NHS
Buckinghamshire
Clinical Commissioning Group

Reference: FOI 26020 BUCKS 14Y

Subject: Rituximab

I can confirm that the CCG does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
1. Do you have local clinical pathways or standard operating procedures (SOPs) for the use of MabThera? If so are you able to share these? For instance, is one cycle of MabThera intravenous (IV) always used before initiating the patients on MabThera subcutaneous (SC) in oncology indications?	The CCG can confirm that it does hold this information, but are exempting it under Section 21 Freedom of Information Act 2000 as it is reasonably accessible by other means. This is an absolute exemption. I have provided you with a link to our website which will provide you with this information: http://www.bucksformulary.nhs.uk/chaptersSubDetails.asp?FormularySectionID=8&SubSectionRef=08.02.03&SubSectionID=A100&drugmatch=2176#2176
2. Number of patients treated* using MabThera subcutaneous versus MabThera intravenous in oncology indications between 2016-2018, if only partial data is available please indicate the timeframe the data refers to:	

	Oncology		
	BHT hold this data		
	Financial Year	**Number of patients treated using MabThera Intravenous** ***(if possible, please provide number of patients excluding those who were switched to MabThera subcutaneous)***	**Number of patients treated using MabThera Subcutaneous**
	FY 2016-17	Buckinghamshire CCG does not hold this information. Buckinghamshire Healthcare NHS Trust may be able to provide you with this information. If you would like to redirect you Freedom of Information request please follow the link: Buckinghamshire Healthcare NHS Trust	
	FY 2017-18		

***if number of patients treated is not available please provide information in units that you have available (e.g. vials, preparations…)**

3. Total number of patients treated* with MabThera (intravenous and subcutaneous) vs Rixathon vs Truxima in oncology and rheumatology indications between 2016-2018, if only partial data is available please indicate the timeframe the data refers to:	
Please see the response to question 2.	
4. Do you have local clinical pathways or standard operating procedures (SOPs) for the initiation of new patient treatment regimens? If so are you able to share these?	The CCG can confirm that it does hold this information, but are exempting it under Section 21 Freedom of Information Act 2000 as it is reasonably accessible by other means. This is an absolute exemption. I have provided you with a link to our website which will provide you with this information: http://www.bucksformulary.nhs.uk/chaptersSubDetails.asp?FormularySectionID=8&SubSectionRef=08.02.03&SubSectionID=A100&drugmatch=2176#2176

5. Specifically, are new patients directly prescribed biosimilar rituximab (i.e. Truxima or Rixathon) instead of MabThera?	Please see the response to question 2.
6. Are existing patients being switched from MabThera intravenous to biosimilar rituximab (i.e. Truxima or Rixathon)? If so is there a set point in their treatment pathway when patients are switched and how is this managed?	Please see the response to question 2.
7. Are any existing patients being switched from MabThera subcutaneous to biosimilar rituximab (i.e. Truxima or Rixathon)? If so is there a set point in their treatment pathway when patients are switched and how is this managed?	Please see the response to question 2.
8. Number of patients treated* using rituximab biosimilars (Truxima and Rixathon) instead of MabThera (intravenous and subcutaneous) between 2016-2018, if only partial data is available please indicate the timeframe the data refers to:	
Please see the response to question 2.	
9. As an organisation, are you aware of any financial savings made by using biosimilar rituximab (i.e. Truxima or Rixathon) vs MabThera between 2017-2018, if only partial data is available please indicate the timeframe the data refers to and the methods used to calculate the financial savings.	
Please see the response to question 2.	

10. Please provide information on the current contracts for Truxima, Rixathon, MabThera intravenous (IV) or subcutaneous (SC):	
Please see the response to question 2.	
11. Related to question 10, if contracts are tiered by volume, could you please provide the thresholds for each tier and what is the price percentage difference between tiers?	Please see the response to question 2.

The information provided in this response is accurate as of 04 May 2018, and has been authorised for release by Robert Majilton, Deputy Chief Officer and Director of Sustainability & Transformation for NHS Buckinghamshire CCG.