



Resource impact statement

Resource impact

Published: 30 August 2024

Last updated: 11 October 2024

www.nice.org.uk

NICE has recommended risankizumab as an option for treating moderately to severely active ulcerative colitis in adults when conventional or biological treatment cannot be tolerated, or the condition has not responded well enough or has lost response to treatment, only if:

- a tumour necrosis factor (TNF)-alpha inhibitor:
 - has not worked (that is the condition has not responded well enough or has lost response to treatment) or
 - cannot be tolerated or is not suitable, 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 57.1 million people).

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

The previously published template for this patient group has been updated and replaced to include risankizumab and all other treatment options for moderately to severely active ulcerative colitis.

Organisations should complete both current and future uptake based on local practice in order to assess the financial impact.

The company has a [commercial arrangement](#). This makes risankizumab available to the NHS with a discount. The size of the discount is commercial in confidence. The other treatment options also have discounts that are commercial in confidence. Alternatively, there may be confidential discounts at a local or national level arranged through networks.

This technology is commissioned by integrated care boards in adults, NHS England is the commissioner for this technology in children. 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.