

1	<p><b>Treatment &amp; Condition</b> <i>(Title)</i></p> <p>Vortioxetine for treating major depressive disorder</p>
2	<p><b>Associated appraisal body</b> <i>(NICE/SMC/Other)</i> &amp; <b>Summary of ruling</b> <i>(to include indication, restrictions, other relevant information)</i></p> <p>NICE Technology Appraisal guidance TA367 (November 2015)</p> <p>NICE has stated that Vortioxetine is recommended as an option for treating major depressive episodes in adults whose condition has responded inadequately to 2 antidepressants within the current episode.</p>
3	<p><b>Number of people in Northern Ireland expected to take up service/therapy</b> <i>(including new cases per year)</i></p> <p>The NICE costing template states potential usage as 28,000 people per year. In Northern Ireland this is equivalent to 840 users per year (3%). This may be slightly higher than this – given the higher rate of prevalence of depression in Northern Ireland.</p>
4	<p><b>Patient Access Scheme availability</b></p> <p>Not applicable</p>
5	<p><b>Costs</b> <i>(before PAS if applicable)</i></p> <p>Prescribing / medication costs are taken as ‘not additional’ given that (a) in the absence of Vortioxetine, an alternate anti-depressant (i.e. those already available) would have to be prescribed and (b) the costs of Vortioxetine is broadly comparable to existing anti-depressants that would otherwise have to be used.</p>
5.1	<p><b>Drug cost per patient per annum (for new and prevalent cases)</b></p> <p>NICE states that the individual drug cost per month is £27.72</p>
5.2	<p><b>Infrastructure costs per patient per annum</b></p> <p>No infrastructure costs anticipated</p>
5.3	<p><b>Current in year costs</b></p> <p>The associated NICE costing template indicates that no additional resources are required to implement TA 367.</p>

5.4	<p><b>Recurrent overall costs per annum</b> <i>(including additional costs)</i></p> <p>The associated NICE costing template indicates that no additional resources are required to implement TA 367.</p>
5.5	<p><b>Opportunities for cost savings and how these will be secured</b></p> <p>There are no actual cost savings anticipated as Vortioxetine adds to an existing range of antidepressants, i.e. comparable effectiveness to existing interventions and of similar cost.</p> <p>Individual prescribers are therefore likely to use Vortioxetine as a substitute for other anti-depressants which are of comparable cost.</p>
6	<p><b>Expected implementation period</b></p> <p>There are no anticipated barriers to implementation</p>
7	<p><b>Commissioning arrangements</b></p> <p>HSC Board/PHA Mental Health Commissioning Team</p>
8	<p><b>Monitoring arrangements</b></p> <p>HSC Board Medicine Management monitoring systems (facilitated by regional / local prescribing guidance and care pathway implementation / associated monitoring).</p>
9	<p><b>DHSSPS Legislative/Policy Caveats</b></p> <p>This advice does not override or replace the individual responsibility of health professionals to make appropriate decisions in the circumstances of their individual patients, in consultation with the patient and/or guardian or carer. This would, for example, include situations where individual patients have other conditions or complications that need to be taken into account in determining whether the NICE guidance is fully appropriate in their case.</p>