



# Resource impact statement

Resource impact

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NICE has recommended bimekizumab as an option in adults for treating active ankylosing spondylitis (AS) when conventional therapy has not worked well enough or is not tolerated, or active non-radiographic axial spondyloarthritis (nr-axSpA) with objective signs of inflammation (shown by elevated C-reactive protein or MRI) when non-steroidal anti-inflammatory drugs (NSAIDs), have not worked well enough or are not tolerated. It is recommended only if:

- tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough, and
- the company provides it according to the [commercial arrangement](#).

We expect the resource impact of implementing the recommendations in England will be less than £5 million per year (or approximately £8,800 per 100,000 population, based on a population for England of 56.6 million people).

This is because the technology is a further treatment option and the overall cost of treatment will be similar.

The company has a commercial arrangement. This makes bimekizumab available to the NHS with a discount. The size of the discount is commercial in confidence. It is the company's responsibility to let relevant NHS organisations know details of the discount. The other treatment options have discounts that are commercial in confidence. For enquiries about Patient Access Scheme (PAS) discounts contact the company, alternatively there may be confidential discounts at local or national levels arranged through networks.

A resource impact template is provided for completion at a local level. This is because there are numerous treatment options that are recommended by NICE for treating ankylosing spondylitis and non-radiographic axial spondyloarthritis.

This technology is commissioned by integrated care boards. Providers are NHS hospital trusts.

The payment mechanism for the technology is determined by the responsible commissioner and depends on the technology being classified as high cost.