Resource impact statement

Resource impact
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NICE has recommended faricimab within its anticipated 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.

It is estimated that the incidence of retinal vein occlusion with visual impairement caused by macular oedema in England is around 22,000 people per year. It is assumed that all of these people are aged 40 and over and are therefore eligible for treatment wiith faricimab and relevant comparators.

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

It is anticipated that aflibercept will be accessible as a biosimilar option during the timeframe encompassed by the resource impact assessment. Ranibizumab is already available as a biosimilar. The availability of biosimilars could lead to significant financial implications. To accurately gauge these effects, users can input local estimates of the market shares for biosimilar and all other treatments directly into the resource impact template that accompanies this summary report.

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.

Treatments for people with macular oedema are commissioned by integrated care boards. Providers are NHS hospital trusts.

The payment mechanism for the technology is determined by the responsible commissioner and depends on the technology being classified as high cost.