NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Review Proposal Project (RPP) decision paper

Review of TA246; Pharmalgen for the treatment of venom allergy

Final recommendation post consultation
The guidance should be transferred to the 'static guidance list'.

1. Background

This guidance was issued in February 2012

At the Guidance Executive meeting of 18 July 2017 it was agreed that we would consult on the recommendations made in the GE proposal paper. A four week consultation has been conducted with consultees and commentators and the responses are presented below.

2. Proposal put to consultees and commentators

The guidance should be transferred to the 'static guidance list'. That we consult on this proposal.

3. Rationale for selecting this proposal

The acquisition list price of Pharmalgen has increased for the respective induction and maintenance treatment packs. The price increase was agreed by the Department of Health with effect from 2014 following a price neutral modulation proposal submitted by the company. There is no PAS for this product.

The committee's considerations as described in the Final Appraisal Determination (FAD) indicate that the cost effectiveness results were most sensitive to the number of stings per year experienced by people at high risk of stings, and the impact on quality of life and the time horizon of the model. The cost-effectiveness estimates were not sensitive to changes in cost. The most plausible incremental cost-

effectiveness ratios (ICERs) were below £20,000 per quality adjusted life year (QALY) gained. There is no substantial new evidence. An ongoing Cochrane Review referred to in the FAD has provided further data supporting the efficacy of Pharmalgen and its positive impact on the quality of life for people with venom allergies. This would further support the committee's original conclusions about its preferred assumptions relating to the economic model (which resulted in lower ICERs than the base case in the original appraisal). In addition, Pharmalgen remains the only venom immunology that has a UK marketing authorisation.

It is therefore concluded that the change in list price is unlikely to lead to a change in the recommendations, and that the guidance should therefore be transferred to the 'static guidance list'.

4. Summary of consultee and commentator responses

Comments received in the course of consultations carried out by NICE are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the submissions that NICE has received, and are not endorsed by NICE, its officers or advisory committees.

Respondent: Department of Health **Response to proposal:** No comment	**Comment from Technology Appraisals** Noted.

Respondent: GlaxoSmithKline UK Limited **Response to proposal:** Agree GSK agree that the guidance should be transferred to the 'static guidance list'.	**Comment from Technology Appraisals** Comment noted.

Respondent: ALK-Abelló (UK) Ltd **Response to proposal:** Agree ALK fully support moving TA246 – Pharmalgen for venom anaphylaxis to the static list and have no other comments.	**Comment from Technology Appraisals** Comment noted.

Respondent: The Anaphylaxis Campaign **Response to proposal:** Agree Anaphylaxis Campaign agree that the guidance should be transferred to the 'static guidance list' and that the guidance will remain in place, in its current form, unless NICE becomes aware of substantive information which would make it reconsider.	**Comment from Technology Appraisals** Comment noted.

Respondent: Royal College of Physicians **Response to proposal:** Agree We are happy to approve the move to the static list.	**Comment from Technology Appraisals** Comment noted.

Paper signed off by: Jenniffer Prescott, 23 August 2017

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