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PAN MERSEY AREA PRESCRIBING COMMITTEE
PRESCRIBING POLICY STATEMENT
REF: PS114 FINAL
APC BOARD DATE: 29 JUL 2015



Pan Mersey
Area Prescribing Committee

SECUKINUMAB solution for subcutaneous injection (Cosentyx[®] ▼) for Plaque Psoriasis

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The Pan Mersey Area Prescribing Committee recommends
SECUKINUMAB solution for subcutaneous injection
(Cosentyx[®] ▼) for adults with plaque psoriasis only in
accordance with [NICE TA350](#)

Initiation criteria¹

Secukinumab is recommended, within its marketing authorisation, as an option for treating adults with plaque psoriasis only when:

- the disease is severe, as defined by a total Psoriasis Area Severity Index (PASI) of 10 or more **and** a Dermatology Life Quality Index (DLQI)* of more than 10
- the disease has failed to respond to standard systemic therapies, for example, ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet radiation), or these treatments are contraindicated or the person cannot tolerate them
- the company provides secukinumab with the discount agreed in the patient access scheme.

Continuation criteria¹

Secukinumab should be stopped in people whose psoriasis has not responded adequately at 12 weeks. Further treatment cycles are not recommended in these people. An adequate response is defined as **either**:

- a 75% reduction in PASI score from when treatment started (PASI 75) **OR**
- a 50% reduction in the PASI score (PASI 50) and a 5-point reduction in DLQI from when treatment started.

*When using the DLQI, healthcare professionals should take into account any physical, sensory or learning disabilities, or communication difficulties, that could affect the responses to the DLQI and make any adjustments they consider appropriate.

Note: Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. If appropriate an exceptional funding request will be required following the usual locally defined process.

SECUKINUMAB (Cosentyx® ▼) for plaque psoriasis

The NICE costing template² estimates that 7 patients per 100,000 population will be eligible for treatment with secukinumab at an additional cost of £35,837 per annum (based on NHS list price).

The following assumptions have been made in the NICE costing template³:

- The prevalence of psoriasis is 1.75% of the adult population of England
- Of these people, 2.55% would be eligible for biological treatments
- Expert clinical opinion is that an uptake for secukinumab of 20% is reasonable.
- People move between biological treatments when the treatment that they are on is no longer clinically effective.
- The cost impact is measured using the maintenance dose for treatments that have an initial and a maintenance dose.
- Costs of monitoring have not been included because they will be the same for all treatments.

The company has agreed a patient access scheme for secukinumab with the Department of Health. This scheme provides a simple discount to the list price of secukinumab, with the discount applied at the point of purchase or invoice. The level of the discount is commercial in confidence. There may be savings from using secukinumab, depending on the mix of treatments replaced. Secukinumab is administered subcutaneously, so if there is a movement from treatments that are infused there may be savings in the cost of administration.³

Cost of relevant comparators:

Drug	Dose regimen	Cost per year (£) ex VAT (NHS list price)
Secukinumab	300mg SC at weeks 0, 1, 2, 3, and 4, monthly thereafter [§]	First year: 19,500 Subsequent years: 14,625
Infliximab [#]	5mg/kg IV at weeks 0, 2 and 6 weeks, then every 8 weeks [§]	First year: 12,088-13,424 Subsequent years: 9,066
Etanercept	2mg SC twice weekly; or 50mg SC weekly* [§]	9,295
Ustekinumab	45mg (or 90mg**) SC at weeks 0 and 4 then every 12 weeks [§]	First year: 12,882 Subsequent years: 8,588
Adalimumab	80mg SC, then 40mg alternate weeks [§]	First year: 9,860 Subsequent years: 9,156

Doses are for general comparison and do not imply therapeutic equivalence. Costs are from MIMS June 2015 and based on a bodyweight of 70kg.

[§] Costs are based on one year of treatment but this will be shorter if there is no response.

* If necessary, etanercept 50mg SC twice weekly may be given for 12 weeks then 25mg twice weekly or 50mg weekly.

[#] Costs for infliximab reflect the range of list prices for the reference product and biosimilar products.

** Ustekinumab 90mg given if body weight >100kg.

References:

1. National Institute for Health and Care Excellence. Secukinumab for treating moderate to severe plaque psoriasis. [NICE Technology Appraisal Guidance 350](#), July 2015. Accessed 22/07/15.
2. National Institute for Health and Care Excellence. Costing template: Secukinumab for treating moderate to severe plaque psoriasis (TA350), July 2015. Accessed 22/07/15.
3. National Institute for Health and Care Excellence. [Costing statement: Secukinumab for treating moderate to severe plaque psoriasis \(TA350\)](#), July 2015. Accessed 22/07/15.