Dear Kate,

There is disappointment in the Liver community across the UK concerning this APC.

There is no doubt that Rifaximin is an excellent agent to reduce the recurrence of hepatic encephalopathy - there is enough clinical evidence to show this. Indeed the APC is clear on this.

Whilst I do understand that the data provided by the manufacturer is not strong enough to support the cost effectiveness of Rifaximin, we cannot deny patients of a proven treatment that will reduce morbidity and mortality. As clinicians we need to be able to use Rifaximin for our patients.

I believe that the relevant evidence has been taken into account and show the clinical effectiveness of Rifaximin. Indeed, abstracts presented at the BSG this year support this 'in the real world'.

The provisional recommendations will deny a group of patients with advanced liver disease a proven treatment that will improve their quality of life, prevent readmissions and reduce morbidity.

I understand that the manufacturer will be providing more data and I'd hope that this provisional decision will be reconsidered.

I have major concerns that there is nothing else for the group of patients with recurrent HE.

Regards

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