[See recipients listed below]

From: PSSajidJavid

Sent: 2022-06-28T12:35:36Z **Importance:** Normal

Subject: RE: Submission: Evusheld as prophylaxis

Received: 2022-06-28T12:35:00Z

ΑII

Thank you for this – we appreciate the work that went into this submission. SoS, Lord Kamall and Minister Throup have reviewed and agree that the ATTF should not seek to deploy Evusheld for prophylaxis this autumn/winter. They are also content for Evusheld to be considered through NICE's topic selection process for potential formal referral to NICE's technology appraisal programme. In considering this advice, Ministers have noted their equalities duties.

On deployment, the cost effectiveness analysis annexed to the sub suggests that deploying a single dose of Evusheld may be cost effective for very vulnerable cohorts. In light of that that analysis, and before progressing next steps, can you confirm that the clinical and departmental advice (to not procure) is a blanket recommendation and applies even to these most vulnerable cohorts?

Noting that SoS is meeting with AZ on Monday, <u>can we receive advice on the options for further clinical evaluation by no later than COP Thursday</u>. The advice should set out the commercial and clinical feasibility of any such trial proposal, financial advice (in the context of other pressures), and whether it's realistic to expect AZ to sell their product to us for this purpose. If the recommendation is to stand up a trial/add Evusheld to the PROTECT-V trial platform, OLS should advise on how this proposal is likely to be received by AZ.

All this leading to a final series of asks, which is to receive:

- A robust handling plan for AZ/parliamentarians/other interested parties. A couple of ideas welcome more thoughts:
 - O An in confidence briefing between CMO and MPs/Peers that have shown an interest in Evusheld;
 - o Clinical briefings, ideally led by CMO/DCMO, for charities;
 - O A DC letter, setting out the final position and to go to all MPs and peers;
 - Ministerial meetings/visits with AZ moving forward.

As you know, SoS is meeting Mene and TKR on Monday. Grateful for views on whether officials should update AZ at working level on the outcome of this work shortly before that meeting (so any final position does not come out of the blue).

• A comms plan which contains public lines that are sensitive to the needs and expectations of all interested parties. If possible/clinically feasible, we should point to the fact this decision has been made in the context of living with a less harmful variant (when compared to the prevalence and severity levels associated with previous waves). We should also lean into the fact that Evusheld will be considered through NICE's topic selection process.

Can we receive the handling and comms plans by COP Thursday.

Clearly we want to be in a position where SoS can provide AZ with certainty on Monday, and I'd be grateful if you can let me know of any unexpected twists at the earliest opportunity.

Very happy to discuss. NR **1&S** Private Secretary to the Secretary of State for Health & Social Care | **1&S** NR Subject: RE: Submission: Evusheld as prophylaxis OFFICIAL-SENSITIVE NR As discussed, please see attached the submission Many thanks, NR e/her) NR

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Subject: RE: Submission: Evusheld	as prophylaxis
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Private Secretary, Lord Kamall	
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Policy Advisor

Antivirals and Therapeutics Taskforce Department of Health and Social Care,

	[See recipients listed below]
Subject: RE: Submission: Ev	rusheld as prophylaxis
have the latest. Changes ar	ate. UKHSA have updated us with further information since clearances and keen that you e in Annex B, notably that subvariants BA.4 and BA.5 have now been isolated. Ful to have this latest version now.
NR	NR (she/her) Policy Advisor Antivirals and Therapeutics Taskforce Department of Health and Social Care, 39 Victoria Street, London SW1H 0EU NR gov.uk M: I&S Folio
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Confirming one tweak in Annex I, with apologies. Grateful if we could use this version please.

Many thanks,	
NR	NR (she/her) Policy Advisor
	Antivirals and Therapeutics Taskforce
	Department of Health and Social Care
	39 Victoria Street, London SW1H 0EU
	E NR isc.gov.uk
	M Irrelevant & Sensitive
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From	NR				
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NR	Eltringham, Sophie <	Sophie.Eltringham@dhsc.gov	<u>.uk</u> >;
	NR		iJ
Subject: RE: Submis	ssion: Evusheld as prophylaxis		

OFFICIAL-SENSITIVE

With apologies for the follow on email, please see submission attached with slight change at paragraph 25. <u>Please use this version.</u>

Many thank	5,
NR	
i	NR (she/her)
	Policy Advisor
	Antivirals and Therapeutics Taskforce
	Department of Health and Social Care,

E: NR @dhsc.gov.uk

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Eltringham, Sophie < Sophie. Eltringham@dhsc.gov.uk >;

Hi **NR**

Subject: Submission: Evusnera as prophylaxis

With thanks to all those in copy, please find attached a note on Evusheld as prophylaxis.

Issue	You asked the Antivirals and Therapeutics Taskforce (ATTF) for advice on whether to deploy, trial, or not procure the pre-exposure prophylaxis (PrEP) antibody Evusheld following results from UKHSA in vitro testing against the Omicron subvariant BA.2, which is currently dominant in the UK.
Date a response is needed by	Routine 5 days. A response and decision will enable communication of the decision to interested parties who are keen for updates on next steps.
Recommendation	We are asking you to agree to the following recommendations: • That the Department should not seek to deploy Evusheld in a

NR

PrEP programme at this time.

• That Evusheld is considered through NICE's topic selection process for potential formal referral to NICE's technology appraisal programme.

We are asking you to **note**:

• Evusheld could be included in the PROTECT-V trial to assess its clinical effectiveness against currently circulating variants. Further recommendations on this will follow.

Many thanks, NR

NR (she/her)

Policy Advisor

Antivirals and Therapeutics Taskforce Department of Health and Social Care, 39 Victoria Street, London SW1H 0EU

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