



Resource impact statement

Resource impact

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No significant resource impact is anticipated

NICE has recommended [belimumab](#) as an option as add-on treatment for active autoantibody-positive systemic lupus erythematosus in people with high disease activity despite standard treatment, only if:

- high disease activity is defined as at least 1 serological biomarker (positive anti-double-stranded DNA or low complement) and a SELENA-SLEDAI score of greater than or equal to 10
- treatment is continued beyond 24 weeks only if the SELENA-SLEDAI score has improved by 4 points or more
- the company provides belimumab according to the commercial arrangement.

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 (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million people).

This is because the overall incremental cost of treatment is low.

In addition belimumab may reduce the incidence of disease flares and the resources associated with their management, such as GP visits, specialist clinic visits, cost of medication and episodes of hospitalisation. The subcutaneous formulation of belimumab, which can be self-administered at home, offers resource benefits over the intravenous formulation.

The company has a commercial arrangement for both formulations (simple discount patient access scheme). This makes belimumab available to the NHS with a discount. For enquiries about the patient access scheme please contact: UK.pas@gsk.com.

This technology is commissioned by NHS England. Providers are NHS hospital trusts.