

## Treatment Appraisal: Decision Summary

Date	17 <sup>th</sup> January 2012
Appraisal	Ozurdex® dexamethasone ocular implant for uveitis
Details	The NHS North East Treatment Advisory Group was requested by the North East Retinal Group to conduct an appraisal of, and issue a recommendation for, the use of Ozurdex® within its licensed indication for the treatment of posterior segment uveitis.
Recommendation	<p><b>The NHS North East Treatment Advisory Group opted to defer its recommendation regarding Ozurdex® (dexamethasone intravitreal implant) for uveitis pending receipt of a suitable treatment protocol for use within NHS North East.</b></p> <p>The group was minded to recommend the use of Ozurdex® for uveitis providing that it is appropriately positioned in treatment pathways.</p>
Clinical evidence summary	The group was satisfied that the efficacy of a single dose of Ozurdex® for the treatment of posterior segment uveitis had been adequately demonstrated with an acceptable and manageable safety profile. However the group was concerned that the existing evidence base only amounts to a single administration of Ozurdex® when in practice patients may receive multiple sequential administrations.
Cost analysis summary	The group noted the absence of any evidence for the cost-effectiveness of Ozurdex® in uveitis although acknowledged that it delivers efficacy in terms of visual acuity on par with other high-cost ophthalmic treatments which have been determined as cost-effective for use within the NHS. The group noted the relatively high drug and administration costs although the total budget impact would be limited by small patient numbers and some potentially significant offset costs.
Financial impact PbR: Excluded	The cost of a single treatment including administration was estimated at about £1,665. Combined with a minimum dose interval of six months, the mean annual cost per eye was estimated at up to £3,330. If both eyes required treatment the maximum cost per patient per annum was estimated at £6,660. Significant offset costs could be generated where Ozurdex® was used in preference to intravitreal triamcinolone on a three monthly dose interval. The number of annual cases requiring treatment was difficult to estimate accurately. Indications from clinical teams combined with epidemiological data indicated patient numbers of about 25 to 30 within the region, or about 2 per PCT per annum. The net budget impact from use of Ozurdex® for uveitis was considered to be relatively small.
Further research or information	The group would welcome evidence relating to repeated administration and evidence for the cost-effectiveness of Ozurdex® in uveitis.

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