

Fingolimod for highly active relapsing–remitting multiple sclerosis

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS.

This document is about when **fingolimod** should be used to treat adults with highly active relapsing–remitting multiple sclerosis in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people with multiple sclerosis but it may also be useful for their families or carers or for anyone with an interest in the condition.

It does not describe multiple sclerosis or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on page 4.

This may not be the only possible treatment for highly active relapsing–remitting multiple sclerosis. Your healthcare team should talk to you about whether it is suitable for you and about other treatment options available.

What has NICE said?

NICE recommends fingolimod as a possible treatment for some adults with highly active relapsing–remitting multiple sclerosis (see below).

Who can have fingolimod?

You should be able to have fingolimod if:

- you've had beta interferon treatment for the past year but you've still had as many or more relapses than the year before, or your relapses have continued to be severe.

Why has NICE said this?

NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE recommended fingolimod because it is a valuable new oral treatment for patients with multiple sclerosis. Although it costs more than other treatments available on the NHS, this was justified by the benefits offered.

Multiple sclerosis

Multiple sclerosis is a disease in which areas of the brain and spinal cord become damaged by the body's own immune system. In relapsing–remitting multiple sclerosis, people have flare-ups of symptoms (relapses) followed by a period of recovery (remission).

Fingolimod

Fingolimod (also known as Gilenya) stops white blood cells (part of the body's immune system) from leaving the blood and entering the brain. This protects the brain and spinal cord from further damage by the white blood cells so that relapses of multiple sclerosis occur less often. Fingolimod is the first treatment for multiple sclerosis that is given in tablet form.

What does this mean for me?

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you have highly active relapsing–remitting multiple sclerosis, and you and your doctor think that fingolimod is the right treatment for you (see 'What has NICE said?' on page 2), you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you think you are eligible for the treatment but it is not available.

If you are already taking fingolimod for highly active relapsing–remitting multiple sclerosis but you are not eligible for treatment as described on page 2, you should be able to continue taking it until you and your doctor decide it is the right time to stop.

More information

The organisations below can provide more information and support for people with multiple sclerosis. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- Multiple Sclerosis Society, 020 8438 0700
www.mssociety.org.uk
- Multiple Sclerosis Trust, 01462 476700
www.mstrust.org.uk

NHS Choices (www.nhs.uk) may be a good place to find out more. Your local patient advice and liaison service (usually known as 'PALS') may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.

About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the disease and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This document and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/guidance/TA254

The NICE website has a screen reader service called Browsealoud, which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

We encourage NHS and voluntary organisations to use text from this document in their own information about multiple sclerosis.

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