



Single technology appraisal (STA) Erlotinib for the first-line treatment of locally advanced or metastatic EGFR-TK mutation-positive non-small-cell lung cancer

Response to appraisal consultation document

1. Has all of the relevant evidence been taken into account?

1st line treatment in UK for EGFR-TK mutation in positive NSCLC is gefitinib. Data presented by the manufacturer do not present head to head comparison of gefitinib with erlotinib but indirect evidence. Although the data presented show superiority in terms of efficacy of erlotinib over standard chemotherapy, there is no data comparing it to other possible treatment options. Due to the fact that there were no head-to-head trials with gefitinib (currently first line treatment), it remains to be seen what advantage erlotinib has over gefitinib.

2. Are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence?

The manufacturer's estimated 0.76 per 100,000 population for treatment with first-line erlotinib. Other estimates have suggested eligibility up to 5 people per 100,000. Clarity should be sort with regards to the eligible population.

An ICER comparing the costs with gefitinib is needed to assess the cost-effectiveness. The committee did not have sufficient information to assess the most plausible ICER for erlotinib compared to gefitinib. Clinically erlotinib is more effective than standard chemotherapy but we do not know if it is more or less effective in comparison to gefitinib.

3. Are the provisional recommendations sound and a suitable basis for guidance to the NHS?

CSAS reply to NICE concerning ACD for erlotinib appear sound. They have highlighted relevant concerns from the ACD.

There are no details regarding the Patient Access Scheme in the document, stating the information is commercial in confidence. As commissioners it would be helpful to understand the practical details involved in this PAS. The current PAS for gefitinib has proved to be relatively complicated to manage. We would request that this PAS should be straightforward to administer.

4. Are there any aspects of the recommendations that need particular consideration to ensure we avoid unlawful discrimination against any group of people on the grounds of gender, race, disability, age, sexual orientation, religion or belief?



NHS Derby City and NHS Derbyshire County

None identified

5. Are there any equality -related issues that need special consideration and are not covered in the appraisal consultation document?

None identified

