

## MODERATE TO SEVERE PLAQUE PSORIASIS BIOLOGIC TREATMENT PATHWAY IN ADULTS

Patients must be treated by a consultant dermatologist and the psoriasis must have failed to respond to standard systemic therapies including: ciclosporin, methotrexate and PUVA or the patient is intolerant as per [NICE CG 153 \(updated Sept 17\)](#). Identify comorbidities (CV risk assessment). Offer / sign post to advice healthy lifestyle information, lipid modification, smoking cessation, weight management, increase in physical activity or treatment of depression in addition to offering medication. See overleaf for local resources.

The treatment options below are all approved to be used under certain criteria as set out by NICE. For some patients the choice of biologic will be driven by co-morbidities such as heart failure, demyelination, pregnancy & infection risk. **If patients and their clinicians consider that there is a range of suitable options, the least expensive option should be chosen.**

### Severe Disease: PASI ≥ 10 and DLQI ≥ 10

#### PREFERRED 1<sup>ST</sup> LINE INJECTABLE OPTION:

<b>ADALIMUMAB BIOSIMILAR</b> <span style="background-color: #00FFFF;">TNF inhibitor</span> Prefilled syringe 40mg	HOME CARE PAS discount <a href="#">NICE TA 146</a>
<b>Dose:</b> 80mg loading then 40mg every other week	16 wk review
<b>1<sup>st</sup> line</b> unless contraindicated e.g. Hypersensitivity, heart failure, TB/active infection, demyelinating disorder	

#### PREFERRED 2<sup>ND</sup>/3<sup>RD</sup> LINE INJECTABLE OPTIONS:

ETANERCEPT BIOSIMILAR <span style="background-color: #00FFFF;">TNF inhibitor</span>	TILDRAKIZUMAB <span style="background-color: #00FFFF;">IL23</span>	RISANKIZUMAB <span style="background-color: #00FFFF;">IL23</span>	GUSELKUMAB <span style="background-color: #00FFFF;">IL23</span>	BRODALUMAB <span style="background-color: #00FFFF;">IL17RA</span>	CERTOLIZUMAB <span style="background-color: #00FFFF;">TNF inhibitor</span>
Prefilled syringe 50mg <b>Dose:</b> 50mg weekly HOME CARE PAS discount <a href="#">NICE TA 103</a>	Prefilled syringe 100mg <b>Dose:</b> 100mg OR 200mg (high disease burden/>90kg) weeks 0, 4 and then every 12 wks HOME CARE PAS discount <a href="#">NICE TA 575</a>	Prefilled syringe 75mg <b>Dose:</b> 150mg weeks 0, 4 and then every 12 weeks HOME CARE PAS discount <a href="#">NICE TA 596</a>	Prefilled syringe 100mg <b>Dose:</b> 100mg weeks 0, 4 and then every 8 weeks. HOME CARE PAS discount <a href="#">NICE TA 521</a>	Prefilled syringe 210mg <b>Dose:</b> 210mg weeks 0, 1 and 2, then every 2 weeks. HOME CARE PAS discount <a href="#">NICE TA 511</a>	Prefilled syringe 200mg <b>Dose:</b> 400mg weeks 0, 2 and 4, then 200mg every 2 weeks. HOME CARE PAS discount <a href="#">NICE TA 574</a>
12 wk review	28 wk review	16 wk review	16 wk review	12 wk review	16 wk review

#### OTHER OPTIONS (use after above options tried/failed/contra-indicated):

IXEKIZUMAB <span style="background-color: #00FFFF;">IL17A</span>	SECUKINUMAB <span style="background-color: #00FFFF;">IL17A</span>	USTEKINUMAB <span style="background-color: #00FFFF;">IL12 &amp; 23</span>
Prefilled syringe 80mg Dose 160mg wk 0 then 80mg every 2 wks to wk 12. Then 80mg monthly HOMECARE PAS discount <a href="#">NICE TA 442</a>	Prefilled syringe 150mg Dose: 300mg (2 x 150mg) at weeks 0, 1, 2, 3 and 4, then monthly HOME CARE PAS discount <a href="#">NICE TA 350</a>	Prefilled syringe 45mg/90mg Dose: 45mg OR 90mg loading dose at 0 & 4 weeks then 12 weekly HOME CARE PAS discount <a href="#">NICE TA 180</a>
12 wk review	12 wk review	16 wk review

#### ORAL OPTIONS: Can be used PRE or POST injectable biologics. (Less effective and cheaper than injectable) biologics.)

Dimethyl Fumarate (Skilarence®) Fumaric Acid Ester Tablets	APREMILAST <span style="background-color: #00FFFF;">PDE-4 inhibitor</span> Tablets
wk 1: 30mg OD wk 2: 30mg BD wk 3: 30mg TDS wk 4: 120mg OD wk 5-10: Increase by 120mg per week, max 720mg/day. <a href="#">NICE TA 475</a>	Dose: 10mg daily increase to 30mg twice daily over 5 days HOME CARE PAS discount <a href="#">NICE TA 419</a>
Review after 16 weeks	

#### Very severe disease: PASI ≥ 20 & DLQI ≥ 18

INFLIXIMAB BIOSIMILAR <span style="background-color: #00FFFF;">TNF inhibitor</span>  <span style="background-color: #FFFF00;">IV Infusion</span>
Dose: 5mg/kg IV infusion initially and at 2 and 6 weeks then every 8 weeks. PAS discount <a href="#">NICE TA 134</a>
10 wk review

**SECOND LINE INJECTABLE TREATMENT:** For patients who do not respond to a first line injectable treatment (1<sup>st</sup> or 2<sup>o</sup> failure) an alternative second line treatment may be considered (use the least expensive biologic that suits the patient) where patient meets the NICE eligibility criteria.

