#### Chief Medical Officer Directorate

Pharmacy and Medicines Division



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- 1. Directors of Pharmacy
- 2. Medical Directors NHS Boards

31 March 2023

Dear Healthcare Professional,

## COVID THERAPEUTIC ALERT 2023 1 - PUBLICATION OF NICE MULTIPLE TECHNOLOGY APPRAISAL (MTA) - TREATMENT RECOMMENDATIONS FOR COVID-19

Please see the attached COVID-19 Therapeutic Alert, regarding the publication of the National Institute for Health and Care Excellence (NICE) final multiple technology appraisal (MTA) guidance [TA878], which includes positive treatment recommendations for the following licensed COVID-19 treatments:

- Nirmatrelvir plus ritonavir (Paxlovid®)
- Sotrovimab (Xevudy®)
- Tocilizumab (RoActemra®)

The published MTA does not recommend the use of casirivimab plus imdevimab (Ronapreve®).

The Scottish Medicines Consortium (SMC) collaborated with the NICE on the MTA's for these specific medicines used in the treatment of specific COVID-19 inidcations. The recommendations are also applicable to NHS Scotland and are incorporated in the SMC Collobartive Advice Document (which is also attached). Notably, two of the three medicines accepted by the SMC for routine use in NHS Scotland, Nirmatrelvir plus ritonavir (Paxlovid®) and Sotrovimab (Xevudy®), have been accepted with restrictions – more detailed information is available in the SMC guidance (attached).

All guidance for dissemination to relevant healthcare professionals for onward transmission as detailed below:-

Could all Directors of Pharmacy please forward this alert to:-

- Hospital Pharmacists
- Procurement Pharmacists







Please could Medical Directors arrange to forward this alert on to:-

- Accident & Emergency Departments
- Paediatric Critical Care
- Relevant doctors and nurses
- Infectious Disease Consultants
- Directors of Public Health
- Relevant Clinics
- Chief Executives of NHS Board

Thank you for your co-operation.

Yours sincerely

IRENE FAZAKERLEY Medicines Policy Team











## **COVID-19 Therapeutic Alert**

CEM/CMO/2023/001 29 March 2023

Publication of NICE Multiple Technology Appraisal (MTA) - Treatment Recommendations for COVID-19

#### Summary

The National Institute for Health and Care Excellence (NICE) has now published its <u>final</u> <u>multiple technology appraisal (MTA) guidance</u> [TA878], which includes positive treatment recommendation for the following licensed COVID-19 treatments:

- Nirmatrelvir plus ritonavir (Paxlovid)
- Sotrovimab (Xevudy)
- Tocilizumab (RoActemra)

The published MTA does not recommend the use of casirivimab plus imdevimab (Ronapreve).

NICE TA guidance places statutory commissioning obligations on NHS commissioners (including Integrated Care Boards (ICBs) in England). NHS commissioners, working in partnership with local NHS providers and clinicians, will need to comply with the recommendations in the MTA within 90 days of the date of its publication. Please refer to any additional country-specific guidance in Northern Ireland, Scotland and Wales. The Scottish Medicines Consortium (SMC) collaborated with NICE on the MTA TA878: casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 and as as a result the NICE MTA has standing in Scotland.

For the medicines covered in the published MTA, NICE's guidance therefore effectively supersedes (replaces) the interim UK-wide clinical access decisions determined under pandemic-specific commissioning arrangements. Consequently, these UK-wide interim clinical access policies have now become 'legacy' documents.

Clinicians may wish to refer to NICE's updated <a href="COVID-19">COVID-19</a> rapid guideline</a> for medicines licensed, and currently used, in the management of COVID-19 for which MTA recommendations have not yet been published. The off-label use of baricitinib and sarilumab in the management of COVID-19 falls outside of the scope of the MTA and will be for determination under local governance arrangements. The COVID-19 rapid guideline was informed by the interim UK wide clinical commissioning policies and therefore has standing in Scotland.

In England, the current national Blueteq (prior approval) forms for baricitinib, Paxlovid, sarilumab, sotrovimab and tocilizumab will be disabled from day 90 after publication of the NICE MTA on COVID-19 therapeutics, and any future reporting will be subject to local commissioner determination.

#### Action

Local commissioners and commissioned providers of NHS COVID treatments are asked to:

- 1. Note and fulfil the requirement to implement NICE's MTA recommendations within 90 days of its publication, particularly ensuring access to medicines subject to positive recommendations nirmatrelvir plus ritonavir (Paxlovid), sotrovimab (Xevudy) and tocilizumab (RoActemra). Please refer to any additional country-specific guidance on implementation in Northern Ireland, Scotland and Wales.
- 2. Note that final MTA treatment recommendations for molnupiravir (Lagevrio), remdesivir (Veklury) and tixagevimab plus cilgavimab (Evusheld) are unlikely to be available until later in 2023 as they are subject to appeal. In the meantime, NICE's COVID-19 rapid guideline covers the use of these medicines and remains available at the following link.
- 3. Access to baricitinib and sarilumab, as off-label treatment options falling outside of the scope of the MTA, is for local determination.

