

Analysis of neurological condition submissions to the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) from 2001 to 2021



White A,¹ Wong R,² Guest S,¹ Carroll C,² Essat M,² Rowen D,² Young V,¹ Brazier J.²
¹Roche Products Ltd, Welwyn Garden City, UK
²School of Health and Related Research, University of Sheffield, Sheffield, United Kingdom



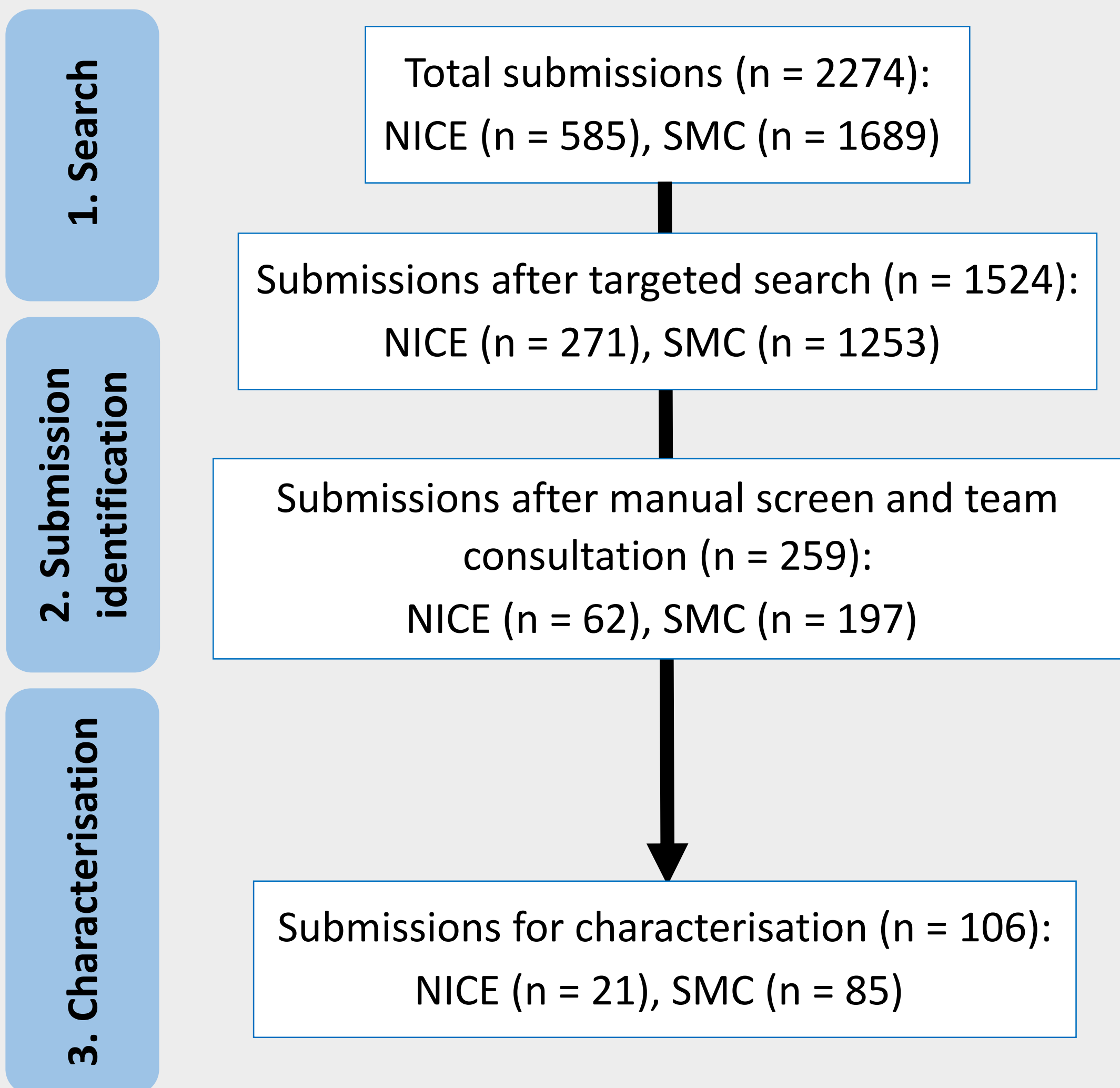
Aims and objectives

- This project aims to build an understanding of UK reimbursement challenges, specifically around the acceptance of endpoints in neurological conditions.
- The initial stage of the project aims to identify, characterise, and compare the frequency and types of submissions for the treatment of neurological conditions (excluding general mental health, oncological, and rare diseases) made to NICE and SMC, from inception until November 2021.

