

1	<p>Treatment & Condition</p> <p>Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears</p>
2	<p>Associated appraisal body (NICE/SMC/Other) & Summary of ruling (to include indication, restrictions, other relevant information)</p> <p>NICE Technology Appraisal guidance TA 369 (December 2015)</p> <p>Ciclosporin is recommended as an option, within its marketing authorisation, for treating severe keratitis in adult patients with dry eye disease that has not improved despite treatment with tear substitutes.</p>
3	<p>Number of people in Northern Ireland expected to take up service/therapy (including new cases per year)</p> <p>Based on a pro rata calculation from the Resource Impact Template that accompanies TA 369, the number of people expected to take up therapy in Northern Ireland is 1444 (289 people treated with Ikervis and artificial tears and 1,155 people treated with Ikervis, artificial tears and corticosteroids).</p>
4	<p>Patient Access Scheme availability</p> <p>Not applicable.</p>
5	<p>Costs (before PAS if applicable)</p>
5.1	<p>Drug cost per patient per annum (for new and prevalent cases)</p> <p>Ciclosporin is administered as an eye drop of 1mg/ml once daily at bed time. The list price of ciclosporin is £72 for a one month pack (30 ampoules). The annual cost per patient per annum is £864.</p>
5.2	<p>Infrastructure costs per patient per annum</p> <p>There are no infrastructure requirements associated with the introduction of this therapy.</p>
5.3	<p>Current in year costs</p> <p>The service will be introduced as part of the existing ophthalmology services provided by Belfast and Western Trusts.</p>

5.4	<p>Recurrent overall costs per annum <i>(including additional costs)</i></p> <p>There will be no additional costs to introduce this service. Introduction is estimated to be cost saving. There will be savings of approximately £36k in primary care. The savings will be set against the primary care savings plan.</p>
5.5	<p>Opportunities for cost savings and how these will be secured</p> <p>Use of ciclosporin could improve a patient's quality of life and avoid some of the disadvantages of corticosteroids (cataract and glaucoma). It had the advantage of once daily administration. It is less expensive than the other treatment options for this condition. A number of patients are currently being treated using a more expensive unlicensed preparation.</p> <p>Cost savings associated with this product will be secured by promoting use of the licensed product instead of specials in primary and secondary care.</p> <p>There will be savings of approximately £36k in primary care. The savings will be set against the primary care savings plan.</p>
6	<p>Expected implementation period</p> <p>There is no impediment to immediate implementation.</p>
7	<p>Commissioning arrangements</p> <p>This therapy will be formally commissioned by HSCB initially on a cost-per-case basis.</p>
8	<p>Monitoring arrangements</p> <p>Primary care drug spend will be monitored to ensure NICE compliance and savings are released.</p>
9	<p>DHSSPS Legislative/Policy Caveats</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>