

MID AND SOUTH ESSEX MEDICINES OPTIMISATION COMMITTEE (MSEMOC)

ADALIMUMAB, ETANERCEPT, INFLIXIMAB AND ABATACEPT FOR TREATING MODERATE RHEUMATOID ARTHRITIS AFTER CONVENTIONAL DMARDS HAVE FAILED.

NICE TA715, JULY 2021

ADALIMUMAB, ETANERCEPT, INFLIXIMAB: RED – RECOMMENDED FOR RESTRICTED USE in Secondary Care

ABATACEPT: BLACK – NOT RECOMMENDED FOR PRESCRIBING IN PRIMARY, COMMUNITY OR SECONDARY CARE

Name: generic	What it is	Licensed indications	Decision status	NICE guidance
ADALIMUMAB BIOSIMILAR; ETANERCEPT BIOSIMILAR; INFLIXIMAB BIOSIMILAR; ABATACEPT (Orencia®)	Adalimumab, etanercept and infliximab are TNF-alpha inhibitors; abatacept is a selective T-cell modulator	Rheumatoid arthritis	Final	NICE TA715 – recommended

MSEMOC recommendation:

Adalimumab, etanercept and infliximab are recommended as treatment options for moderate rheumatoid arthritis after conventional DMARDs have failed, in accordance with NICE technology appraisal recommendations. Abatacept is not recommended as a treatment option for moderate rheumatoid arthritis after conventional DMARDs have failed, in accordance with NICE technology appraisal recommendations.

[NICE TA715](#) recommendations:

- 1.1 Adalimumab, etanercept and infliximab, all with methotrexate, are recommended as options for treating active rheumatoid arthritis in adults, only if:
 - intensive therapy with two or more conventional disease-modifying antirheumatic drugs (DMARDs) has not controlled the disease well enough and
 - disease is moderate (a disease activity score [DAS28] of 3.2 to 5.1) and
 - the companies provide adalimumab, etanercept and infliximab at the same or lower prices than those agreed with the Commercial Medicines Unit.
- 1.2 Adalimumab and etanercept can be used as monotherapy when methotrexate is contraindicated or not tolerated, when the criteria in 1.1 are met.
- 1.3 Continue treatment only if there is a moderate response measured using European League Against Rheumatism (EULAR) criteria at six months after starting therapy. If this initial response is not maintained, stop treatment.
- 1.4 If more than one treatment is suitable, start treatment with the least expensive drug (taking into account administration costs, dose needed and product price per dose). This may vary because of differences in how the drugs are used and treatment schedules.
- 1.5 Take into account any physical, psychological, sensory or learning disabilities, or communication difficulties that could affect the responses to the DAS28 and make any appropriate adjustments.
- 1.6 Abatacept with methotrexate **is not recommended**, within its marketing authorisation, for treating moderate active rheumatoid arthritis in adults when one or more DMARDs has not controlled the disease well enough.

For further information refer to the relevant [Summary of Product Characteristics](#).

Providers commissioned to provide services on behalf of Mid and South Essex CCGs are reminded that they are required to follow the local joint formulary and prescribing guidance, as detailed in the medicines management service specification of their contract.

References	NICE TA715: Adalimumab, etanercept, infliximab and abatacept for treating moderate rheumatoid arthritis after conventional DMARDs have failed: https://www.nice.org.uk/guidance/ta715
Acknowledgements	Mid and South Essex CCGs Medicines Management Teams
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