Methods

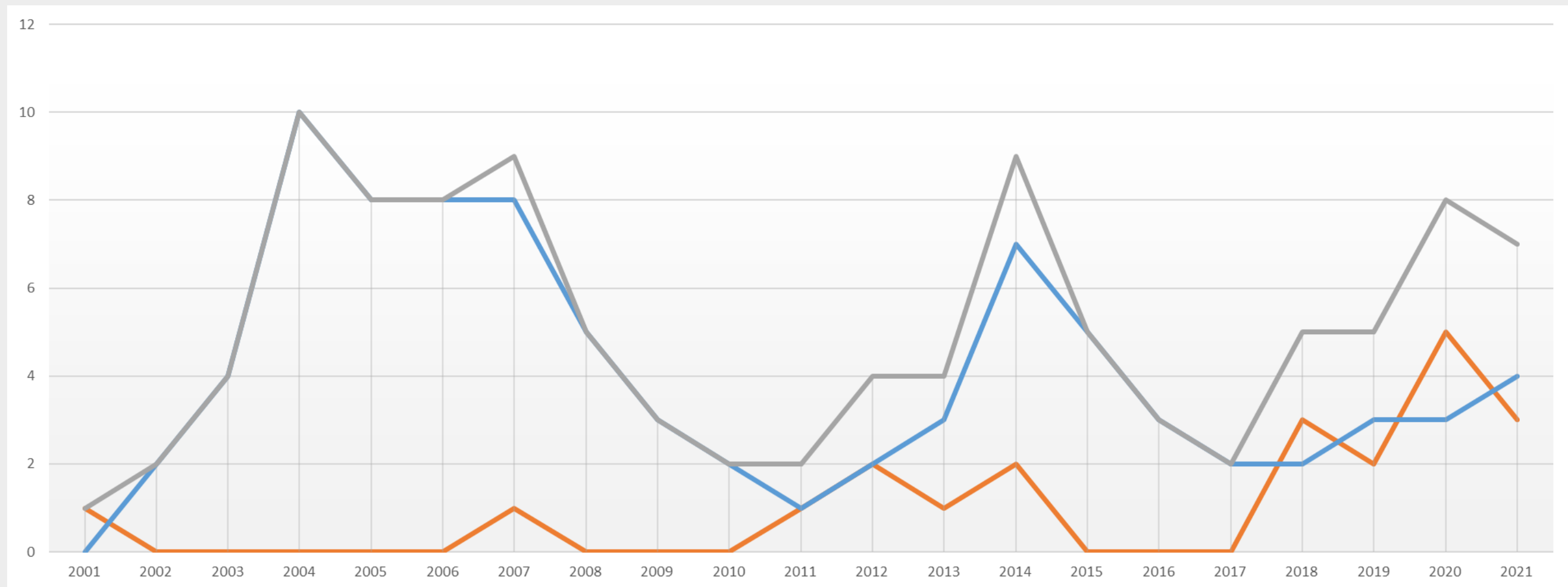
- Three approaches were applied to identify NICE¹ and SMC² submissions: i) targeted keyword searching ii) manual identification iii) review team consultations.
- Characterisation and comparison (Figures 1-4) of included submissions: i) frequency and proportion by type of NICE and SMC submission ii) frequency by year and cumulative growth between 2001-2021 iii) frequency of submission by disease.

