Sent by e-mail only: xxxxxxxxxxxxxxxxxxx

FAO xxxxxxxxxxxxxxxxxxx

International Porphyria Patient Network (IPPN)

26 April 2023

Dear xxxxxxx

**Re: Final Evaluation Determination— AFAMELANOTIDE FOR ERYTHROPOIETIC PROTOPORPHYRIA (EPP) [ID927]**

Thank you for your letter of 5 April 2023 responding to my initial scrutiny views. This is my final decision on initial scrutiny.

I confirm my decision below in relation to each ground raised in your appeal letter. I consider the ground 1(a) points followed by the ground 1(b) points, and then the ground 2 points.

***Ground 1(a): In making the assessment that preceded the recommendation, NICE has failed to act fairly***

**Appeal point 1(a).1: Pausing the appraisal during the pandemic and further delays in the evaluation of afamelanotide were unfair to patients with EPP in England and Wales**

I confirm my view that this is a valid appeal point and refer it to the Appeal Panel.

**Appeal point 1(a).2: It was unfair to not grant access to an executable version of the economic model to the IPPN**

I confirm my view that this is not a valid appeal point, and do not refer it to the Appeal Panel.

**Appeal point 1(a).3: It was unfair to change the requirements for a managed access agreement between the first and the second FED**

I confirm my view that this is not a valid appeal point, and do not refer it to the Appeal Panel.

***Ground 1(b): In making the assessment that preceded the recommendation, NICE has exceeded its powers***

**Appeal point 1(b).1: The Institute has exceeded its powers by retrospectively changing the narrative of the history of the appraisal, i.e., stating a different justification and timeline for pausing the appraisal of afamelanotide**

I confirm my view that this is not a valid free-standing point of appeal, and do not refer it to the Appeal Panel.

**Appeal point 1(b)2: The Institute has exceeded its powers by pre-determining the preferred form of evidence for the generation of EQ-5D data as a vignette study**

I confirm my view that this is not a valid appeal point, and do not refer to the Appeal Panel.

***Ground 2:******the recommendation is unreasonable in the light of the evidence submitted to NICE***

**Appeal point 2.1: Using a shorter than usual time-horizon for the economic model was unreasonable given that EPP is a lifelong chronic condition and the justification for the decision discriminates against patients aged 70 years and older**

Having considered the additional arguments made in your letter of 5 April 2023, I agree that this is a valid appeal point.

**Appeal point 2.2: It is unreasonable for the committee to assess the EQ-5D feasibility study as less scientifically valid than vignette studies**

I confirm my view that this is a valid appeal point, and refer it to the Appeal Panel.

**Appeal point 2.3: It was unreasonable for the committee to not apply a QALY weighting in the case of afamelanotide**

I confirm my view that this is a valid appeal point, and refer it to the Appeal Panel.

Conclusion

Therefore the valid appeal points are:

* Appeal point 1(a).1: Pausing the appraisal during the pandemic and further delays in the evaluation of afamelanotide were unfair to patients with EPP in England and Wales.
* Appeal point 2.1: Using a shorter than usual time-horizon for the economic model was unreasonable given that EPP is a lifelong chronic condition and the justification for the decision discriminates against patients aged 70 years and older.
* Appeal point 2.2: It is unreasonable for the committee to assess the EQ-5D feasibility study as less scientifically valid than vignette studies.
* Appeal point 2.3: It was unreasonable for the committee to not apply a QALY weighting in the case of afamelanotide.

NICE shares the valid appeal grounds of each appellant with the other appellants to assist with preparation for the hearing.

NICE will be in contact with you regarding the administration of the appeal, which will be held orally.

Yours sincerely

Dr Mark Chakravarty

Lead Non-Executive Director for Appeals & Vice Chairman

National Institute for Health and Care Excellence