

SECUKINUMAB solution for injection (Cosentyx®) for non-radiographic axial spondyloarthritis

The Pan Mersey Area Prescribing Committee recommends the prescribing of SECUKINUMAB solution for injection (Cosentyx®), by specialists only, for the treatment of non-radiographic axial spondyloarthritis in accordance with NICE TA719.

RED

[NICE technology appraisal \(TA\) 719](#) recommends secukinumab as an option for treating active non-radiographic axial spondyloarthritis with objective signs of inflammation (shown by elevated C-reactive protein or MRI) that is not controlled well enough with non-steroidal anti-inflammatory drugs (NSAIDs) in adults. It is recommended only if:

- > tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough **and**
- > the company provides secukinumab according to the commercial arrangement.¹

Prescribing and monitoring of therapy must be retained by a specialist in the management of non-radiographic axial spondyloarthritis.

Assess response to secukinumab after 16 weeks of treatment. Continue treatment only 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 or more units **and**
- > a reduction in the spinal pain visual analogue scale (VAS) by 2 cm or more.¹

NICE does 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 in England (or £9,000 per 100,000 population). This is because secukinumab is a further treatment option and the overall cost of treatment will be similar to current treatment options. NICE do not think practice will change substantially as a result of this guidance.

References

1. National Institute for Health and Care Excellence. Technology Appraisal 719; [Secukinumab for treating non-radiographic axial spondyloarthritis](#) , 21 July 2021. Accessed online 19 August 2021.

Note: Patients who are not eligible for treatment under this statement 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. In this situation, follow locally defined processes.