NEWS DIGEST

- OUR LATEST ARTICLE: What are the new Integrated Care Systems replacing Clinical Commissioning Groups in England and what is the impact of the delay to their implementation?
- NICE recommends CDF use of dostarlimab
- Global Blood Therapeutics' treatment for patients with sickle cell disease approved in Europe
- Institute of Cancer Research labels NICE reforms a missed opportunity

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OUR LATEST ARTICLE:
WHAT ARE THE NEW INTEGRATED CARE SYSTEMS REPLACING CLINICAL COMMISSIONING GROUPS IN ENGLAND AND WHAT IS THE IMPACT OF THE DELAY TO THEIR IMPLEMENTATION?

WHAT ARE INTEGRATED CARE SYSTEMS?

Integrated Care Systems (ICSs) are partnerships between the organisations that provide care across a geographical area with the local authorities and other local partners to coordinate the health and care services across the area.

They aim to remove previous divisions between GPs and hospitals, health and social care, physical and mental health, and between the NHS and local councils.

Each ICS will be formed of two parts: an ICS Health and Care Partnership (ICP) and an ICS NHS Integrated Care Body (ICB).

The ICB will take over the previous Clinical Commissioning Group (CCG) responsibilities and the day to day running of the ICS with responsibility for the NHS functions and budgets, as well as overseeing planning and monitoring of services taking into account the ICP plans.

Keep reading > https://bit.ly/3B3bH05

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UK: NICE RECOMMENDS CDF USE OF DOSTARLIMAB

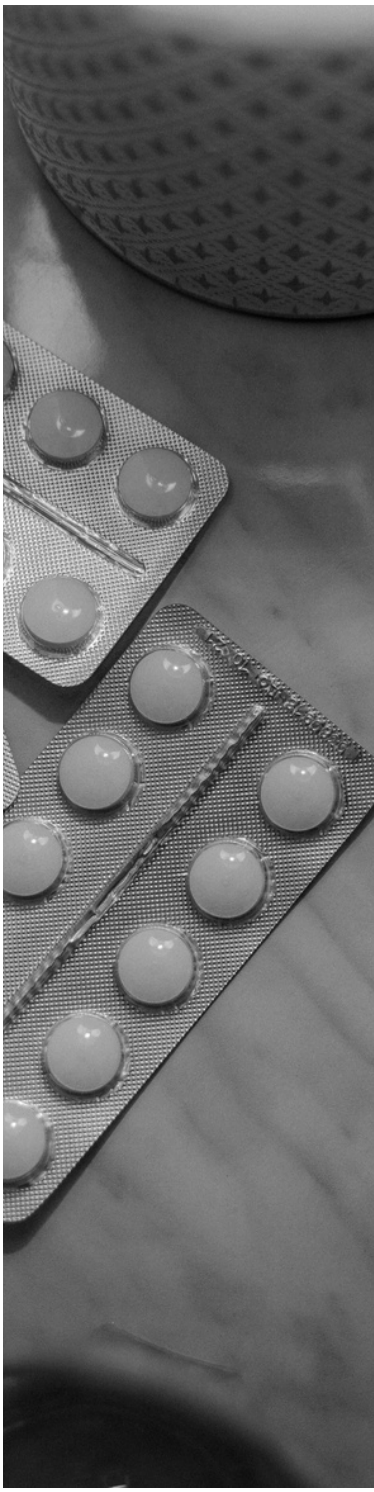
THE NEWS

The National Institute for Health and Care Excellence (NICE) has issued final guidance recommending the use in the Cancer Drugs Fund (CDF) of GlaxoSmithKline's Jemperli (dostarlimab) as a second-line treatment for endometrial cancer with high microsatellite instability or mismatch repair deficiency.

The CDF allows patients to access a new treatment while further data is collected on its clinical and cost-effectiveness, to enable NICE to make a final recommendation on its routine use in the national health service (NHS) in England.

NICE estimates that 124 patients a year will be eligible to receive dostarlimab through the NHS in England.

Blake Dark, Director for NHS England's Commercial Medicines Directorate commented, "This is another example of where the Cancer Drugs Fund (CDF) is able to fast-track the most clinically promising treatment to patients whilst further data is collected to ensure the NHS pays a price that is fair to the taxpayer.



Source: https://bit.ly/35IqMIS

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GLOBAL BLOOD THERAPEUTICS' TREATMENT FOR PATIENTS WITH SICKLE CELL DISEASE APPROVED IN EUROPE

THE NEWS

Global Blood Therapeutics (GBT) has announced the European Commission's (EC) decision to grant a marketing authorisation for Oxbryta (voxelotor) for the treatment of haemolytic anaemia caused by sickle cell disease (SCD) in adult and paediatric patients 12 years of age and older.

Under the authorisation, the treatment can be used as monotherapy or combined with hydroxycarbamide (hydroxyurea) and would be the first sickle haemoglobin polymerisation inhibitor to be approved in Europe. As a once-daily, oral treatment, Oxbryta works by increasing haemoglobin levels and reducing sickling and haemolysis.

Affecting approximately 52,000 people – primarily of Mediterranean, African and South Asian descent – SCD is one of the most prevalent genetic diseases in Europe. For those living with SCD, progressive and life-threatening complications – including damage to major organs – are common, contributing to decreased quality of life and early death.

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INSTITUTE OF CANCER RESEARCH LABELS NICE REFORMS A MISSED OPPORTUNITY

THE NEWS

The Institute of Cancer Research (ICR) has criticised the National Institute for Health and Care Excellence (NICE) for having "passed up a golden opportunity to ensure its evaluation methods support approval of the most innovative, potentially game-changing drugs".

According to the ICR, NICE's updated methods and processes for evaluating new drugs (read more about the changes here) fall short of what is needed and could even make access to cancer drugs worse.

In a statement the ICR said that it welcomes some of the changes, but that it wants to "see further consideration and movement in several important areas":

- Greater recognition of the barriers for rare diseases
- Prioritising innovative medicines
- Using surrogate measures of survival

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Paul Craddy
Managing Director & Founder

Graham Foxon
Managing Director & Founder

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