Results: Submission identification



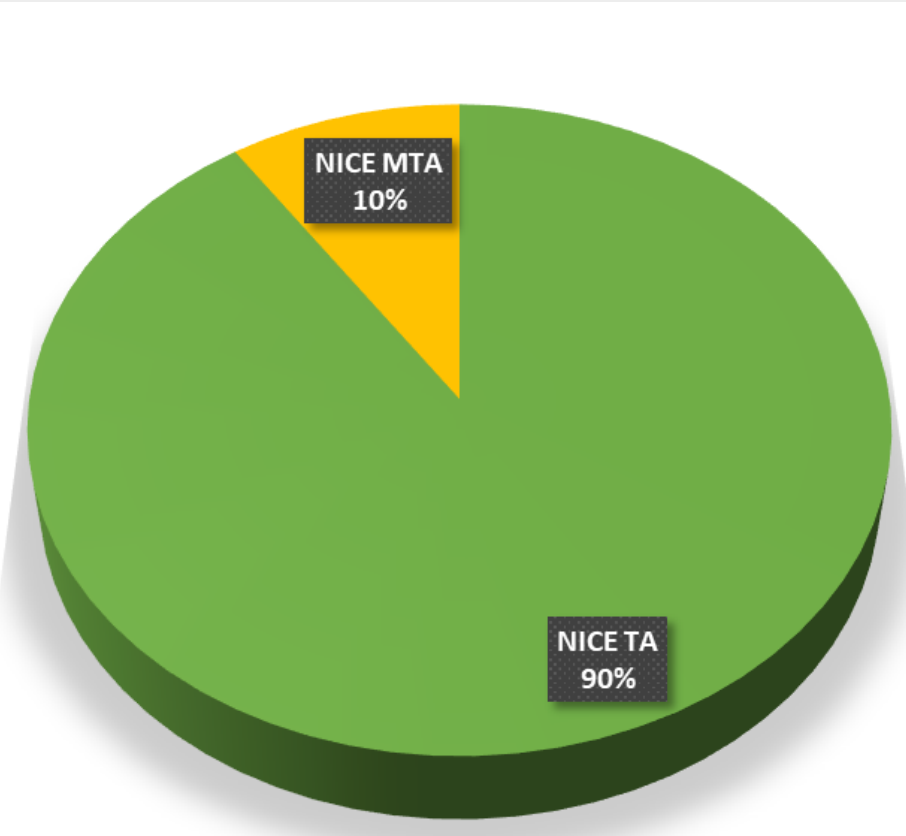
Results: Characterisation and comparison

Figure 1. Frequency of NICE and SMC submissions by year



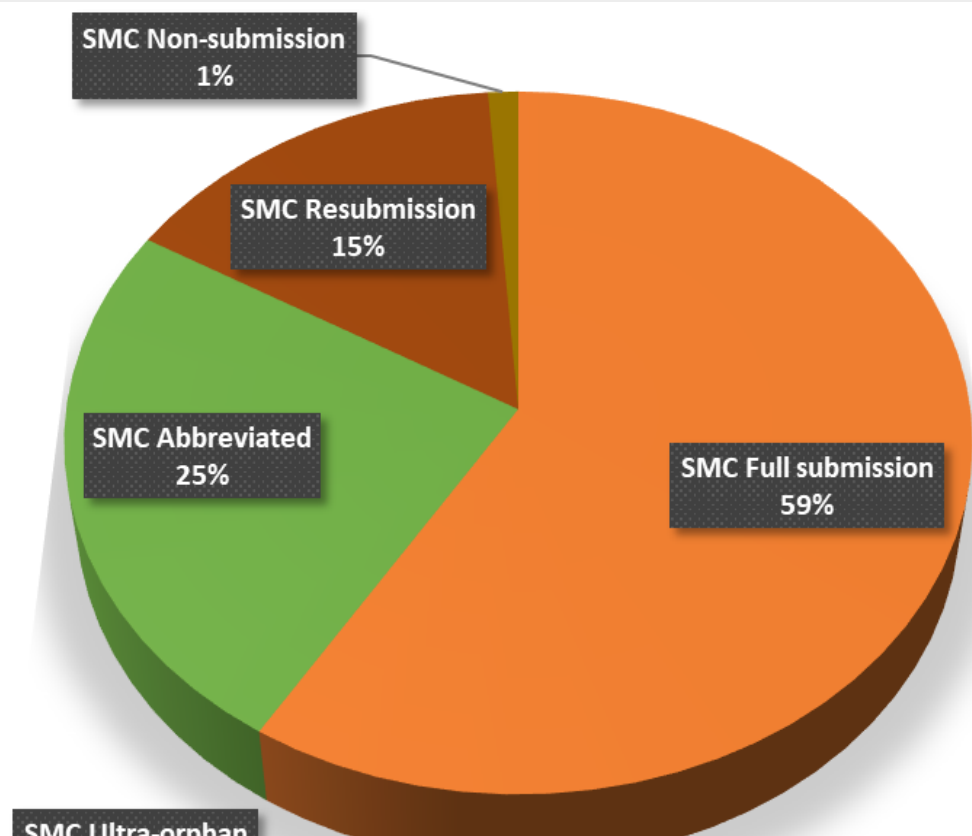
- Data: Total NICE SMC
- Mean total per year = 5 (range 1-10)
- 62% [13/21] NICE vs 14% [12/85] SMC submissions since 2018

