



THE ROYAL COLLEGE OF  
OPHTHALMOLOGISTS'

## *COLLEGE STATEMENT*

### **NICE guidance TA 301 – Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema after inadequate response to prior therapy (rapid review of technology appraisal guidance 271)**

The Royal College of Ophthalmologists welcomes the recent recommendation by NICE on the use of flucinolone acetonide ( Iluvien® ) in a group of patients with diabetic macular oedema (DMO) <sup>1</sup>. Patients can be considered for treatment with fluocinolone acetonide intravitreal implant provided that they are pseudophakic and have persistent diabetic macular oedema which has been chronic despite prior therapy.

Iluvien® is a non-degradable implant which releases the active corticosteroid drug, flucinolone acetonide in the vitreous cavity for up to three years following a single intravitreal injection procedure. This will be a great advantage to those patients who have persistent DMO despite previous macular laser photocoagulation or intravitreal anti-VEGF therapy. It is also recognised that, although repeated intravitreal injections is not needed after the initial injection of fluocinolone implant, regular monitoring for raised intra-ocular pressure is necessary.

There is a costing tool with TA301 to help hospital eye departments with the implementation of this technology within a three month period by 28<sup>th</sup> February 2014<sup>2</sup>.

#### **References**

1)TA 301 NICE guidance  
<http://guidance.nice.org.uk/TA301>

2)TA301Costing Template  
<http://guidance.nice.org.uk/TA301/CostingTemplate/xls/English>