



## Resource impact summary report

Resource impact

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The guidance covers zanubrutinib as an option for treating chronic lymphocytic leukaemia (CLL) in adults.

Around 2,900 people are diagnosed with CLL in England each year (<u>cancer registration</u> statistics, England 2020).

## Table 1 Number of people eligible for treatment in England

Population	Number of people
Population 1 – untreated adults with no 17p deletion or tumour protein 53 (TP53) mutation and fludarabine plus cyclophosphamide and rituximab, or bendamustine plus rituximab therapy is unsuitable	1,172

Population 2 – untreated adults with a 17p deletion or TP53 mutation	194
Population 3 – adults who have relapsed or refractory CLL	496
Total eligible population	1,862

Sources: Company and NHSE BI submissions, TA689 NICE resource impact template, clinical opinion.

The <u>resource impact template</u> assumes that:

- the adult population in England will increase in the next 5 years
- administration costs of zanubrutinib, ibrutinib and acalabrutinib are the same
- administrations are equally split between secondary care and via homecare.

Uptake figures and drug costs can be input locally into the resource impact template.

Zanubrutinib falls within the programme budgeting category PBC 02I Cancer, Haematological.

The technology is commissioned by NHS England.

Providers are NHS hospital trusts.

This resource impact report accompanies the <u>NICE technology appraisal guidance on</u> zanubrutinib for treating chronic lymphocytic leukaemia and should be read with it.