Figure 2. NICE submission types



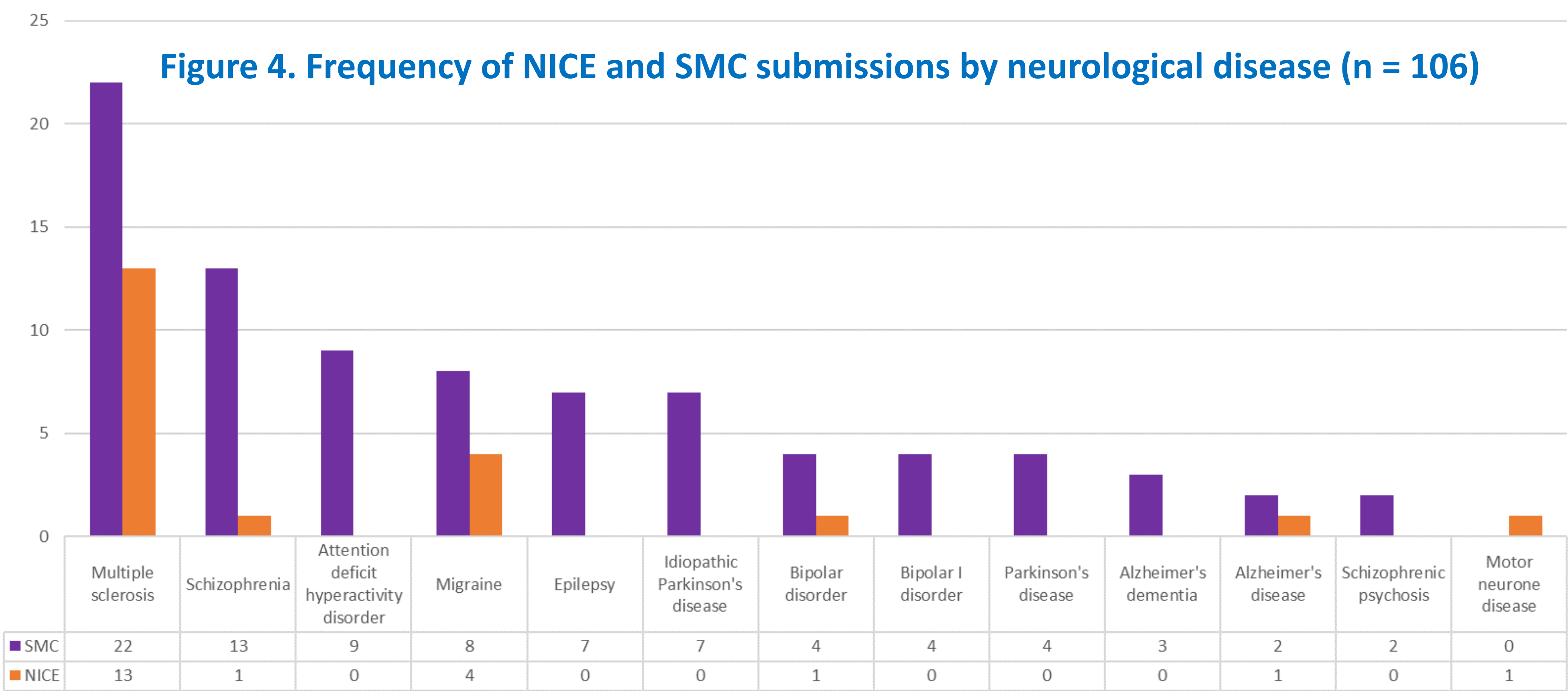
- 21 submissions (19 STA, 2 MTA)

Figure 3. SMC submission types



- 85 submissions (50 full, 21 abbreviated, 13 re-submissions, 1 non-submission)

Figure 4. Frequency of NICE and SMC submissions by neurological disease (n = 106)



Conclusions

- The SMC has assessed more technologies for a broader range of neurological conditions than NICE, possibly because SMC is quicker at issuing appraisal guidance compared to NICE³.
- The impact of this difference on access and health inequality in England/Wales and Scotland is unclear.
- Future research includes further appraisal analysis such as recommendation outcomes by reimbursement agency, drug, and disease area.

References and funding

- NICE. Technology appraisal guidance static list [Internet]. 2022. Available from: tinyurl.com/bdfo4vcz
- SMC. Medicines advice [Internet]. 2022. Available from: tinyurl.com/2v9yvdda
- Ford JA et al., BMJ open. 2012 DOI: <http://dx.doi.org/10.1136/bmjopen-2011-000671>

This work was sponsored and funded by Roche Products Ltd. Support for medical writing/editorial assistance, provided by Arthur Robbins of Roche Products Ltd, was funded by Roche Products Ltd in accordance with Good Publication Practice (GPP3) guidelines (<http://www.ismpp.org/gpp3>). Email: sophie.guest@roche.com