N/A | Date of local decision | Time to implement (davs) | Notes (e.g. Additional stipulations, rationale, method of making available) |
| Crizotinib for untreated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer [TA406] | 28/09/2016 | Crizotinib is recommended as an option for untreated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer in adults. | | х | | | The drug is recommended only if the company provides it with the discount agreed in the PAS. |
| Secukinumab for active ankylosing spondylitis after treatment with non-steroidal anti-inflammatory drugs or TNF-alpha inhibitors [TA407] | 28/09/2016 | Secukinumab is recommended as an option for treating active ankylosing spondylitis in adults whose disease has responded inadequately to conventional therapy (non-steroidal anti-inflammatory drugs or TNF-alpha inhibitors) | | Х | | | The drug is recommended only if the company provides it with the discount agreed in the PAS. Assess the response to secukinumab after 16 weeks of treatment and only continue if there is clear evidence of response, defined as: a reduction in the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) score to 50% of the pre-treatment value or by ≥2 units and a reduction in the spinal pain visual analogue scale (VAS) by ≥2 cm. When using BASDAI and spinal pain VAS scores, healthcare professionals should take into account any physical, sensory or learning disabilities, or communication |
| Pegaspargase for treating acute lymphoblastic leukaemia [TA408] | 28/09/2016 | Pegaspargase, as part of antineoplastic combination therapy, is recommended as an option for treating acute lymphoblastic leukaemia in children, young people and adults | | х | | | only when they have untreated newly diagnosed disease. |
| Talimogene laherparepvec for treating unresectable metastatic melanoma [TA410] | 28/09/2016 | Talimogene laherparepvec is recommended, in adults, as an option for treating unresectable, regionally or distantly metastatic (Stage IIIB, IIIC or IVM1a) melanoma that has not spread to bone, brain, lung or other internal organs | | х | | | only if: •treatment with systemically administered immunotherapies is not suitable and •the company provides talimogene laherparepvec with the discount agreed in the PAS. |
| Necitumumab for untreated advanced or metastatic squamous non-small-cell lung cancer [TA411] | 28/09/2016 | Necitumumab, in combination with gemcitabine and cisplatin, is <u>not</u> recommended for adults with locally advanced or metastatic epidermal growth factor receptor (EGFR)-expressing squamous non-small-cell lung cancer that has not been treated with chemotherapy | | х | | | |
| Radium-223 dichloride for treating hormone-relapsed prostate cancer with bone metastases [TA412] | 28/09/2016 | Radium-223 dichloride is recommended as an option for treating hormone-relapsed prostate cancer, symptomatic bone metastases and no known visceral metastases in adults | | Х | | | only if: •they have already had docetaxel or •docetaxel is contraindicated or is not suitable for them. The drug is only recommended if the company provides radium=223 dichloride with the discount agreed in the BAS |
| Cabazitaxel for hormone-relapsed metastatic prostate cancer treated with docetaxel [TA391] | 24/08/2016 | Cabazitaxel in combination with prednisone or prednisolone is recommended as an option for treating metastatic hormone-relapsed prostate cancer in people whose disease has progressed during or after docetaxel chemotherapy | | x | | | only if: • the person has an eastern cooperative oncology group (ECOG) performance status of 0 or 1 • the person has had ≥ 225mg/m2 docetaxel • treatment with cabazitaxel is stopped when the disease progresses or after a maximum of 10 cycles (whichever happens first). In addition, cabazitaxel is recommended only if the company provides it with the discount in the PAS agreed with the Dept of Health, and NHS trusts purchase cabazitaxel in accordance with the commercial access agreement between the company and NHS England, either in pre-prepared intravenous infusion bags, or in vials, at a reduced price that includes a further discount reflecting the average cost of waste per patient When using ECOG performance status, healthcare professionals should take into account any physical, sensory or learning disabilities, or communication difficultie that could affect ECOG performance status and make any adjustments they consider appropriate. [N.B. this guidance has been re-issued (previously published May 2016) after a change to the commercial arrangements so that NHS trusts also have the option of |
