AREA PRESCRIBING COMMITTEE – Birmingham, Sandwell, Solihull and environs

Decision Making Support Tool

The following document supports the committee to consider formulary applications against defined criteria.

Formulary application reference:		APCBSSE/0042
Drug name and formulations:		Insulin degludec (Tresiba®)
Criteria	***Example***	**Committee Consensus**
Patient Safety	*Potential for abuse, toxicity, significant drug interactions*	Some evidence of reduced risk of hypoglycaemia.
Clinical effectiveness	*Established licensed product*	Non-inferior to insulin glargine.
Strength of evidence		Presented evidence was unpublished.
Cost effectiveness or resource impact	*£*	Return on investment of an increase in cost of 12-32% is unclear (compared to Lantus® and Abasaglar® respectively).
Place of therapy relative to available treatments	*1/2nd tier*	Non-inferior to insulin glargine.
National guidance and priorities	*NICE, MTRAC*	No NICE TA for insulin degludec. Accepted by SMC in August 2016 for treatment of diabetes mellitus in adults; accepted by AWMSG in October 2016 for restricted use.
Local health priorities	*CCG views*	The request patient group is too wide.
Equity of access	*Equality assessment*	Inequity in offering it to employed individuals.
Stakeholder views	*Define wider groups to be engaged*	N/A
Implementation requirements	*Requires, RICAD ESCA etc.*	N/A

Decision Summary

Resubmission is recommended to complete the information to enable a decision:	
Not approved and rationale:	Not approved for Type 2 diabetes. The APC would offer resubmission with more information such as number of patients admitted once, twice , three times a year, together with hospital days and would then reconsider the decision for Type 1 patients. Current APC criteria for use remain unchanged.

Formulary status (RAG) and rationale	
Implementation requirements:	
Implementation monitoring:	