



**Australian Government**

**Department of Health**

# **General Guidance for Providing Feedback to the Contracted Assessment**

## **Immunoglobulin Review**

**MSAC 1564 Re-submission assessment report  
(April 2021)**

**Review of immunoglobulin use for Chronic  
Inflammatory Demyelinating Polyneuropathy (CIDP)**

**Public consultation closes 9.00 am 14<sup>th</sup> May 2021**

## COVER SHEET FOR ALL FEEDBACK SUBMISSIONS

**This cover sheet must be included with your feedback (submission). If completing by hand, please ensure your writing is clear and legible.**

Details	
Individual name/group name/organisation name <sup>1</sup>	
Please delete categories that do not apply	Patient/Carer/ Other Consumer/ Medical Officer/Other Health Professional/NGO/Public Company
CONTACT DETAILS	
<p>We would like to collect your contact details should further information or clarification be required on your submission. If you agree, contents of your submission may be included in subsequent documents accessed by the Department of Health, MSAC and any documents published during the review process (refer to permissions to publish below).</p> <p>Please provide at least one contact address. If you are making a submission for a group or organisation, please provide contact information for one member of your group or organisation. If you would like to remain anonymous, please leave this section blank.</p>	
Title	
First Name	
Surname/Family Name	
Postal Address	
Email Address	
Telephone Number	
INTERNET PUBLICATION	
Please tick this box if you wish for your submission to remain confidential and <b>do not consent</b> to having information from your submission published on the internet or as part of the MSAC public summary document.	
<p>If you wish for only parts of your submission to remain <b>confidential</b> and not be published, please outline the confidential sections clearly (above and below the confidential content). If you wish for only parts of your submission to be treated as confidential, it would be appreciated if you could provide the confidential and non-confidential parts of your submission as separate documents.</p>	
ANONYMITY	
Please tick this box if you want your submission to be treated as anonymous and you <b>do not consent</b> to having your name, or the name of your organisation, published on the internet or as part of the MSAC public summary document.	
THIRD PARTY PERSONAL INFORMATION	
Please tick this box if your submission contains <b>personal information of third party individuals</b> .	
EVIDENCE OF CONSENT	
You should not include personal information about a third party unless you are able to provide evidence of written consent. Please tick this box if you have <b>attached evidence of written consent</b> .	

<sup>1</sup> Please leave blank if you would like to remain anonymous. A pseudonym may be provided if preferred.

**N.B. Feedback will be accepted up to a maximum of 4 pages using font no smaller than size 11 Calibri.**

#### GENERAL INSTRUCTIONS (ALL RESPONDENTS)

The purpose of the consultation is to obtain feedback on the **revised** Contracted Assessment on Immunoglobulin for Chronic Inflammatory Demyelinating Polyneuropathy (CIDP).

The information collected will be used to inform the Medical Services Advisory Committee (MSAC) process to ensure that the use of government-funded immunoglobulin in Australia, is patient focused and seeks to achieve best value.

You are invited to provide feedback on the following questions:

1. The context for the Re-submission Contracted Assessment is outlined in the executive summary on pages 15-16, and the body of the report on pages 28-31. Do you have any comments on this section?
2. The benefits (effectiveness) of immunoglobulin therapy are provided in the executive summary on pages 16-18, and the main body of the report Section B and summarised on page 75. Is this a reasonable interpretation of the evidence?
3. Are there other benefits not captured in the report?
4. The safety or side effects associated with immunoglobulin therapy are provided in the executive summary on pages 16-20, and the body of the report Section B and summarised on pages 73-75. Are there other adverse effects that are not captured in the report?
5. Overall, has all the relevant evidence been taken into account?
6. Do you agree with the translation of trial results to the Australian health care context in the Contracted Assessment (executive summary pages 20-21, and body of the report Section C pages 76-98) and summarised in table 35 page 97-98?
7. What comments do you have on the inputs and outcomes of the economic evaluation (executive summary pages 21-24, and body of the report pages 99-130)?
8. Do you agree with the assumptions and estimates of the overall financial costs for governments in the Contracted Assessment (executive summary pages 24-25, and body of the report pages 131-139)?

#### ADDITIONAL QUESTIONS FOR PATIENTS, CARERS AND CONSUMER ORGANISATIONS

Patients, carers and consumer organisations are invited to provide feedback **on all areas** of the revised Contracted Assessment as outlined above.

In particular, feedback on the following areas are considered of value from a patient and carer perspective:

1. The clinical conclusions were unchanged from the original 1564 report. Evidence presented in the assessment report suggests that immunoglobulin (Ig) therapy is better (at least non-inferior effectiveness and less adverse effects) than corticosteroids in the treatment of CIDP. Compared with no active treatment, Ig was considered to be more effective, but with poorer safety (more adverse effects). There was not enough evidence to determine whether Ig therapy is more effective than plasma exchange or immunosuppressants. Based on your knowledge and experience do you agree with the findings? Are the benefits of Ig more important to you than the adverse effects you may have experienced?
2. Where do you receive your immunoglobulin infusions (e.g. public hospital, private hospital, or home)?
3. What out-of-pocket costs are there for patients when receiving Ig therapy (e.g. specialist fees, tests required for review not fully covered by Medicare or health insurance)?
4. Do you have any other comments you would like to make in relation to this review?

If you require any further guidance please contact the [MSAC IG secretariat](#).

## **Privacy**

Unless otherwise requested, all submissions on the draft contracted assessment to MSAC Ig Referral 1564 will be provided to the Evaluation Sub-Committee of MSAC and the MSAC.

Responsibility for copyright in submissions resides with the author(s), not with the Department of Health.

Your submission and contact details will be stored in accordance with the Australian Privacy Principles from Schedule 1 of the *Privacy Amendment (Enhancing Privacy Principles) Act 2012* and the *Archives Act 2012*. Should you have any concerns about the storage of your submission, or if you wish to gain access to make a correction, please contact the [MSAC Ig Review Secretariat](#). A copy of the Department's privacy policy is available on request. If you wish to make a complaint about the handling of your private information, you may contact the Department of Health Privacy Contact Officer on 02 6289 5773 and, if unsatisfied with the response, you may submit a complaint to the Office of the Australian Information Commissioner.