

Creating focus on a group of Rheumatoid Arthritis (RA) patients with specific treatment needs

Problem



Drug with mode of action on IL6 positioned as last-line of therapy 'when cheaper options have failed' despite evidence of benefit in patients with co-morbidities

Current behaviour



Low-cost biosimilar anti-TNF α treatments encouraged and used as first-choice in all cases irrespective of co-morbidities

Expert opinion (rheumatology, pharmacy, commissioning)



There are cohorts of patients who need greater consideration and different drug MOAs will help them achieve outcomes



Consensus achieved



163 responses

6 recommendations

Including the definition of the 'complex RA' patient

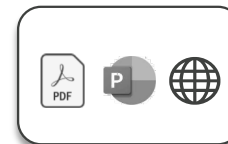
"Treatment choice should be driven by individual needs **rather than by cost alone.**

Using the **right drug at the earliest point in the pathway** is considered to be a cost-effective strategy in patients with complex RA "

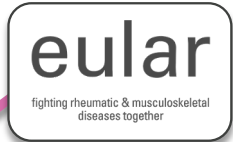
Implementation plan

Integrated Care Pathway developed to support commissioning

Multi-format content for promotion, PR & Med Ed



Poster presentation at European Society



Leading to

Re-focused value story