Northern Treatment Advisory Group

Northern (NHS) Treatment Advisory Group

Treatment Appraisal: Decision Summary

Date	2nd June 2020
Appraisal & Details	Verteporfin (Visudyne®) with photo-dynamic therapy (PDT) outside of its product license for the treatment of chronic central serous chorioretinopathy (CSCR): updated appraisal.
Recommendation	**The Northern (NHS) Treatment Advisory Group recommends the use of Verteporfin (Visudyne®) with photo-dynamic therapy (PDT) outside of its product license for the treatment of chronic CSCR for patients that fulfil the following criteria:** 1. Non resolving or recurrent CSCR 2. Minimum 6/12 duration to rule out spontaneous regression in first eye 3. Minimum duration of 4/12 if second eye involvement (i.e. try to treat earlier to preserve structural components and vision) 4. Maximum of 2 treatments (if no benefit unlikely to respond to additional treatments) 5. Patients to have FFA/ ICG confirmation of diagnosis plus OCT/ OCTA 6. Baseline vision at time of treatment and subsequently at 12 months to allow for effect monitoring The group considered that the new evidence published since NTAG last reviewed this treatment in November 2014 was sufficient to demonstrate evidence of improved vision acuity and quality of life in a condition where a small improvement can make a significant difference to patients, and where there a limited or no other treatment options.
Clinical evidence summary	Approximately five trials/reviews trials have been published which assess the patient orientated outcome of visual acuity since the previous review by NTAG in November 2014. Many published since the last review in 2014 have been retrospective studies, looking at populations treated over a number of years, which provides some statistical power to the number treated, an issue faced by the last review. However, due to the small numbers being treated, even 10 years of data within one hospital may yield fewer than 100 patients. The published studies do offer a reasonable proxy population in terms of demographics to the population which would receive treatment under this proposal: most patients are male and roughly middle-aged. The duration of symptoms varies between trials; the baseline before treatment reducing to less than 6 months (previous reviews have seen treatment starting at 6 months or greater). The overall impact on acuity across all studies is positive. Since the baseline level of acuity is widely variable, it is unsurprising that the change in acuity is also widely variable. There are also few studies with long-term follow-up, which is an important given that recurrence is a well-described part of the natural history of the disease in many cases.
Safety	No new or unexpected safety concerns arose in studies of Verteporfin in CSCR since November 2014.

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Patient Perspective	Patient impact is very difficult to quantify. Loss of vision, typically in middle-age, is distressing and has important occupational and economic implications.
Cost analysis summary	It is usually a one-off treatment, but some patients will have recurrent disease requiring further treatments: the proportion to which this applies is unclear, partly because of the heterogeneity between trial protocols. Local clinicians expect less than 10% of patients to need a second dose. Verteporfin, as Visudyne®, costs £1020 per vial (incl VAT). In addition to the cost of the drug, it is assumed that a day-case admission is required for administration by intravenous infusion followed by laser therapy. Thus, the total cost of one treatment episode is around £1360.
Financial impact **PbR: excluded**	Estimates suggest that this treatment may be suitable for between 10 and 25 patients per year. Therefore, the cost of introducing this treatment would be ~£50,000 per annum.