



Northern Treatment  
Advisory Group

## *What treatments will NTAG consider?*

*Guidance for Drug and Therapeutics / Area Prescribing Committees, and similar groups*

The Northern Treatment Advisory Group has a remit to consider drug and non-drug treatments such as medical devices and interventional procedures. It is anticipated that the majority of treatment appraisals undertaken will relate to pharmaceutical treatments. NTAG will not consider specialised commissioning treatments as they fall under the remit of NHS England. In addition, NTAG will not consider treatments for indications that have been appraised by NICE or for which NICE is due to issue guidance.

Priority will be given to treatment appraisals where there is a clear rationale and advantages from a single regional approach. Additionally, NTAG will prioritise treatments that are considered to be expensive as these often give rise to variations in access.

NTAG has available the skills and resources to conduct thorough treatment appraisals and therefore treatments that present particular problems in evidence appraisal should also be referred to NTAG. This may include non-drug treatments such as medical devices or interventional procedures.

It may also be preferable for NTAG to consider new drugs that represent a first-in-class therapeutic agent, or a new and important new indication for an existing drug, so that precedent can be established for any subsequent similar drugs and for the same indication(s).

In the absence of significant changes to the licensed indications of existing drugs NTAG would not consider less novel treatments such as 'me-too' drugs, new presentations, formulations or methods of delivery, combination products where both drugs have previously been available separately, and single enantiomers or metabolites of an existing drug.

One of the aims of NTAG is to reduce variations in access and use of treatments. Therefore if significant variations already exist or are not justified or desirable on clinical, therapeutic (including safety) or equitable grounds, it may again be preferable for NTAG to consider the treatment.

In case of doubt please contact the professional secretary via [rdtc.rxsupp@nuth.nhs.uk](mailto:rdtc.rxsupp@nuth.nhs.uk) or via the contact form on the website: [www.ntag.nhs.uk](http://www.ntag.nhs.uk)

# Should this pharmaceutical treatment be referred to the Northern Treatment Advisory Group?

Has the treatment been considered by NICE for this indication, or is NICE expected to issue a recommendation within six months of the next NTAG meeting?

No

Is the treatment a specialised commissioning treatment and therefore under the NHS England Area team remit?

No

Is the annual cost per expected to be  $\geq$  £5,000 per patient per annum OR costs £50,000 per 100,000 population.

No

Is it a genuinely novel treatment? e.g. First-in-class therapeutic agent or a significant new indication for an existing drug or for a new drug which is not first-in-class. i.e. **NOT** the following: A 'me-too' drug, change to method of delivery or formulation with the same general indication, a new combination product where both drugs have been available separately for the same general indication, an isomer or a metabolite for the same general indication as the existing product

No

Are variations in prescribing present already?

No

Are variations in use within NHS North East otherwise unjustified or undesirable on clinical, therapeutic, or equitable grounds?

No

Yes

**Refer to NICE guidance**

Yes

**Refer to NHS England guidance**

Yes

**Refer to NTAG**

NTAG also has remit to consider non-drug treatments such as medical devices and interventional procedures.  
*A financial threshold would not be applied to non-drug treatments.*

**Local decision required.**