British Health Professionals in Rheumatology (BHPR) Response to NICE ACD re Golimumab for the treatment of Psoriatic Arthritis

The British Health Professionals in Rheumatology (BHPR) welcome this opportunity to respond to the ACD re Golimumab fort he treatment of Psoriatic Arthritis.

We note the ACD report and its findings and sympathise with the difficult challenges that the NICE appraisal committee constantly faces with undertaking economic modelling that only considers the short term costs and benefits of treatments.

We note the following:

Evidence:

BHPR noted the comment in 4.4 – possibility of longer retreatment interval resulting in longer periods of discomfort due to 12 day half life – is there any evidence for this statement as we were unable to find any? This is particularly important as patients generally prefer a less frequent dosing schedule as it enables them to continue working and maintain their financial independence.

Provisional recommendations:

BHPR noted the comment in 4.6 – use of 100mg dose. The dose at 100mg would not be used within clinical practice and therefore this dose should not be included in the TA .

Comment 4.8 – adverse events. The evidence suggests that there is no difference in the side effect profile of Golimumab compared to other TNF's and this has already been addressed by the licensing authority.