| Bosutinib for previously treated chronic myeloid leukaemia_ [TA401] | 24/08/2016 | Bosutinib is recommended as an option for chronic, accelerated and blast phase Philadelphia chromosome positive chronic myeloid leukaemia in adults | | х | | | when: • they have previously had ≥ 1 tyrosine kinase inhibitor, and • imatinib, nilotinib and dasatinib are not appropriate, and • the company provides hostitipib with the discount agreed in the PAS (as revised in 2016). |
| Pemetrexed maintenance treatment for non-squamous non-small- cell lung cancer after pemetrexed and cisplatin [TA402] | 24/08/2016 | Pemetrexed is recommended as an option for the maintenance treatment of locally advanced or metastatic non-squamous non-small-cell lung cancer in adults. | | х | | | when: • their disease has not progressed immediately after 4 cycles of pemetrexed and cisplatin induction therapy • their Eastern Cooperative Oncology Group (ECOG) performance status is 0 or 1 at the start of maintenance treatment and, • the company provides the drug according to the terms of the commercial access agreement as agreed with NHS England (N.B. any enquiries from NHS organisations about the commercial access agreement should be directed to productsupply@lilly.com). When using ECOG performance status, healthcare professionals should take into account any physical, sensory or learning disabilities, or communication difficulties. |
| Ramucirumab for previously treated locally advanced or metastatic non-small-cell lung cancer [TA403] | 24/08/2016 | Ramucirumab, in combination with docetaxel, is not recommended for treating locally advanced or metastatic non-small-cell lung cancer in adults whose disease has progressed after platinum-based chemotherapy. | | х | | | |
| Degarelix for treating advanced hormone-dependent prostate cancer [TA404] | 24/08/2016 | Degarelix is recommended as an option for treating advanced hormone-dependent prostate cancer in people with spinal metastases | | х | | | Only if the commissioner can achieve at least the same discounted drug cost as that available to the NHS in June 2016 |
| Trifluridine-tipiracil for previously treated metastatic colorectal cancer [TA405] | 24/08/2016 | Trifluridine-tipiracil is recommended as an option for treating metastatic colorectal cancer | | х | | | •in adults who have had previous treatment with available therapies including fluoropyrimidine-, oxaliplatin- or irinotecan-based chemotherapies, anti-vascular endothelial growth factor (VEGF) agents and anti-epidermal growth factor receptor (EGFR) agents, or when these therapies are not suitable, and •only when the company provides trifluridine-tipiracil with the discount agreed in the PAS. |
| Abiraterone for castration-resistant metastatic prostate cancer previously treated with a docetaxel-containing regimen [TA259] | 27/07/2016 | Abiraterone in combination with prednisone or prednisolone is recommended as an option for the treatment of castration - resistant metastatic prostate cancer in adults. | | х | | | Only if: -their disease has progressed on or after one docetaxel-containing chemotherapy regimen, and -the manufacturer provides abiraterone in accordance with the commercial access arrangement as agreed with NHS England [N.B. This guidance has been re-issued (previously published July 2012) after a change to the commercial arrangements in July 2016. The details of this commercial access arrangement are confidential. It is the responsibility of the company to communicate the details of the commercial access arrangement with the relevant NHS organisations. Any enquiries from NHS organisations about the commercial access arrangement should be directed to Janssen's customer services] |
| Abiraterone for treating metastatic hormone-relapsed prostate- cancer before chemotherapy is indicated [TA387] | 27/07/2016 | Abiraterone in combination with prednisone or prednisolone is recommended as an option for treating metastatic hormone-relapsed prostate cancer. | | Х | | | in people who have no or mild symptoms after androgen deprivation therapy has failed, and before chemotherapy is indicated only when the company provides abiraterone in accordance with the commercial access arrangement as agreed with NHS England (IN.8. This guidance has been re-issued (previously published April 2016) after a change to the commercial arrangements in July 2016. The details of this commercial access arrangement are confidential. It is the responsibility of the company to communicate the details of the commercial access arrangement with the relevant NHS organisations. Any enquiries from NHS organisations about the commercial access arrangement should be directed to Janssen's customer services] |
