

**SPECIALISED COMMISSIONING - CLINICAL EVIDENCE EVALUATION
CRITERIA FOR CLINICAL COMMISSIONING POLICY PROPOSITION**

URN: 1832

TITLE: Mercaptamine hydrochloride for corneal crystal deposits caused by cystinosis

CRG: Renal Services

NPOC: Internal Medicine

Date: 20/03/19

This policy is being considered for:	For routine commissioning	X	Not for routine commissioning	
Is the population described in the policy similar to that in the evidence reviewed, including subgroups?	Yes.			
Is the intervention described in the policy similar to the intervention for which evidence is presented in the evidence review?	Yes.			
Are the comparators in the evidence reviewed plausible clinical alternatives within the NHS and are they suitable for informing policy development?	Yes although it was noted that this was a aqueous comparator formulation which was used in France and may be different in the UK. Panel agreed that this was likely to be a plausible comparator for the NHS.			
Are the clinical benefits described in the evidence review likely to apply to the eligible population and/or subgroups in the policy?	Yes. However, Panel noted that the evidence based was limited as there is only data on 90 day follow up available. A reduction of photophobia was demonstrated. Panel noted that the reduced frequency of administration and storage which is likely to improve compliance was the main benefit.			
Are the clinical harms described in the evidence review likely to apply to the eligible and /or ineligible population and/or subgroups in the policy?	Yes.			
<p>The Panel should provide advice on matters relating to the evidence base and policy development and prioritisation. Advice may cover:</p> <ul style="list-style-type: none"> • Balance between benefits and harms • Quality and uncertainty in the evidence base • Challenges in the clinical interpretation and 	<p>The Panel approved the policy to progress to stakeholder testing, subject to the following amends:</p> <ul style="list-style-type: none"> - There was a typo in the CPAG Summary report to amend. - The wording on page 7 of the policy ‘As members of the PWG..’ should be removed and included in the Patient Impact Report if appropriate. 			

applicability of policy in clinical practice <ul style="list-style-type: none"> Challenges in ensuring policy is applied appropriately Likely changes in the pathway of care and therapeutic advances that may result in the need for policy review. 			
Overall conclusion	This is a proposition for routine commissioning and	Should proceed for routine commissioning	X
		Should be reversed and proceed as not for routine commissioning	
	This is a proposition for not routine commissioning and	Should proceed for not routine commissioning	
		Should be reconsidered by the PWG	

Overall conclusions of the panel

Report approved by:

[Name]

[Role]

March 2019

Post meeting note:

There was a typo in the CPAG Summary report amended. The CPAG summary report template has changed since the panel consideration so the information has been transferred into the new template and checked for accuracy.

The wording on page 7 of the policy 'As members of the PWG' was removed. The policy proposition template has changed since submission to Clinical Panel, so the information has been transferred into the new template and reference to the survey has been removed.