1. Recommendations:

1.1 Etelcalcetide is recommended as an option for treating secondary hyperparathyroidism in adults with chronic kidney disease on haemodialysis, only if:
   • treatment with a calcimimetic is indicated but cinacalcet is not suitable and
   • the company provides etelcalcetide with the discount agreed in the patient access scheme.

1.2 This guidance is not intended to affect the position of patients whose treatment with etelcalcetide was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop.

2. Comments:

2.1 Has all of the relevant evidence been taken into account?

The evidence is detailed in the committee papers and the committee discussion as detailed in the ACD. I feel that all appropriate evidence has been taken into account.

2.2 Are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence?

The clinical effectiveness documentation is accurate and reflects the discussions which took place. The cost effectiveness discussions have also been accurately documented.

2.3 Are the recommendations sound and a suitable basis for guidance to the NHS?

The recommendations allow the use of calcimimetics in patients with secondary hyperparathyroidism when indicated as determined by the nephrologist. I agree that calcimimetic use should not be determined by exact PTH or calcium levels as each patient is individual and the indication depends on the ability to manage the hyperparathyroidism with first line agents.

The recommendations are suitable for guidance within the NHS.
2.4 Are there any aspects of the recommendations that need particular consideration to ensure we avoid unlawful discrimination against any group of people on the grounds of race, gender, disability, religion or belief, sexual orientation, age, gender reassignment, pregnancy and maternity?

I am not aware of, nor can I identify, any aspects of these recommendations which would lead to unlawful discrimination.