Policy Summary
Fumaric Acid Esters (FAE) will be offered for treatment of patients with severe/moderate chronic plaque psoriasis according to the following criteria:

- FAE would be used as an alternative to biologicals such as etanercept or adalimumab when clinical assessment shows a total Psoriasis Area Severity Index *(PASI) of 10 or more and a Dermatology Life Quality Index *(DLQI) of more than 10.
- Psoriasis that has failed to respond to standard systemic therapies including ciclosporin, methotrexate and phototherapy; or the person is intolerant to, or has a contraindication to these treatments.

Treatment should only continue when an adequate response is detected. An adequate response to treatment is defined as either:

- a 75% reduction in the PASI score from when treatment started (PASI 75) or
- a 50% reduction in the PASI score (PASI 50) and a five point reduction in DLQI from when treatment started.

Whether the use of Fumaric Acid Esters in accordance with the above criteria is appropriate in any particular case is a matter for the treating clinician's professional judgment, having weighed the risks and benefits to the patient and acting in accordance with a responsible body of medical opinion. This document is a general statement of policy only.

* The PASI is a measure of severity of disease in terms of body surface area affected and the extent, scaliness, thickness and redness of plaques. The DLQI is a disease specific quality of life measure

Rationale behind the decision.

Evidence has shown that FAE are effective in the treatment of moderate to severe psoriasis, particularly demonstrated in two small scale double blind randomised trials. These studies demonstrated a statistically significant reduction in BSA afflicted by psoriasis and mean PSSI.1,2 There have been reported adverse reactions in the literature, however the safety profile of the treatment is acceptable and has been shown to be better than other systemic agents.3,4 FAE have been shown to be more cost effective than other third line agents such as Etanercept.5

References: