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| 1. | <p>Treatment & Condition</p> <p>Ertugliflozin as monotherapy or with metformin for treating type 2 diabetes.</p> |
| 2. | <p>Associated appraisal body & Summary of ruling</p> <p>NICE Technology Appraisal guidance TA572 (July 2019)</p> <p>Ertugliflozin is a possible treatment for type 2 diabetes in adults, on its own or with a drug called metformin. it is recommended as single therapy if:</p> <ul style="list-style-type: none"> • blood glucose levels can't be managed by diet and exercise alone • patient cannot take metformin <p>It can be used with metformin, if:</p> <ul style="list-style-type: none"> • you cannot have a sulfonylurea • you are at high risk of hypoglycaemia (low blood sugar) or its side effects. <p>If patients and their clinicians consider ertugliflozin to be one of a range of suitable treatments including canagliflozin, dapagliflozin and empagliflozin, the least expensive should be chosen. Indirect comparisons show that ertugliflozin has similar overall health benefits to canagliflozin, dapagliflozin and empagliflozin. The acquisition cost of ertugliflozin is lower than the acquisition costs of these other drugs. Ertugliflozin is therefore recommended as an option for treating type 2 diabetes as monotherapy or with metformin in line with the previous recommendations for SGLT-2 inhibitors.</p> |
| 3. | <p>Number of people in Northern Ireland expected to take up service/therapy</p> <p>As this does not appear to offer a clinical advantage over other drugs in its class (SGLT2 inhibitors); has a black triangle and is not included in the NI formulary. However, as this drug is less costly than the other SGLT2 inhibitors and experience with its use should remove the black triangle, it may be considered for inclusion in the NI formulary when that section is reviewed. It is unlikely that a significant number of people will take up this treatment.</p> |
| 4. | <p>Patient Access Scheme Availability</p> <p>Not applicable</p> |
| 5. | <p>Infrastructure Requirements</p> <p>None</p> |

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| 6. | <p>Expected implementation period</p> <p>Immediate</p> |
| 7. | <p>Commissioning arrangements</p> <p>This guidance is not expected to have a significant impact on resources; it will be approximately £163,800 per year in N Ireland (or £9,100 per 100,000 population).</p> <p>This is because the ertugliflozin is an additional option alongside current treatment options and is similarly priced to alternative treatments. Ertugliflozin is commissioned by HSCB. Providers are HSC hospital trusts, and primary care.</p> |
| 8. | <p>Monitoring arrangements</p> <p>Through usual monitoring of primary care drug budgets.</p> |
| 9. | <p>DoH (NI) 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> <p>The Rural Needs Act (NI) 2016 has been considered and this guidance, which is purely of a technical nature, is not regarded as falling within the scope of the Act.</p> |