REPORT FROM CLINICAL PANEL

Title: **A12X05 Rituximab for Immunobullous Disease**

CRG: Specialised dermatology
NPOC: Internal Medicine
Lead: Ursula Peaple

Date: 16 December 2015

The Panel were presented a policy proposal for routine commissioning

Question	Conclusion of the panel	If there is a difference between the evidence review and the policy please give a commentary
<u>The population</u>		
1. What are the eligible and ineligible populations defined in the policy and are these consistent with populations for which evidence of effectiveness is presented in the evidence review?	The eligible population(s) defined in the policy are the same or similar to the population(s) for which there is evidence of effectiveness considered in the evidence review.	The panel noted that the studies in the evidence review were for a younger age group, mainly in their 40s and 50s but the epidemiology suggests that the disease extends into the elderly.
<u>Population subgroups</u>		
2. Are any population subgroups defined in the policy and if so do they match the subgroups for which there is evidence presented in the evidence review?	The population subgroups defined in the policy are the same or similar as those for which there is evidence in the evidence review.	The panel noted that the evidence review did not clearly demonstrate the case for EBA, but accepted the clinical justification doing so. The panel requested it be made clear that the policy for routine commissioning does not extend to dermatitis hepatoformis.
<u>Outcomes - benefits</u>		

3. Are the clinical benefits demonstrated in the evidence review consistent with the eligible population and/or subgroups presented in the policy?	The clinical benefits demonstrated in the evidence review support the eligible population and/or subgroups presented in the policy.	See commentary related to 1.
Outcomes – harms		
4. Are the clinical harms demonstrated in the evidence review reflected in the eligible population and/or subgroups presented in the policy?	The clinical harms demonstrated in the evidence review are reflected in the eligible population and/or subgroups presented in the policy.	The panel expressed concern regarding the safety profile of using rituximab in the elderly population and requested that a note of caution be included in the criteria for commissioning.
The intervention		
5. Is the intervention described in the policy the same or similar as the intervention for which evidence is presented in the evidence review?	The intervention described in the policy is the same or similar as in the evidence review.	
The comparator		
1. Is the comparator in the policy the same as that in the evidence review?	The comparator in the policy is the same as that in the evidence review.	
2. Are the comparators in the evidence review the most plausible comparators for patients in the English NHS and are they suitable for informing policy development?	The comparators in the evidence review include plausible comparators for patients in the English NHS and are suitable for informing policy development.	

Overall conclusions of the panel

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The policy proposition reflects the findings of the clinical evidence review and should progress.

The panel requested:

- That the patient pathway be made clearer.
- That the epidemiology & needs assessment should be reviewed to ensure that it applies equally to pemphigus and pemphigoid.
- That the policy proposition is clear that it does not cover dermatitis hepatoformis.
- That the commissioning criteria include a note of caution on using rituximab in the elderly population because of potential concerns regarding its safety.
- That the audit requirements are significantly strengthened, with clarity on what data is to be collected and how.
- That the policy working group consider carefully what governance arrangements should be put in place (including any requirement for treating clinicians to have significant expertise in the use of Rituximab) and that this is considered in the service impact assessment.

Report approved by:

J Palmer
Chair
29 December 2015