| Lumacaftor–ivacaftor for treating cystic fibrosis homozygous for the F508del mutation [TA398] | 27/07/2016 | Lumacaftor—ivacaftor is not recommended for treating cystic fibrosis in people 12 years and older who are homozygous for the F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene. | Х | | 15/09/2016 | 50 | |
| Azacitidine for treating acute myeloid leukaemia with more than 30% bone marrow blasts [TA399] | 27/07/2016 | Azacitidine is not recommended for treating acute myeloid leukaemia with more than 30% bone marrow blasts in people of 65 years or older who are not eligible for haematopoietic stem cell transolant. | | X | | | |
| Nivolumab in combination with ipilimumab for treating advanced melanoma [TA400] | 27/07/2016 | Nivolumab in combination with ipilimumab is recommended as an option for treating advanced (unresectable or metastatic) melanoma. | | X | | | Only when the company provides ipilimumab with the discount agreed in the PAS. |
| Adalimumab for treating moderate to severe hidradenitis_ suppurativa [TA392] | 22/06/2016 | Adalimumab is recommended as an option for treating active moderate to severe hidradenitis suppurativa in adults whose disease has not responded to conventional systemic therapy. | | х | | | Only if the company provides it at the price agreed in the PAS. Assess the response to adalimumab after 12 weeks of treatment, and only continue if there is clear evidence of response, defined as: • a reduction of 25% or more in the total abscess and inflammatory nodule count and • no increase in abscesses and draining fistulas. |
| Alirocumab for treating primary hypercholesterolaemia and mixed dyslipidaemia [TA393] | 22/06/2016 | Alirocumab is recommended as an option for treating primary hypercholesterolaemia or mixed dyslipidaemia. | х | | 15/09/2016 | 85 | Only if: • Low density lipoprotein concentrations are persistently above the thresholds specified in the guidance despite maximal tolerated lipid lowering therapy (that is, either the maximum dose has been reached or further titration is limited by intolerance, as defined in NICE's guideline on familial hypercholesterolaemia). • The company provides alirocumab with the discount agreed in the PAS. |
| Evolocumab for treating primary hypercholesterolaemia and | 22/06/2016 | Evolocumab is recommended as an option for treating primary hypercholesterolaemia or | Х | | 15/09/2016 | 85 | Only if |
| mixed dyslipidaemia [TA394] Ceritinib for previously treated anaplastic lymphoma kinase positive non-small-cell lung cancer [TA395] | 22/06/2016 | Inixed dvslipidaemia. Certithib is recommended as an option for treating advanced anaplastic lymphoma kinase positive non-small-cell lung cancer in adults who have previously had crizotinib. | | х | | | the dosage is 140 mg every 2 weeks Only if the company provides it with the discount agreed in the PAS. |
| Trametinib in combination with dabrafenib for treating unresectable or metastatic melanoma [TA396] | 22/06/2016 | Trametinib in combination with dabrafenib is recommended as an option for treating unresectable or metastatic melanoma in adults with a BRAF V600 mutation | | Х | | | Only when the company provides trametinib and dabrafenib with the discounts agreed in the PAS's. |
| Belimumab for treating active autoantibody-positive systemic lupus erythematosus [TA397] | 22/06/2016 | Belimumab is recommended as an option as add-on treatment for active autoantibody- positive systemic lupus erythematosus in adults | | х | | | Only if all of the following apply: • there is evidence for serological disease activity (defined as positive anti-double-stranded DNA and low complement) and a Safety of Estrogen in Lupus National Assessment — Systemic Lupus Erythematosus Disease Activity Index (SELENA-SLEDAI) score of greater than or equal to 10 despite standard treatment. • treatment with belimumab is continued beyond 24 weeks only if the SELENA-SLEDAI score has improved by 4 points or more. • the company provides belimumab with the discount agreed in the PAS. • the conditions for data collection, monitoring, patient eligibility and consent, ongoing treatment, cost to the NHS, and review by NICE laid out in the guidance are met |