

Select Committee for Adult Health and Social Care

Report of the Director of Governance and Community Engagement

Treatment of Age Related Mascular Degeneration

Purpose of Report

1. This report provides information following a request from the Committee, on the provision of treatment for Age Related Mascular Degeneration.

Background

2. Age-related macular degeneration (AMD) is an eye condition that is characterised by irreversible damage to the central part of the retina, the macula, resulting in progressive loss of central vision. AMD can affect people as young as 50 years of age, although the vast majority of cases arise among those over 70. AMD can occur in both eyes, although one eye may be affected before the other. Peripheral vision is not affected and individuals therefore retain some vision, but many tasks of daily living - such as reading, recognising faces, cooking and driving are affected. It accounts for 48.5% of those registered blind in the UK. (Owen, Fletcher, Donoghue & Rudnicka, 2003).
3. There are two forms of AMD. Dry AMD usually develops very slowly, often over years, and accounts for about 90% of all cases. The remaining 10% of cases are wet AMD, but this form accounts for 90% of the blindness associated with the disease (Bolam B. 2006).
4. Dudley PCT provision for the treatment of Wet Age-related Macular Degeneration, from the 1st of August 2008, covers all patients who meet clinical criteria when they see their consultant. They will receive funding for Lucentis, which is licensed as Ranibzunamb, for the treatment of this type of Age-related Macular Degeneration (AMD). Consultants at Dudley Group of Hospitals will be contacting patients they have recently seen to reassess their condition against this policy.
5. The policy decision with regards to Age Related Mascular Degeneration has been made in accordance with our Commissioning Framework and Strategy principles. **NICE Guidance has now been released therefore this is an interim position whilst we undertake the necessary review to implement the full NICE guidance.**
6. The primary aim of Dudley PCT is to ensure that Dudley residents have access to services that meet their health needs. We have made a significant effort to engage with people to establish a prioritisation framework for commissioning, to ensure

that policy decisions such as these are well informed and we are responsive to the needs of our community.

7. In developing our Commissioning Framework we carried out extensive engagement with patients, service users, carers, community groups and representatives and health and care professionals. This included the 'Think Tank' deliberative events held in summer 2007, which used scenario planning techniques to engage people in thinking about future health service decisions. A series of structured discussions were also held with a range of stakeholders whose views were also recorded.
8. A formal consultation was then carried out through the Autumn and Winter of 2007 on the draft 'Commissioning Framework and Strategy' which set out our commissioning principles, processes and decision making procedures. This document was developed jointly with Dudley MBC and the Overview and Scrutiny Committee were consulted as part of this process.
9. We are following the agreed Commissioning Framework to make policy decisions in relation to our services and treatment, to ensure that our processes are open and transparent, with consistency in our resource allocation for our community. In the absence of guidance from NICE we are using clinical criteria as it becomes available. The processes of assurance and clinical quality that are required to produce such criteria mean that we have to remain responsive to emerging best practice.
10. Patients with these health needs meeting the clinical criteria will be able to access the treatment by means of a referral from their GP, with immediate effect. Patients are being encouraged to contact their GP if they have any specific issues around their eyesight to enable the condition to be assessed. GPs are not able to obtain the current data necessary for an appropriate diagnosis from historic patient records therefore it is necessary for patients to visit to explain their individual symptoms in order for a diagnosis and relevant treatment plan to be made.
11. Similarly, we have worked closely with the Dudley Group of Hospitals who are also fully committed to reviewing patients that have recently been seen to assess their condition against the agreed clinical criteria now established. Dudley Group of Hospitals will now be using the criteria for new patients, in the interim period whilst we are waiting for further guidance from NICE.
12. The interim clinical criteria for treatment with Lucentis (Ranibizumab) follows:

Ranibizumab is available as an option for treatment of Wet-age related Macular Degeneration (WMD) if all of the following circumstances apply:

Criteria for patient eligibility:

- Visual acuity in both eyes of 6/12 or worse

Criteria for eye to be treated:

- The best-corrected visual acuity is between 6/12 and 6/60.
- There is no permanent structural damage to the central fovea.
- The lesion size is less than or equal to 12 disc areas in the greatest linear dimension

- There is evidence of recent presumed disease progression (blood vessel growth, as indicated by fluorescein angiography, or recent visual acuity changes).
- If both eyes are effected with WMD and meet the above criteria, the better seeing eye will be treated.
- Treatment of a second eye will be funded if the first treated eye deteriorates below 6/60 and the second eye subsequently fits the above criteria.

This interim criteria will be reviewed against the NICE guidelines and updated as necessary.

Finance

13. The cost of treatment is between £11,000 and £15,000 per patient per year.

Law

- 14 Not applicable.

Equality Impact

15. The Joint Commissioning Framework and Strategy sets out the principles and processes for health and care service provision in Dudley. This has been developed with extensive engagement of communities in Dudley, including patients, service users, carers and families. The health needs assessment carried out jointly with Dudley council made specific reference to equality and diversity, including Black and Minority Ethnic communities, people with disabilities, and other marginalised or vulnerable members of our society.

Recommendation

8. It is recommended that:-

- The report is noted.

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List of Background Papers

- Dudley PCT and Dudley MBC (2008) Joint Commissioning Framework and Strategy