

PRESS RELEASE

NICE draft guidance recommends bortezomib and thalidomide for multiple myeloma

In **draft** guidance published today (26 August 2010) NICE has recommended two treatments for multiple myeloma.

Thalidomide (Thalidomide, Celgene) in combination with an alkylating agent and a corticosteroid is recommended for the first-line treatment of multiple myeloma in people for whom high-dose chemotherapy with stem cell transplantation is considered inappropriate. Bortezomib (Velcade, Janssen-Cilag) in combination with an alkylating agent and a corticosteroid is recommended as a treatment option if the person is unable to tolerate or has contraindications to thalidomide.

The independent Appraisal Committee heard from clinical specialists that, although the choice of treatment would differ for each individual, a thalidomide regimen would be considered more appropriate in most cases. The evidence suggested that in terms of clinical effectiveness the two regimens were equivalent, but thalidomide regimens were more cost effective than the bortezomib regimen. However, for those people who are unable to take thalidomide, bortezomib was considered an appropriate and cost effective treatment option.

Multiple myeloma is a type of cancer that develops from cells in the bone marrow. There is currently no cure for the disease, only treatments to stop the progress of the condition and help relieve symptoms. Approximately 3,600 cases of multiple myeloma are diagnosed every year in the UK.

Dr Carole Longson, Health Technology Evaluation Centre Director at NICE

said: "We are pleased to be able to provisionally recommend these two treatments for people with multiple myeloma. The evidence clearly showed that both thalidomide and bortezomib regimens are more effective at delaying disease

progression and improving patients' life expectancy than the current treatment of an alkylating agent and corticosteroid alone.”

In line with the NICE technology appraisals process this draft guidance is now with consultees, who have the opportunity to appeal against the proposed guidance.

NICE has not yet issued final guidance to the NHS. Until NICE issues final guidance, NHS bodies should make decisions locally on the funding of specific treatments. Final guidance is expected to be published in September 2010.

Ends

Notes to Editors

About the appraisal

1. The guidance is available at: <http://guidance.nice.org.uk/TA/Wave18/53>
2. The average cost of bortezomib per treatment cycle is £3,000. The cost for a 3.5-mg vial is £762.38. The average cost of thalidomide per treatment cycle is £2,100. The cost for a 28-capsule pack of 50-mg thalidomide capsules is £298.48.
3. The end of life considerations did not apply to this appraisal.

About NICE

4. The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
5. NICE produces guidance in three areas of health:
 - **public health** – guidance on the promotion of good health and the prevention of ill health for those working in the NHS, local authorities and the wider public and voluntary sector
 - **health technologies** – guidance on the use of new and existing medicines, treatments and procedures within the NHS
 - **clinical practice** – guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS.