

Tildrakizumab for treating chronic plaque psoriasis after systemic therapy [ID1060]

Consultation on the appraisal consultation document – deadline for comments 5pm on 4 January 2019 email: TACommB@nice.org.uk/NICE DOCS

	<p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.</p> <p>The Appraisal Committee is interested in receiving comments on the following:</p> <ul style="list-style-type: none"> • has all of the relevant evidence been taken into account? • are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence? • are the provisional recommendations sound and a suitable basis for guidance to the NHS? <p>NICE is committed to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relations between people with particular protected characteristics and others. Please let us know if you think that the preliminary recommendations may need changing in order to meet these aims. In particular, please tell us if the preliminary recommendations:</p> <ul style="list-style-type: none"> • could have a different impact on people protected by the equality legislation than on the wider population, for example by making it more difficult in practice for a specific group to access the technology; • could have any adverse impact on people with a particular disability or disabilities. <p>Please provide any relevant information or data you have regarding such impacts and how they could be avoided or reduced.</p>
<p>Organisation name – Stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please leave blank):</p>	<p>[British Association of Dermatologists]</p>
<p>Disclosure Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry.</p>	<p>[N/A]</p>
<p>Name of commentator person completing form:</p>	<p>[Prof Nick Levell on behalf of the British Association of Dermatologists' Therapy & Guidelines sub-committee]</p>
<p>Comment number</p>	<p style="text-align: center;">Comments</p> <p style="text-align: center;">Insert each comment in a new row.</p>

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	Do not paste other tables into this table, because your comments could get lost – type directly into this table.
1	In relation to the discussion as to whether efficacy of tildrakizumab be assessed at 12 weeks or 28 weeks, in clinical practice it is not possible to keep a patient with severe disease on a drug for 7 months in hope of efficacy which is not materialising. In reality, a decision will be made far earlier than this (e.g. 12 weeks), based perhaps on lesser degrees of response. A model allowing continuation to 28 weeks to assess PASI75 in those who achieve a partial response (e.g. PASI50) earlier may be helpful
2	Experience with TNF and IL17 inhibitors have shown how important it is in practice to have more than one agent in a therapeutic class
3	The importance of 3 monthly injections (compared with monthly injections with the other licensed drug in this class) to patients and carers should be considered

Insert extra rows as needed

Checklist for submitting comments

- Use this comment form and submit it as a Word document (not a PDF).
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Combine all comments from your organisation into 1 response. We cannot accept more than 1 set of comments from each organisation.
- Do not paste other tables into this table – type directly into the table.
- Please underline all confidential information, and separately highlight information that is submitted under 'commercial in confidence' in turquoise and all information submitted under 'academic in confidence' in yellow. If confidential information is submitted, please also send a 2nd version of your comment with that information replaced with the following text: 'academic / commercial in confidence information removed'. See the Guide to the processes of technology appraisal (section 3.1.23 to 3.1.29) for more information.
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Do not use abbreviations
- Do not include attachments such as research articles, letters or leaflets. For copyright reasons, we will have to return comments forms that have attachments without reading them. You can resubmit your comments form without attachments, it must send it by the deadline.
- If you have received agreement from NICE to submit additional evidence with your comments on the appraisal consultation document, please submit these separately.

Note: We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory committees.