



# Resource impact statement

Resource impact

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## Managed access technology

NICE has recommended trastuzumab deruxtecan with managed access as an option for treating HER2-positive unresectable or metastatic breast cancer after 1 or more anti-HER2 treatments in adults. It is only recommended if the conditions in the managed access agreement for trastuzumab deruxtecan are followed.

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

Trastuzumab deruxtecan will be available to the NHS in line with the [managed access agreement](#) with NHS England. As part of this, NHS England and Daiichi Sankyo have a commercial access agreement that makes trastuzumab deruxtecan available to the NHS at a reduced cost. The financial terms of the agreement are commercial in confidence.

It is estimated that around 600 people per year with HER2-positive unresectable or metastatic breast cancer after 1 or more anti-HER2 treatments are eligible for treatment with trastuzumab deruxtecan.

The resource impact of trastuzumab deruxtecan will be covered by the Cancer Drugs Fund. More evidence on trastuzumab deruxtecan is being collected until the final results of the DESTINY-Breast03 study 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.