

Ibrutinib with bendamustine and rituximab for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy (terminated appraisal)

Technology appraisal guidance

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Advice

NICE is unable to make a recommendation about the use in the NHS of ibrutinib with bendamustine and rituximab for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy because no evidence submission was received from Janssen-Cilag for the technology.

Background

Janssen-Cilag has informed NICE that they "...understand from the clinical community that there is no desire to use ibrutinib in combination with bendamustine and rituximab in relapsed or refractory chronic lymphocytic leukaemia (R/R CLL). Ibrutinib will only be used as monotherapy for the treatment of R/R CLL". As such, Janssen-Cilag will not be making an evidence submission to NICE for this indication.

NICE has therefore terminated this single technology appraisal.

Information

NHS organisations should take into account the reasons why the company did not make an evidence submission when considering whether or not to recommend local use of ibrutinib with bendamustine and rituximab for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy. If, after doing this, organisations still wish to consider ibrutinib with bendamustine and rituximab for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy, they should follow the advice on rational local decision-making in the [NHS Constitution for England](#) and the [NHS Commissioning Board and Clinical Commissioning Groups \(Responsibilities and Standing Rules\) Regulations 2012](#). This outlines the approach that should be taken when NICE guidance is unavailable.

NICE will review the position at any point if the company decides that it wants to make a full submission.

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Accreditation

