

Economic plan

This plan identifies the areas prioritised for economic modelling. The final analysis may differ from those described below. The rationale for any differences will be explained in the guideline.

1 Guideline

Early and locally advanced breast cancer: diagnosis and management

2 List of modelling questions

Review questions by scope area	Which people with early and locally advanced breast cancer would benefit from the addition of taxanes to anthracycline based adjuvant chemotherapy?
Population	Adults (18 or over) with invasive early or locally advanced breast cancer who have undergone breast surgery and are suitable for anthracycline based adjuvant chemotherapy
Interventions and comparators considered for inclusion	<ul style="list-style-type: none"> • Anthracycline based adjuvant chemotherapy regimen plus taxane (docetaxel or paclitaxel) • Anthracycline based adjuvant chemotherapy regimen
Perspective	NHS and personal social services (PSS)
Outcome	Total and incremental costs Total and incremental QALYs Incremental cost-effectiveness ratio (ICER) measured a cost per QALY.
Type of analysis	Cost-utility analysis
Issues to note	Lack of statistically significant differences between interventions
Review questions by scope area	Which people with T1N0 human epidermal growth receptor 2 (HER2) positive breast cancers benefit from adjuvant trastuzumab in combination with chemotherapy?
Population	Adults (18 or over) with invasive HER2-positive breast cancer (T1, N0, M0) who have undergone surgery
Interventions and comparators considered for inclusion	<ul style="list-style-type: none"> • Observation • Adjuvant chemotherapy • Adjuvant chemotherapy and trastuzumab
Perspective	NHS and personal social services (PSS)
Outcomes	Total and incremental costs Total and incremental QALYs

4.0.4 DOC Economic Plan

	ICER measured as cost per QALY.
Type of analysis	Cost-utility analysis
Issues to note	Lack of high quality data comparing all three interventions against each other
Review questions by scope area	What are the indications for using adjuvant bisphosphonates in people with early and locally advanced breast cancer?
Population	Adults (18 or over) with invasive breast cancer (M0) who have undergone surgery
Interventions and comparators considered for inclusion	<ul style="list-style-type: none"> • No bisphosphonates • Bisphosphonates <ul style="list-style-type: none"> ○ Zoledronic acid ○ Ibandronate ○ Clodronate ○ Risedronate
Perspective	NHS and personal social services (PSS)
Outcomes	Total and incremental costs Total and incremental QALYs ICER measured as cost per QALY.
Type of analysis	Cost-utility analysis
Issues to note	Lack of statistically significant differences between interventions