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Expanding access to the weight loss drug tirzepatide – FAQs



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This document contains frequently asked questions (FAQs) we anticipate will arise following an announcement from NICE around its technology appraisal (TA) for the drug tirzepatide. The purpose of this document is to provide early information to support ICBs to understand the implications of the NICE decision and will be followed up with more detailed information at a later stage. It also includes patient facing FAQs to help ICBs and providers respond to questions from patients and the public around access to the drug.

NICE technology appraisal for tirzepatide: Frequently asked questions for integrated care boards (ICBs)

1. What is the impact of the NICE decision on tirzepatide for the management of obesity?

- For the first time in England, people aged 18 and over who are living with obesity and have a body mass index (BMI) of more than 35 and one qualifying weight related comorbidity will have access to the weight loss drug tirzepatide, either through a specialist weight management service or primary care. There is a lower BMI threshold for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean ethnic backgrounds (usually reduced by 2.5 kg/m2).
- NHS England will engage with relevant clinical and professional bodies to establish which weight related comorbidities NHS England will prioritise. Further information early next year.

2. What are the recommendations from the NICE announcement?

It is estimated that around 3.4 million people in England are eligible for the drug. The roll out of tirzepatide will have to be carefully managed to ensure healthcare professionals can continue to meet the full range of health needs of all their patients. Initially, only those with the highest clinical need will be prioritised to receive the medication while the NHS tests a variety of new services to care for people living with obesity. This will include prioritising people who are already receiving care in specialist weight management services (SWMS). Patients will be able to access tirzepatide, where clinically appropriate,

within 90 days of NICE's final guidance being published in SWMS and 180 days in primary care.

- NHS England is engaging with relevant clinical and professional bodies to develop the
 patient prioritisation approach and will issue interim commissioning guidance in 2025.
- NICE will evaluate the implementation and delivery of tirzepatide over the next 3 years to
 determine how the scaling and phasing should progress and to inform further NICE
 guidance around whether access to tirzepatide can be expanded rapidly by the NHS.

3. How does this influence the weight management pathway?

- NICE will publish the overweight and obesity management guidelines alongside the NICE TA guidance for tirzepatide. The introduction of tirzepatide into primary care settings will influence current services and change the future of weight management pathways. ICBs should consider the current weight management service provision and access pathways to ascertain whether any adaptations can be made to align them, where possible with the NICE updated overweight and obesity guidelines, taking a patient centred approach.
- NHS England will continue to engage with ICBs on the implementation and delivery of models for tirzepatide as part of an integrated and not a standalone service.

4. Are there any financial implications associated with the introduction of tirzepatide for weight management?

 Confirmation of the reimbursement for tirzepatide for the management of weight and any further associated management costs will be outlined by NHS England early in 2025.

5. Will further communications guidance be provided for ICBs?

NHS England will continue to share communication materials to support ICBs.

NICE's announcement on tirzepatide. Frequently asked questions for patients

6. What is changing in the management of obesity as a result of NICE's announcement?

- People in England over the age of 18 who are living with obesity and another weightrelated health issue will be able to access the weight loss drug tirzepatide through specialist weight management services (SWMS) from spring 2025. In primary care services, access will begin in summer 2025.
- Tirzepatide is currently prescribed for the treatment of type 2 diabetes but will now also be available for weight loss purposes.

7. Who can access tirzepatide?

- This medication is for people living with obesity who have a body mass index (BMI) of 35 or over and a weight related health problem; or a BMI of 32.5 and one weight related health problem for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean ethnic backgrounds, as they are at a higher risk of medical problems at a lower BMI.
- NHS England will provide more information early next year about exactly which weight related health problems will benefit the most from tirzepatide and which will be eligible for consideration for the medication.

8. Can I access tirzepatide straight away?

- Introducing this new treatment to NICE's estimated 3.4 million eligible patients requires
 the NHS in England to develop a completely new service for primary care and many
 healthcare professionals will need to be trained to deliver it. A staged approach will
 help manage demand on existing healthcare services. This allows the safe prescribing
 of tirzepatide and the appropriate support for patients.
- Tirzepatide will initially be offered to individuals facing the most significant health risks related to their weight, starting in spring 2025 through specialist weight management services (SWMS).
- Tirzepatide will not immediately be available and will not be accessible to everyone who
 wishes to use it. Initially, tirzepatide will only be available on the NHS to those expected
 to benefit the most. People who are eligible for tirzepatide through primary care services
 should only expect to start to get access by mid 2025.

9. What is a staged approach?

- A staged approach to service rollout within primary care means NHS in England will
 manage the flow of patients to the health system so it does not become overwhelmed.
- This approach will ensure the service is delivered safely and that the NHS in England is able to plan for an increase in service demand, whilst building specific skills and knowledge within the workforce.

About tirzepatide

10. How does tirzepatide work for weight loss?

- Tirzepatide works by supressing appetite centres in the brain that control gut hormones.
 It decreases the appetite and slows the movement of food passing through the body,
 making you feel fuller for longer.
- Clinical trials have shown tirzepatide can help people living with obesity lose up 20% of their starting body weight, depending on the dose and accompanying diet and lifestyle support.
- Tirzepatide can only be prescribed by a healthcare professional alongside programmes which support people to lose weight and live healthier lives by making changes to their diet and physical activity
- Tirzepatide comes as an injection, which can be self-administered once a week.

11. What if a patient is already receiving tirzepatide treatment?

- Patients can continue taking tirzepatide if they are prescribed it to manage their diabetes.
- If patients are using tirzepatide they have acquired privately, they may be able to access the medication through an NHS prescription if they meet the NICE and NHS qualifying criteria. More information about this will be made available in the new year.

12. Will everyone who is eligible have access to the drug?

• Tirzepatide might not be suitable for everyone and not everyone who meets the eligibility criteria will want to use it to support their weight loss. A healthcare professional will discuss the most appropriate care and support, based on individual patient's need.

This could include behavioural support programmes, medical options including prescribing or bariatric surgery.

13. I'm currently on a waiting list for NHS specialist weight management services. Can I transfer to another list to access this drug?

• A healthcare professional will determine if it is appropriate for you to receive tirzepatide as part of your care in a different care setting (for example, through primary care).

13. The NICE announcement mentions 'wraparound' care. What does this mean?

 Any patient prescribed tirzepatide must participate in the specifically designed 'wraparound' care required by NICE guidance. This focuses on diet, nutrition and increasing physical activity. As NHS England develops the service, it will provide more details of the wraparound support offer for patients who qualify. Patients cannot be prescribed tirzepatide if they do not wish to undertake the wraparound care support.

14. Will there be a cost to the patient for being prescribed tirzepatide?

 Normal prescription charges will apply unless you are entitled to free NHS prescriptions (for example, because you have a medical exemption certificate).