



Resource impact statement

Resource impact

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Cancer Drugs Fund technology

NICE has recommended dostarlimab for use within the Cancer Drugs Fund as an option for treating advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency in adults who have had platinum-based chemotherapy. It is recommended only if the conditions in the [managed access agreement](#) are followed.

This recommendation is not intended to affect treatment with dostarlimab that was started in the NHS before the guidance was published. People having treatment outside this recommendation may continue without change to the funding arrangements in place for them before the guidance was published, until they and their NHS clinician consider it appropriate to stop.

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

It is estimated that around 280 adults per year with advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency who have had platinum-based chemotherapy are eligible for treatment with dostarlimab.

The resource impact of dostarlimab will be covered by the Cancer Drugs Fund budget. More evidence on dostarlimab is being collected until the final results of the GARNET trial are available. After this, NICE will decide whether or not to recommend it for use on 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.