**THIRD LINE INJECTABLE TREATMENT ONWARDS:** For adults in whom there is an inadequate response to a second biological drug, seek supra-specialist advice from a clinician with expertise in biological therapy (CG153).

**Use of ORAL biological agents after injectable biologics:** NICE TA475 for dimethyl fumarate states that this drug is cost-effective when used in patients where biologics and apremilast are not effective or not tolerated (i.e. where best supportive care is the only option). NICE TA419 for apremilast states that this drug is a cost-effective for people for whom best supportive care is the only option, that is, if biological therapies are not tolerated or have failed.

**Assessing response:** If a 75 % reduction in the PASI score from when treatment started (PASI 75) OR a 50% reduction in the PASI score (PASI 50) AND a 5-point reduction in DLQI from when treatment started is NOT achieved then **DISCONTINUE** treatment.

**Dose escalation:** Dose escalation or increase in frequency of administration outside of NICE will need approval by the commissioner via the IFR process. The only exceptions are:

**Increase to adalimumab 40mg weekly-** This is outside of NICE, but within license. This does not require an IFR as it does not generate an additional cost to the commissioner. **Please note the additional cost pressure will lie with the prescribing Trust, seek agreement from your individual Pharmacy teams before prescribing.**

**Increase of ustekinumab from 45mg to 90mg 12 weekly-** This is not within the license for pts under 100kg, but as the 45mg and 90mg vial are the same price, this would be the recommended dose strategy for unresponsive pts (as per British Assoc. Dermatologists). This does not require an IFR.

## **MODERATE TO SEVERE PLAQUE PSORIASIS BIOLOGIC TREATMENT PATHWAY IN ADULTS**

### **Weight loss services/referrals:**

**Tier 1 & 2 services: Wiltshire Weight Management Pathway:** <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1680>

**NHS Wiltshire CCG: Tier 3 and 4 services:**

[https://www.nbt.nhs.uk/sites/default/files/North%20Bristol%20Centre%20for%20Weight%20Loss,%20Metabolic%20&%20Bariatric%20Surgery%20-%20Information%20for%20GPs%20\(November%202014\).pdf](https://www.nbt.nhs.uk/sites/default/files/North%20Bristol%20Centre%20for%20Weight%20Loss,%20Metabolic%20&%20Bariatric%20Surgery%20-%20Information%20for%20GPs%20(November%202014).pdf)

**NHS Wiltshire CCG Weight Management on referral - Eligibility & Referral Guidance:** <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1681>

**Wiltshire Council Health Improvement Services:** <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1682>

**NHS BaNES CCG: Passport to Health programme,** Health Improvement Services, The Bungalow, 11 Park Road, Keynsham. Tel 01225 831852

**NHS Swindon:** Live Well Swindon Hub - contact 01793 465513 or email [livewell@swindon.gov.uk](mailto:livewell@swindon.gov.uk) or [livewellswindon@nhs.net](mailto:livewellswindon@nhs.net)

<http://www.swindonccg.nhs.uk/index.php/your-health>

### **Stop smoking services:**

NHS Wiltshire CCG: <http://www.wiltshirestopsmoking.co.uk/>

NHS BaNES CCG: <http://www.virgincare.co.uk/vc-providers/bnes-stop-smoking-support/>

NHS Swindon CCG: [https://www.swindon.gov.uk/info/20024/health\\_and\\_wellbeing/217/stop\\_smoking](https://www.swindon.gov.uk/info/20024/health_and_wellbeing/217/stop_smoking)

### **Psychological support self-referral courses:**

NHS Wiltshire CCG: <https://iapt-wilts.awp.nhs.uk/>

NHS BaNES CCG: <https://iapt-banes.awp.nhs.uk/resources/useful-links/>

NHS Swindon CCG: <https://lift-swindon.awp.nhs.uk/>

### **Links for CCG Prior approval forms & Individual Funding Requests:**

NHS Wiltshire CCG: <http://www.wiltshireccg.nhs.uk/what-we-do-and-dont-fund>

NHS BaNES CCG: <http://www.bathandnortheastsomersetccg.nhs.uk/documents/what-we-do-and-dont-fund>

NHS Swindon CCG: <http://www.swindonccg.nhs.uk/index.php/about-us/what-we-do-and-don-t-fund>

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NHS Swindon CCG: <http://www.swindonccg.nhs.uk/index.php/about-us/what-we-do-and-don-t-fund>

NICE resources: <https://www.nice.org.uk/guidance/conditions-and-diseases/skin-conditions/psoriasis>

**Please note that this will be regularly updated as & when new NICE TAs are published for other drugs indicated for psoriasis.**