Resource impact statement

Resource impact
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NICE has recommended fedratinib for use within the Cancer Drugs Fund for treating disease-related splenomegaly or symptoms of primary myelofibrosis, post-polycythaemia vera myelofibrosis or post-essential thrombocythaemia myelofibrosis in adults. It is recommended only if:

- they have previously had ruxolitinib and
- the conditions in the managed access agreement for fedratinib are followed.

Fedratinib will be available to the NHS in line with the managed access agreement with NHS England. As part of this, NHS England and Celgene have a commercial access agreement that makes fedratinib available to the NHS at a reduced cost. The financial terms of the agreement are commercial in confidence.

It is estimated that around 250 people per year with disease-related splenomegaly or symptoms in myelofibrosis are eligible for treatment with fedratinib.

The resource impact of fedratinib will be covered by the Cancer Drugs Fund budget. More evidence on fedratinib is being collected until the final results of the FREEDOM-2 trial are available. After this, NICE will decide whether or not to recommend it for standard use in the NHS and update the guidance. It will be available through the Cancer Drugs Fund until then. Further information can be found in NHS England's Appraisal and Funding of Cancer Drugs from July 2016 (including the new Cancer Drugs Fund) - A new deal for patients, taxpayers and industry.

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