

Commissioning Policy

Skilarence® (dimethyl fumarate) for the treatment of
Moderate Psoriasis outside of NICE TA475
recommendations

Criteria Based Access (CBA)

Date adopted: 07.10.2025

Version: v4

Authorisation and document control

Name of policy:	Skilarence® (dimethyl fumarate) for the treatment of Moderate Psoriasis outside of NICE TA475 recommendations
Job title of author:	Commissioning Manager – Elective Care
Name of sign off group:	Commissioning Policy Review Group

Equality and Engagement Impact Assessment	
Date Equality and Engagement Impact Assessment was completed:	June 2025

Consultation	
Name of group/individual	Date considered
Dr Emma Le Roux, GP Clinical Lead, Gloucestershire ICB	June 2025
Dr Jake Moss, Clinical Fellow (Dermatology), Gloucestershire Hospitals NHS Foundation Trust	June 2025
Dr Emily Davies, Consultant Dermatologist, Gloucestershire Hospitals NHS Foundation Trust	June 2025

Authorisation	
Name of group	Date approved
Commissioning Policy Review Group	18/10/2018
System Quality Committee	14/02/2019

Date of adoption	07/10/2025
Date of publication	14/02/2019
Review date	October 2028
To be reviewed by (job title)	Commissioning Manager – Elective Care

Version control				
Version number	Date	Summary of changes	Author/Editor	Approved by
1	July 2018	New policy for licensed preparation of dimethyl fumarate		
2	Sept 2021	Review date changed to September 2022		ECCP
3	Sept 2022	Review date changed to September 2025		ECCP
4	Oct 2025	Review date changed to October 2028. No change to policy.	Commissioning Manager/ IFR Manager	CPRG

1.0 Background

Psoriasis is a skin condition that causes red, flaky, crusty patches of skin covered with silvery scales. The severity of psoriasis varies greatly from person to person. For some people it's just a minor irritation, but for others it can have a major impact on their quality of life.

Psoriasis is a long-lasting (chronic) disease that usually involves periods when you have no symptoms or mild symptoms, followed by periods when symptoms are more severe. There's no cure for psoriasis, but a range of treatments can improve symptoms and the appearance of skin patches. In most cases, the first treatment used will be topical treatments, but if that is not effective, or the condition is more severe, other treatment options are available which are usually prescribed in a stepped manner depending on disease severity. For some patients these treatments may not be appropriate (either due to the patient being resistant to the treatments, or because the treatment is not medically suitable for the patient). In these cases, a skin consultant may wish to prescribe the medicine dimethyl fumarate (Skilarence®) as a treatment option before trying more potent medicines.

This policy outlines which patients may be treated with dimethyl fumarate (Skilarence®)

If your doctor believes that you meet the criteria set out in this policy the ICB will fund the treatment.

2.0 Policy statement

Policy category	Policy details
CBA	Commissioned for the treatment of moderate psoriasis for patients who are resistant to or have contra-indications to the non-biological standard treatments. Dimethyl fumarate (Skilarence®) is licenced in the UK for the treatment of moderate to severe plaque psoriasis in adults in need of systemic medicinal therapy. NICE TA475 "Dimethyl fumarate for treating moderate to severe plaque psoriasis" lists the criteria for eligible patients to access treatment, but this policy extends the availability of this preparation to a wider patient population.

	Treatment with the systemic non-biological therapy dimethyl fumarate outside of the NICE TA475 is only funded for people with any type of psoriasis who: • Comply with the recommendations within the NICE Clinical Guideline Psoriasis: assessment and management (CG153) • it cannot be controlled with topical therapy and • it has a significant impact on physical, psychological or social wellbeing and one or more of the following apply: ➢ psoriasis is extensive (for example, more than 10% of body surface area affected or a PASI score of more than 10) or ➢ psoriasis is localised and associated with significant functional impairment and/or high levels of distress (for example severe nail disease or involvement at high-impact sites) or ➢ phototherapy has been ineffective, cannot be used or has resulted in rapid relapse (rapid relapse is defined as greater than 50% of baseline disease severity within 3 months). AND Are resistant to, or do not tolerate, other standard systemic non-biological treatments. (<i>E.g. Methotrexate, ciclosporin and acitretin</i>).
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3.0 Patients who are not eligible for treatment under this policy

Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy.

Individual cases will be reviewed at the ICB's Individual Funding Request Panel upon receipt of a completed application form from the patient's GP, Consultant or Clinician. Applications cannot be considered from patients personally.

4.0 Connected policies

None

5.0 References

NICE TA475 [Dimethyl fumarate for treating moderate to severe plaque psoriasis](#)

NICE CG153 [Psoriasis: assessment and management \(CG153\)](#)