Position Statement

Adacolumn (Leukocyte Apheresis) in patients with moderate to severe for Ulcerative Colitis

Background

NWL CCG Policy Development Group (PDG) considered a business case for the use of Adacolumn (Leukocyte Apheresis) in patients with moderate to severe Ulcerative colitis.

Adacolumn is adsorptive type extracorporeal leukocyte apheresis device that selectively removes granulocytes and monocytes/macrophages that promote inflammation. The device is used in outpatient setting. The process includes a simple venopuncture in one arm for blood access. Blood then passes through Adacolumn, activated granulocytes and monocytes/macrophages are removed. Blood returns to patient via venopuncture in other arm.

The device was proposed for patients with

- With chronic inflammatory bowel disease who have failed first and second line treatments such as corticosteroids and immunosuppressant
- Where Biologics and Vedolizumab are contraindicated, not tolerated or has been ineffective
- where surgery is not suitable due to old age, young age, childbearing age and or if a patient refuses surgery

Policy Development Group (PDG) Discussion

The Policy Development Group (PDG) reviewed the proposal and noted that the clinical evidence presented was a small single-arm study and therefore concluded that the evidence base was limited. It was noted that the NICE had not issued updated guidance about the use of Adacolumn since 2005, when it had been deemed as not clinically or cost effective. In addition it was noted that there were no guidance issued from British Society of Gastroenterology on the use of this device.

The PDG agreed that the cohort of patients likely to be impacted by this device was potentially larger than described in the business case particularly if it were to be offered as a choice in place of biologics and surgery.

PDG noted that the costing in the business case was not representative of a health economic modelling analysis and therefore it was not possible to determine if this treatment was cost efficient.

CCG Position and Rationale

The business case has been declined on the basis that there was insufficient evidence available to demonstrate the clinical effectiveness and cost effectiveness for the use Adacolumn in patients with moderate to severe Ulcerative colitis.