

25 June 2012

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NICE

Dear ■■■■

Denosumab appraisal comments

It is bitterly disappointing that once again NICE has blocked access to medicine for men with prostate cancer whilst recommending it for use in women with breast cancer. Yet again, gender inequality continues

At the first appraisal committee the clinical expert specialists invited by NICE clearly stated that they use bisphosphonates for SRE prevention in prostate cancer. It would appear that the clinical experts who gave their opinion in the first meeting have been ignored and as such were excluded for the follow on meeting at which a decision was made to reverse the initial recommendation for use in prostate cancer patients. Having nominated Steve Harland as a clinical expert for this NICE appraisal, it is surprising and disappointing that NICE did not invite him back to the second meeting. We strongly believe that the clinical experts should have been part of such discussions, especially as they had been invited by NICE to give their professional opinion.

We believe that pain relief and skeletal related event (SRE) prevention are two sides of the same coin and as such are not separate issues. So, radiotherapy to the bone is given to relieve bone pain and at the same time, it is also a commonly experienced SRE in prostate cancer. Therefore, it seems incongruous that pain relief is not considered to be part of the remit of this appraisal as denosumab is licensed for the prevention of SRE's, which included pain relief through preventing the need to intervene with radiotherapy to the bone.

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Chief Executive