Mid and South Essex Health and Care Partnership

NHS

MID AND SOUTH ESSEX MEDICINES OPTIMISATION COMMITTEE (MSEMOC)

UPADACITINIB FOR TREATING SEVERE RHEUMATOID ARTHRITIS, NICE TA665, DECEMBER 2020

RED – RECOMMENDED FOR RESTRICTED USE in Secondary Care

Name: generic (trade)	What it is	Licensed indications	Decision status	NICE guidance
UPADACITINIB prolonged-release tablets (RINVOQ®▼)	**Immunosuppressant; selective and reversible JAK inhibitor**	**Treatment of moderate to severe active rheumatoid arthritis in adult patients who have responded inadequately to, or who are intolerant to one or more DMARDs, with or without methotrexate; psoriatic arthritis; ankylosing spondylitis**	**Final**	**NICE TA665 – recommended**

MSEMOC recommendation:

Upadacitinib is recommended as an option for treating severe rheumatoid arthritis in adults in accordance with NICE technology appraisal recommendations.

NICE TA665 recommendation:

1.1 Upadacitinib, with methotrexate, is recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to intensive therapy with a combination of conventional disease-modifying antirheumatic drugs (DMARDs), only if:
- disease is severe (a disease activity score [DAS28] of more than 5.1) and
- the company provides upadacitinib according to the commercial arrangement.

1.2 Upadacitinib, with methotrexate, is recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to or who cannot have other DMARDs, including at least 1 biological DMARD, only if:
- disease is severe (a DAS28 of more than 5.1) and
- they cannot have rituximab and
- the company provides upadacitinib according to the commercial arrangement.

1.3 Upadacitinib, with methotrexate, is recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to rituximab and at least 1 biological DMARD, only if:
- disease is severe (a DAS28 of more than 5.1) and
- the company provides upadacitinib according to the commercial arrangement.

1.4 Upadacitinib can be used as monotherapy for people who cannot take methotrexate because it is contraindicated or because of intolerance, when the criteria in sections 1.1, 1.2 or 1.3 are met.

1.5 Continue treatment only if there is a moderate response measured using European League Against Rheumatism (EULAR) criteria at 6 months after starting therapy. After an initial response within 6 months, stop treatment if at least a moderate EULAR response is not maintained.

1.6 When using the DAS28, healthcare professionals should take into account any physical, psychological, sensory or learning disabilities, or communication difficulties that could affect the responses to the DAS28 and make any adjustments they consider appropriate.

1.7 These recommendations are not intended to affect treatment with upadacitinib that was started in the NHS before this guidance was published. People having treatment outside these recommendations may continue without change to the funding arrangements in place for them before this guidance was published, until they and their NHS clinician consider it appropriate to stop.

For further information refer to the Summary of Product Characteristics for upadacitinib.

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 TA665: Upadacitinib for treating severe rheumatoid arthritis: https://www.nice.org.uk/guidance/ta665
Acknowledgements	Mid and South Essex CCGs Medicines Management Teams
Version	1.0
Author	HCPMSEMOC working group
Approved by	MSEMOC; MSE Joint Committee
Date Approved	February 2021; February 2021
Review Date	February 2026 or sooner if subject to any new updates nationally