

UPADACITINIB prolonged-release tablets (Rinvoq® ▼) for active ankylosing spondylitis

The Pan Mersey Area Prescribing Committee recommends the prescribing of UPADACITINIB prolonged-release tablets (Rinvoq® ▼), by specialists only, for treating active ankylosing spondylitis in accordance with NICE TA829.

RED

[NICE technology appraisal \(TA\) 829](#) (30 September 2022) recommends upadacitinib as an option for treating active ankylosing spondylitis that is not controlled well enough with conventional therapy in adults, only if:

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

If people and their clinicians consider upadacitinib to be one in the range of suitable treatments, which includes secukinumab and ixekizumab, the least expensive should be chosen taking into account administration costs, dosage, price per dose and commercial arrangements.^[1]

Assess response to upadacitinib 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]

Prescribing and monitoring of therapy must be retained by a specialist in the management of ankylosing spondylitis.

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 (or approximately £9,000 per 100,000 population). Upadacitinib is a further treatment option and the overall cost of treatment will be similar to current treatment options.^[2]

References

1. National Institute for Health and Care Excellence. Technology Appraisal 829; [Upadacitinib for active ankylosing spondylitis](#), 30 September 2022. Accessed online 12 October 2022.
2. National Institute for Health and Care Excellence. Technology Appraisal 829; [Resource impact statement: Upadacitinib for treating active ankylosing spondylitis](#), 30 September 2022. Accessed online 14 October 2022.

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.