NHS
Coventry and Warwickshire
Integrated Care Board

Commissioning Policy

Infliximab in Crohn's Policy

Reference Number:	This will be applied to all new ICB-wide PPSs by the Governance and Corporate Affairs Team and will be retained throughout its life span.
Version:	Version 1.0
Name of responsible Committee and date approved or recommended to Integrated Care Board Board:	Audit Committee
Date approved by the Integrated Care Board (if applicable):	1 July 2022
Next Review Date:	1 April 2024
Expiry Date:	1 October 2024
Name of author and title:	Altaz Dhanani, ICB
Name of reviewer and title:	Angela Brady, Chief Medical Officer, ICB
Department:	Corporate Office

VERSION HISTORY

Date	Version	Changes made to previous version	Consulting and Endorsing Stakeholders, Committees / Meetings / Forums etc.

Date:	April 2020
Requested Intervention:	Infliximab 5mg/kg every 6 weeks in patients with Crohn's disease who have not responded to standard dosing
ICB decision:	Infliximab 5mg/kg every 6 weeks is approved as an alternative to infliximab 10mg/kg every 8 weeks in patients who initially responded to 5mg/kg every 8 weeks but lost response. Any dose increase must be agreed at the MDT meeting and documented in the patient's clinical notes.
Evidence Summary:	As per British Society Gastroenterology (BSG) Guidelines for the management of inflammatory bowel disease in adults
Criteria for Use (if applicable):	• Initial response to infliximab 5mg/kg every 8 weeks • Dose escalation approved at MDT meeting and documented in patient's notes • Regular monitoring of objective criteria e.g. Faecal calprotectin (FCP) to assess response • Regular drug & antibody levels including documentation in patient notes • Regular review via MDT forum including consideration of stepping dose back down
Discontinuation:	• Adverse event due to infliximab **or** • No evidence of therapeutic benefit after dose adjustment
Further Information	An audit will take place prior to the policy review date to ensure compliance with this policy and to assess patient response. This policy will be reviewed in light of new evidence or guidance. **Prior approval from the Integrated Care Board will be required before any treatment proceeds in secondary care unless an alternative contract arrangement has been agreed with the ICB that does not necessitate the requirement of prior approval before treatment.**

Equality Impact Assessment

Organisation	AGEM CSU	Department	Medicines Optimisation	Name of lead person	Jas Sagoo

Piece of work being assessed	Infliximab in patients with Crohn's disease who have not responded to standard dosing regime
Aims of this piece of work	To provide a policy and criteria for patients requiring Infliximab in the above circumstances

Date of EIA	April 2020	Other partners/stakeholders involved	Secondary care clinicians, Trust MO Pharmacist

Who will be affected by this piece of work?	Patients requiring treatment with Infliximab in the above circumstances

Single Equality Scheme Strand	**Baseline data and research on the population that this piece of work will affect.** What is available? E.g. population data, service user data. What does it show? Are there any gaps? Use both quantitative data and qualitative data where possible. **Include consultation with service users wherever possible**	**Is there likely to be a differential impact?** Yes, no, unknown
Gender	All clinical decisions are based on extensive research and apply to all patients regardless of gender, race, disability, age, religion or belief, sexual orientation, gender identity, social deprivation or caring responsibility	No
Race		
Disability		
Religion/ belief		
Sexual orientation		
Age		
Social deprivation		
Carers		
Human rights	Will this piece of work adversely impact on anyone's human rights?	No