#### Distribution

- NHS Trusts (England and Northern Ireland), and NHS boards (Scotland and Wales)
- Integrated Care Boards (England)
- Primary Care (including out of hours providers)
- National / Regional Medical Directors
- National / Regional Chief Pharmacists
- Lead/Senior Pharmacists and Regional Procurement Pharmacy Leads
- Trust/Hospital Pathology Directors (to circulate to pathology networks and laboratory staff)
- Trust / Hospital Medical Directors (to circulate to medical and nursing staff managing admitted patients infected with COVID-19)

#### **Enquiries**

#### **England**

Enquiries from NHS trusts in England should in the first instance be directed to your trust pharmacy team who will escalate issues to the Regional Chief Pharmacist and national teams if required. Further information can be requested from the dedicated email address: england.spoc-c19therapeutics@nhs.net.

#### Northern Ireland

Enquiries from hospitals in Northern Ireland should in the first instance be directed to your hospital pharmacy team who will escalate issues to the Regional Pharmaceutical Procurement Service or Pharmaceutical Directorate at the Department of Health if

required Further information can be obtained by contacting RPHPS.Admin@northerntrust.hscni.net

#### **Scotland**

Enquiries from hospitals in Scotland should in the first instance be directed to your hospital pharmacy team who will escalate issues to either NHS National Procurement or the Scottish Government's Medicines Policy Team if required. Contact should be made using the following emails: <a href="mailto:nss.nhssmedicineshortages@nhs.scot">nss.nhssmedicineshortages@nhs.scot</a> or <a href="mailto:medicines.policy@gov.scot">medicines.policy@gov.scot</a>

#### Wales

Enquiries from hospitals in Wales should in the first instance be directed to the health board's Chief Pharmacist who will escalate issues to the Pharmacy and Prescribing Team at Welsh Government if required. Enquiries to the Welsh Government should be directed to: COVID-19.Pharmacy.Prescribing@gov.wales.

#### Collaborative Advice Document

SMC2552 | SMC2553 | SMC2555 | SMC2557

# casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19

### A Multiple Technology Appraisal collaboration with NICE

#### 29 March 2023

The Scottish Medicines Consortium (SMC) collaborated with the National Institute for Health and Care Excellence (NICE) on *Multiple Technology Appraisal (MTA) TA878: casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19.* Following review by the SMC Executive, SMC advises NHS boards and Area Drug and Therapeutics Committees (ADTCs) on the use of the products, below, in NHSScotland. The advice is as follows:

**ADVICE**: following SMC collaboration with NICE on *MTA TA878*: casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19.

All products have been considered within their marketing authorisations for treating people with symptomatic coronavirus disease 2019 (COVID-19) and these recommendations are valid for NHSScotland.

The recommendations of MTA TA878, based on clinical and cost effectiveness are:

SMC ID	Medicine(s)	Indication under review	SMC advice
Accepted o	r accepted for restr	icted use	
SMC2557	nirmatrelvir and ritonavir (Paxlovid®) 150mg and 100mg film- coated tablets Pfizer Limited	Treatment of COVID-19 in adults who do not require supplemental oxygen and who are at increased risk for progression to severe COVID-19	Accepted for restricted use within NHSScotland Restriction: patients with increased risk for progression to severe COVID-19, as defined in the independent advisory group report commissioned by the Department of Health

SMC2555  sotrovimab (Xevudy®)  500mg  concentrate for solution for infusion  GlaxoSmithKline UK  Treatment of symptomatic adults and adolescents (aged 12 years and over and weighing at least 40kg) with acute (COVID-19 infection who do not increased risk for progression to severe COVID-19, as defined in progressing to severe COVID infection  GlaxoSmithKline UK  Accepted for restricted use within NHSScotland Restriction: patients with increased risk for progression to severe COVID-19, as defined in the independent advisory group report commissioned by the Department of Health
and nirmatrelvir and ritonavir is contraindicated or unsuitable
SMC2552 tocilizumab (RoActemra®) 2019 (COVID-19) in adults who are receiving systemic corticosteroids and concentrate for solution for infusion  Roche Products Ltd  Treatment of coronavirus disease 2019 (COVID-19) in adults who are receiving systemic corticosteroids and receiving systemic corticosteroids and require supplemental oxygen or mechanical ventilation
Not recommended
Not recommended  SMC2553 casirivimab and Treatment of acute COVID-19 Not recommended for
Not recommended  SMC2553 casirivimab and imdevimab infection (Ronapreve®) 120mg/mL solution for injection or

Full details of the assessment and recommendations can be found at <u>Overview | Casirivimab plus imdevimab</u>, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 | <u>Guidance | NICE</u>.

This SMC advice takes account of the benefits of Patient Access Schemes (PAS) that improve the cost effectiveness of the following recommended treatments:

- sotrovimab (Xevudy®, GlaxoSmithKline UK) advice applies only in the context of an approved NHSScotland PAS arrangement delivering the cost-effectiveness results upon which the decision was based, or a PAS/ list price that is equivalent or lower
- tocilizumab (RoActemra®, Roche Products Ltd) advice applies only in the context of an approved NHSScotland PAS arrangement delivering the cost-effectiveness results upon which the decision was based, or a PAS/ list price that is equivalent or lower.

A budget impact template is provided in confidence to NHS boards to enable them to estimate the predicted budget for medicines accepted for use.

#### **Advice context:**

No part of this advice may be used without the whole of the advice being quoted in full.

This advice represents the view of the Scottish Medicines Consortium and was arrived at following collaboration with NICE on MTA TA878: casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 (dated 29/03/2023). It is provided to inform the considerations of Area Drug & Therapeutics Committees and NHS boards in Scotland in determining medicines for local use or local formulary inclusion. This advice does not override the individual responsibility of health professionals to make decisions in the exercise of their clinical judgement in the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

**Chair Scottish Medicines Consortium**