NICE National Institute for Health and Care Excellence

NICE guidance

Faricimab for treating visual impairment caused by macular oedema after retinal vein occlusion

Technology appraisal guidance
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www.nice.org.uk/guidance/ta1004

Your responsibility

The recommendations in this guidance represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take this guidance fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this guidance is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

All problems (adverse events) related to a medicine or medical device used for treatment or in a procedure should be reported to the Medicines and Healthcare products Regulatory Agency using the Yellow Card Scheme.

Commissioners and/or providers have a responsibility to provide the funding required to enable the guidance to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Contents

1 Recommendations

1.1 Faricimab is recommended, within its marketing authorisation, as an option for treating visual impairment caused by macular oedema after central or branch retinal vein occlusion in adults. It is only recommended if the company provides it according to the commercial arrangement.

1.2 If people with the condition and their healthcare professional consider faricimab to be 1 of a range of suitable treatments, after discussing the advantages and disadvantages of all the options, the least expensive should be used. Administration costs, dosages, price per dose and commercial arrangements should all be taken into account.

Why these recommendations were made

Visual impairment caused by macular oedema after retinal vein occlusion is usually treated with an anti-vascular endothelial growth factor (anti-VEGF) treatment (aflibercept or ranibizumab). Faricimab is another treatment option that works in a similar way and would be offered to the same population.

Using NICE's cost comparison methods, if a treatment has similar benefits and costs to a comparator recommended in technology appraisal guidance it can be recommended as a treatment option.

Evidence from clinical trials shows that faricimab is likely to work as well as aflibercept for people who have not had an anti-VEGF treatment. There is limited evidence for how well faricimab works for people who have had an anti-VEGF treatment. But clinical experts agreed that faricimab is likely to work as well as aflibercept for people who have had an anti-VEGF treatment.

A cost comparison suggests faricimab has similar costs and overall health benefits to aflibercept. In addition, a majority of people currently have aflibercept for this condition, particularly people starting treatment. So faricimab is recommended as an additional treatment option.

There are no equality issues relevant to the recommendations.

For all evidence see the committee papers. For more information on NICE's evaluation of aflibercept, see the consideration of the evidence section in NICE's technology appraisal guidance on aflibercept for treating visual impairment caused by macular oedema secondary to central retinal vein occlusion, and the committee discussion section in aflibercept for treating visual impairment caused by macular oedema after branch retinal vein occlusion.

2 Information about faricimab

Marketing authorisation indication

2.1 Faricimab (Vabysmo, Roche) is indicated for 'the treatment of adult patients with visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO)'.

Dosage in the marketing authorisation

2.2 The dosage schedule is available in the summary of product characteristics for faricimab.

Price

2.3 The list price of faricimab is £857 for 1 vial of 120 mg per 1 ml solution for injection (excluding VAT; BNF online accessed May 2024)

2.4 The company has a commercial arrangement. This makes faricimab available to the NHS with a discount. The size of the discount is commercial in confidence.

3 Implementation

3.1 Section 7 of the National Institute for Health and Care Excellence (Constitution and Functions) and the Health and Social Care Information Centre (Functions) Regulations 2013 requires integrated care boards, NHS England and, with respect to their public health functions, local authorities to comply with the recommendations in this evaluation within 3 months of its date of publication. Because faricimab has been recommended through the cost-comparison process, NHS England and integrated care boards have agreed to provide funding to implement this guidance 30 days after publication.

3.2 The Welsh ministers have issued directions to the NHS in Wales on implementing NICE technology appraisal guidance. When a NICE technology appraisal guidance recommends the use of a drug or treatment, or other technology, the NHS in Wales must usually provide funding and resources for it within 2 months of the first publication of the final draft guidance.

3.3 When NICE recommends a treatment 'as an option', the NHS must make sure it is available within the period set out in the paragraphs above. This means that, if a patient has visual impairment caused by macular oedema after retinal vein occlusion and the healthcare professional responsible for their care thinks that faricimab is the right treatment, it should be available for use, in line with NICE's recommendations.

4 Evaluation committee members and NICE project team

Evaluation committee members

The 4 technology appraisal committees are standing advisory committees of NICE. This topic was considered by the lead team of the highly specialised technologies evaluation committee, which includes the chair and the vice chair.

Committee members are asked to declare any interests in the technology being evaluated. If it is considered there is a conflict of interest, the member is excluded from participating further in that evaluation.

Chair

Paul Arundel
Chair, highly specialised technologies evaluations committee

NICE project team

Each evaluation is assigned to a team consisting of 1 or more health technology analysts (who act as technical leads for the evaluation), a technical adviser and a project manager.

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