

From the Chief Medical Officer
Dr Michael McBride



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

Circular HSC (SQSD) (NICE) 23/08 TA 126

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydënter Heisin
an Fowk Siccar**

Chief Executives of HSS Boards – **for distribution to:**
Directors of Public Health
Directors of Nursing
Directors of Pharmaceutical Services
Directors of Primary Care – for cascade to prescribing and GP
Advisors

Castle Buildings
Stormont Estate
Belfast BT4 3SQ
Tel: 028 9076 5615
Fax: 028 90523206
E-mail: [sgu-
niceguidance@dhsspsni.gov.uk](mailto:sgu-niceguidance@dhsspsni.gov.uk)

Chief Executives of HSC Trusts – **for distribution to:**
Medical Directors – for cascade to relevant staff
Directors of Nursing – for cascade to relevant staff
Directors of Pharmaceutical Services – for cascade to relevant
staff

Date: 1 April 2008

Community Pharmacists
General Practitioners

HSC Clinical and Social Governance Leads

Chief Executives of HSC Special Agencies and NDPBs

For Information

Chairs of HSS Boards
Chairs of HSC Trusts
Chief Executive, Regulation & Quality Improvement Authority
Chief Officers HSC Councils
Chief Executive/Postgraduate Dean, NIMDTA
Chief Executive, NIPPET
Chief Executive, NIPEC
Chief Executive, RMSC

Dear Colleagues

Technology Appraisal TA 126 – Rituximab for Rheumatoid Arthritis (refractory)

This appraisal recommends rituximab, when given together with methotrexate, as a treatment option for adults with severe active rheumatoid arthritis but only if:

- The person has already tried disease modifying anti-rheumatic drugs to treat rheumatoid arthritis. One of which must have been an anti-TNF drug, but these haven't worked or weren't suitable.
- It clearly improves the person's condition and doesn't need to be given more often than every 6 months.
- Treatment is supervised by an experienced doctor who specialises in rheumatoid arthritis.

DHSSPS advises that this appraisal guidance is valid for Northern Ireland and endorses it for implementation in HSC.

The full NICE technology appraisal is available for download at:

<http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11821>

The HSC sector also should note that;

1. The Department expects HSC organisations to put plans in place, within 3 months of the date of issue of this e-mail alert, to facilitate the implementation of this guidance.
2. This advice does not override or replace the individual responsibility of health professionals to make appropriate decisions in the circumstances of their individual patients, in consultation with the patient and/or guardian or carer. This would, for example, include situations where individual patients have other conditions or complications that need to be taken into account in determining whether the NICE guidance is fully appropriate in their case.
3. NICE has developed tools to help organisations implement this guidance. These are available at <http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11821> and include costing tools, implementation advice and audit criteria to monitor local practice.
4. This appraisal is due to be reviewed by NICE in July 2010.

Circular HSS (PPMD) (NICE)01/006 issued on 30 June 2006 provides further information on the Northern Ireland process for reviewing NICE guidance and further details on the local status of the Institute's guidance. This circular can be accessed at:

http://www.dhsspsni.gov.uk/nice_guidance_01-06.pdf



DR MICHAEL MCBRIDE
Chief Medical Officer