NHS ENGLAND SPECIALISED SERVICES

CLINICAL PANEL REPORT

Date: 19th June 2024

Intervention: osilodrostat phosphate

Indication: endogenous Cushing's syndrome (adults)

URN: 2331

Gateway: 2, Round 2

Programme: Internal Medicine

CRG: Specialised Endocrinology

Information provided to the Panel

Policy Proposition

Evidence Reviews 2331a and 2331b - completed by Solutions for Public Health

Clinical Priorities Advisory Group (CPAG) Summary Report

Clinical Panel Report April 2024

Evidence to Decision (EtD) Summary

Equalities and Health Inequalities (EHIA) Assessment

Patient Impact Assessment

Blueteq® Forms – Adult and Medicines for Children initiation and continuation

Policy Working Group (PWG) Appendix

This Policy Proposition recommends the use of osilodrostat phosphate in adults with endogenous Cushing's syndrome. Osilodrostat phosphate is licensed for this indication.

This proposition had previously been considered by Clinical Panel members in April and It was agreed that further consideration was needed by the Policy Working Group (PWG) regarding the focus of the proposition, amongst other listed amendments required.

The revised proposition and the supporting documentation were considered by Clinical Panel members. Each of the amendments and responses to Panel's requests were considered to be appropriate and provided clarification. An amendment to the Medicines for Children prior approval form needs to be made.

EHIA – no further amendments requested.
PIA – no amendments requested.

Recommendation

Clinical Panel recommends that this proposition progresses as a routine commissioning policy proposition

Why the panel made these recommendations

Panel members agreed that the amendments and areas for clarification had been appropriately and clearly addressed.

Documentation amendments required

Blueteq®

- The Medicines for Children form needs revising to align with the updates made to the adult form.

Declarations of Interest of Panel Members: None received.

Panel Chair: James Palmer, Medical Director, Specialised Services

Post Panel Amendments

Following Clinical Panel, the Medicines for Children Blueteq form was updated to detail the continuation-funding criteria. The form now explicitly defines treatment response using biochemical thresholds (mean 24-hour urinary free cortisol), distinguishes between complete, partial and absent response, and now clarifies that patients demonstrating a partial response are eligible for continuation, this broadens the continuation criteria in line with the adults blueteq form.