## Click here to access the guidelines/NICE algorithm N&WICS - TA676 - Filgotinib monotherapy - Moderate to severe rheumatoid arthritis Before providing patient identifiable data on this form, please confirm that the patient (or in the case of a minor or vulnerable adult with the parent/legal guardian/carer) has given appropriate explicit consent for sensitive personal information on this form to be passed to the CCG and/or CSU for processing this funding request and validating subsequent invoices. Consent given: If there is more than one NICE-approved treatment available, a discussion between the responsible clinician and the patient has taken place about the advantages and disadvantages of the treatments available. This has taken into consideration therapeutic need and whether or not the patient is likely to adhere to treatment. The most appropriate, least expensive, will be chosen (taking into account administration costs, dosage and price per dose) unless an order of preference is stated in the TAs. **Patient Practice** Trust: NHS No: Name: **Patient** Consultant **Practice** Hospital Making Postcode: No: Request: Patient's **Practice** Initials and Code: DoB: Notification Contact Email (@NHS.net account ONLY) name & Address: number: Provider: Start date ☐ Private ☐ NHS of Sub-Type: Supplier: ☐ Homecare ☐ Hospital requested treatment: (if applicable) By completing this form, you confirm that you intend to use the requested medicinal product described below as agreed in the local commissioning statement. Any requests which fall outside of this use will require an individual funding request (IFR). For support regarding IFRs, please contact: norfolkicd@nhs.net For support regarding the criteria listed below, please contact: norfolknontariff@nhs.net Please indicate whether patient meets the following NICE criteria: Please tick 1. Filgotinib, with methotrexate, is recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to intensive therapy with 2 or more conventional diseasemodifying antirheumatic drugs (DMARDs), only if: ☐Yes ☐No • disease is moderate or severe (a disease activity score [DAS28] of 3.2 or more) and • the company provides filgotinib according to the commercial arrangement. 2. Filgotinib, 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 □Yes □No • they cannot have rituximab and • the company provides filgotinib according to the commercial arrangement. 3. Filgotinib, 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: ☐Yes ☐No • disease is severe (a DAS28 of more than 5.1) and • the company provides filgotinib according to the commercial arrangement. 4. Filgotinib can be used as monotherapy when methotrexate is contraindicated or if people cannot tolerate ☐ Yes ☐ No it, when the criteria in sections 1.1, 1.2 or 1.3 are met. 5. Choose the most appropriate treatment after discussing the advantages and disadvantages of the

treatments available with the person having treatment. If more than 1 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 from person to person because of differences in how the drugs are taken and treatment

☐ Yes ☐ No

| schedules.  |                  |          |
|---|------------------|----------|
| 6. Continue treatment only if there is a moderate response measured using European League Against Rheumatism (EULAR) criteria at 6 months after starting therapy. If this initial response is not maintained, stop treatment.   |                  | □Yes □No |
| 7. 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.  |                  | □Yes □No |
| 8. As per NICE guidance, treatment should normally be started with the least expensive drug (considering the dose required, price per dose and any additional administration costs).  Please confirm that the choice of drug is considered the most cost-effective treatment for this individual patient, noting that alternative treatment options recommended by NICE may be lower in cost, including the use of biosimilar medications if applicable.  Where an alternative lower cost treatment is available and has not been tried by the patient, please confirm that the clinical rationale for prescribing has been included in the patients' medical record for the purpose of auditing. |                  | □Yes □No |
| I confirm that the patient meets the criteria for treatment   |                  |          |
| Name of person completing:  | Contact Details: |          |
| Designation of person completing:   | Date:            |          |
| Trust Authorising Pharmacist  | ı                |          |
| Name: Date:   |                  |          |