



Resource impact statement

Resource impact

Published: 23 June 2021

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No significant resource impact is anticipated

NICE has recommended ravulizumab as an option for treating atypical haemolytic uraemic syndrome (aHUS) in people weighing 10 kg or more:

- who have not had a complement inhibitor before or
- whose disease has responded to at least 3 months of eculizumab treatment.

We do not expect this guidance to have a significant impact on resources; that is, the resource impact of implementing the recommendations in England will be less than £5 million per year in England (or £9,000 per 100,000 population).

This is because the technology is a further treatment option and the population size is small (the number of people eligible for treatment with ravulizumab each year is less than 250).

Ravulizumab offers reduced frequency of drug administrations, therefore, could reduce drug administration costs compared to comparator treatments. The company provides a home care arrangement for both ravulizumab and eculizumab.

Ravulizumab and eculizumab have discounts that are commercial in confidence. It is the company's responsibility to let relevant NHS organisations know details of the discounts.

This technology is commissioned by NHS England. Providers are tertiary care providers.