

Are NICE Appraisal Committees being consistent in their implementation of the end of life criterion?

Background

- › The National Institute for Health and Care Excellence (NICE) makes recommendations on the public reimbursement of medicines based on their clinical- and cost-effectiveness
- › The recommendation is made by a Technology Appraisal Committee (comprising a multi-disciplinary group of independent experts) as part of a technology appraisal
- › There are four Technology Appraisal Committees (A, B, C, D); previous research indicated that single technology appraisals (STA) undertaken by NICE Appraisal Committee D were associated with a significantly lower rate of 'recommended' outcomes than other Committees¹
- › This research aims to evaluate whether this can be accounted for by differences in implementation of End of Life (EoL) criteria

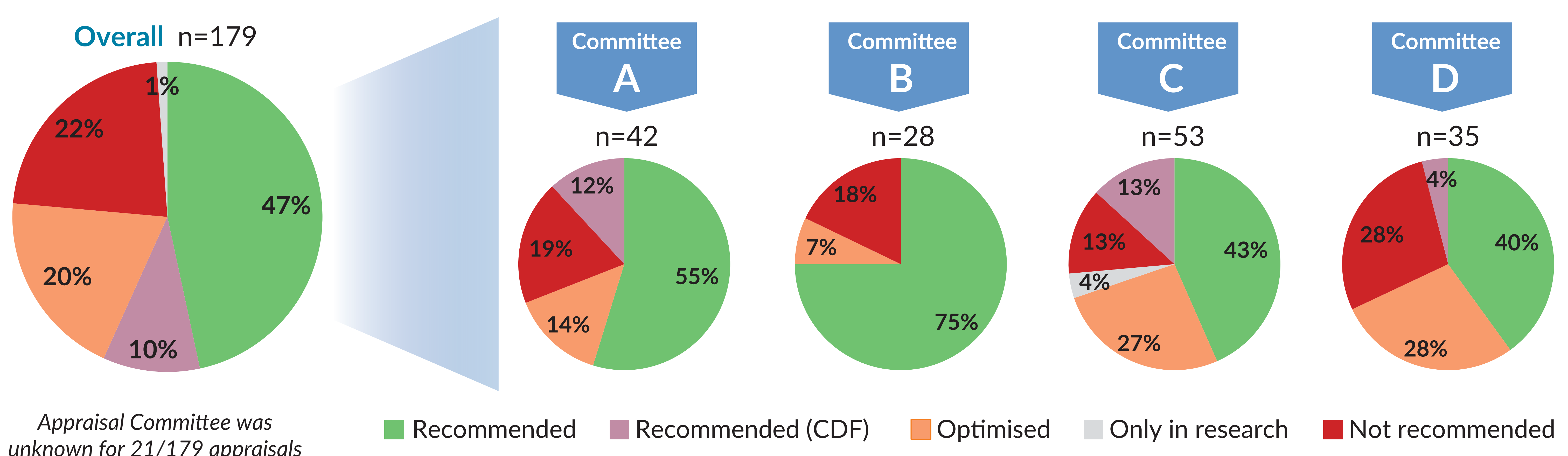
Methods

- › NICE STA guidance for oncology drugs was screened (18/06/2009-20/03/2019) and EoL consideration data extracted alongside the Appraisal Committee
- › The proportions of EoL criteria application across Committees was assessed for equality using two-sided Chi-squared tests

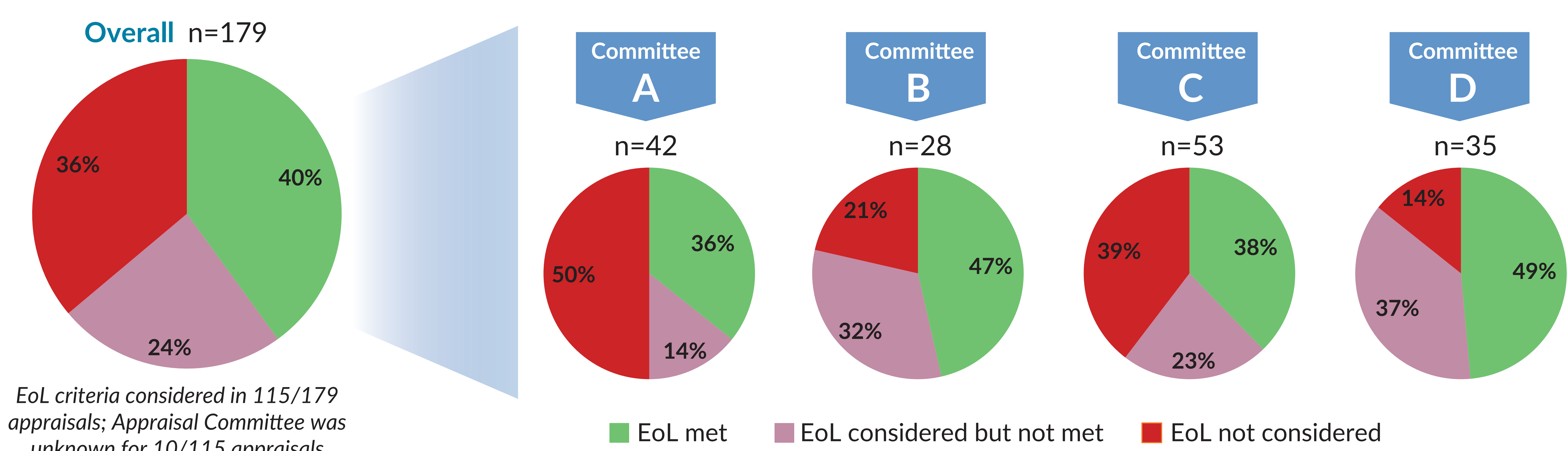
Results

- › 179 STA-recommendations for oncology drugs were identified (47% recommended, 20% optimized, 10% recommended for the Cancer Drugs Fund [CDF], 22% not recommended, and 1% only in research). EoL criteria were discussed in 64% (115/179) of appraisals and were deemed to apply in 63% of cases (72/115, 94% of which were recommended, optimized or recommended for the CDF)
- › Where EoL criteria were considered, they were deemed to apply in 71% (15/21), 59% (13/22), 63% (20/32), and 57% (17/30) of STAs by Appraisal Committees A, B, C, and D, respectively
- › There was no significant difference in acceptance of EoL criteria by Committee ($\chi^2_3=0.28$, $p=0.96$)

NICE STA appraisal outcomes, overall and stratified by Appraisal Committee (2009-2019)



EoL Considerations for NICE STAs, stratified by Appraisal Committee (2009-2019)



Conclusions

- › Differential implementation of EoL criteria does not account for STAs undertaken by NICE Appraisal Committee D being associated with a significantly lower rate of 'recommended' outcomes than the other Committees
- › Further research is needed to determine if there are other confounding factors (such as the types of drugs appraised) or whether this may reflect deviation in uniform implementation of NICE methodology between Committees

Reference

1. Macaulay, R. et al. Damned if you 'D'? Evidence the selection of the Appraisal Committee may affect NICE Technology assessment outcomes. ISPOR Europe 2017, Glasgow, Scotland, November 2017.

