

National Institute for Health and Clinical Excellence

Rituximab for the treatment of follicular non-Hodgkin's lymphoma

Royal College of Nursing

Introduction

The Royal College of Nursing (RCN) was invited to review the Appraisal Consultation

Document (ACD) for Rituximab for the treatment of follicular non-Hodgkin's lymphoma.

Nurses working in this area of health reviewed the consultation documents on behalf of the RCN.

Appraisal Consultation Document – RCN Response

The Royal College of Nursing welcomes the opportunity to review the Appraisal Consultation Document (ACD) of the technology appraisal of Rituximab for the treatment of follicular non-Hodgkin's lymphoma. The RCN's response to the four questions on which comments were requested is set out below:

i) Has the relevant evidence been taken into account?

The summary of evidence in the document is relevant and covers all the main areas. The fact that there is evidence to support the use of maintenance Rituximab in progression disease survival is very promising.

ii) Are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence, and are the preliminary views on the resource impact and implications for the NHS appropriate?

Haematological treatments such as R-CHOP regimens are classified as some of the most toxic chemotherapy / treatment regimens and the adverse events identified with Rituximab alone compared to chemotherapy regimens is

significant. The fact that the patient's quality of life is less affected with the use of Rituximab alone is important. It will be interesting to see what the overall cost-effectiveness of maintenance Rituximab compared to the standard 'watch & wait' and then the need for further chemotherapy if disease progresses, is.

iii) Are the provisional recommendations of the Appraisal Committee sound and do they constitute a suitable basis for the preparation of guidance to the NHS?

The provisional recommendations seem appropriate. We would welcome guidance to the NHS on the use of this health technology

iv) Are there any equality related issues that need special consideration that are not covered in the ACD?

None that we are aware of at this stage. We would however, ask that any guidance issued should show that equality issues have been considered and that the guidance demonstrates an understanding of issues concerning patients' age, faith, race, gender, disability, cultural and sexuality where appropriate.