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PRESS RELEASE

NICE extends range of advice for people with cancer

The National Institute for Clinical Excellence has issued guidance on the use of drugs to treat both breast and bowel cancer. The guidance, on the use of capecitabine for breast cancer and capecitabine and tegafur with uracil for bowel cancer, is the latest in a series of recommendations on the use of cancer drugs made by the Institute. Since its establishment in April 1999 NICE has issued guidance on the use of 16 different drugs covering 9 types of cancer.

In summary today's guidance recommends:

Capecitabine for the treatment of **metastatic or locally advanced breast cancer** is recommended in combination with docetaxel, when anthracycline-containing treatment has failed or is unsuitable. Capecitabine is also recommended on its own when anthracycline and taxane-containing treatment have failed.

Either capecitabine or tegafur with uracil are recommended as options, alongside other treatments for the first line treatment of **metastatic bowel cancer**.

The guidance on both breast and bowel cancer recommends that the choice about which medicine to take should be made jointly by the patient and their doctor. The patient should be informed about the differences between the medicines available and the potential suitability of alternative approaches for their cancer so that she or he can be fully involved in the decision.

NICE also noted that the use of these drugs should be overseen oncologists specialising the specific cancer.

Anne-Toni Rodgers, Corporate Affairs Director and Executive Lead for these appraisals said: “NICE guidance on many different drugs for the treatment of cancer has already made a real difference to thousands of men and women in England and Wales. Breast and bowel cancer are two of the most common cancers, affecting around 33,000 and 31,000 people each year respectively. Today’s guidance sits alongside existing NICE guidance on the use of drugs to treat these conditions and improves the options available to people with cancer. We are now combining a number of these recommendations on medicines for cancer with the development of wider clinical guidelines covering the treatment and care of people with cancer.”

Ends

Notes to Editors

Media briefing and further information

1. Media briefings for both breast and bowel cancer are available to support this press release. If you received this press release by e-mail they are attached. If you would like to receive a copy by e-mail or fax - please contact NICE on the numbers above. The media briefings and full guidance for each appraisal are also available on the NICE website, and may also be accessed using the links below.
 - [Media briefing - capecitabine for breast cancer](#)
 - [Media briefing - capecitabine for colorectal cancer](#)
 - [Full guidance on the use of capecitabine for the treatment of locally advanced or metastatic breast cancer](#)
 - [Full guidance on the use of capecitabine and tegafur with uracil for metastatic colorectal cancer](#)

About NICE

2. NICE is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers to help them make decisions about treatment and healthcare. For further information about NICE you can visit www.nice.org.uk.
3. NICE produces guidance in three areas of health:
 - the use of new and existing medicines and treatments within the NHS in England and Wales – technology appraisals
 - the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales – clinical guidelines.

- whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use– interventional procedures.

NICE also funds four enquiries that undertake research into the way patients are treated to identify ways of improving the quality of care (the investigations are known as confidential enquiries).

3. NICE guidance and recommendations are prepared by independent groups that include professionals working in the NHS and people who are familiar with the issues affecting patients and carers.

About technology appraisals

4. Technology appraisals are recommendations on the use of new and existing medicines and treatments within the NHS in England and Wales, such as:
 - medicines (for example, drugs)
 - medical devices (for example, hearing aids or inhalers)
 - diagnostic techniques (tests used to identify diseases)
 - surgical procedures (for example, repairing hernias)
 - health promotion activities (for example, patient education models for diabetes).
5. Our technology appraisal recommendations are prepared by an independent Committee, who include healthcare professionals working in the NHS and people who are familiar with the issues affecting patients and carers. The Committee considers the evidence on the clinical and cost effectiveness of the technology – this includes hearing the views of, and evidence from, clinical health professionals, experts and patients.
6. NHS organisations in England and Wales have to make the resources and facilities available to enable NICE guidance to be implemented. In January 2002 the Government announced a legal obligation for the NHS to provide funding for treatments and drugs recommended by NICE as a part of its technology appraisals work programme

The NICE cancer work programme

7. This table shows a summary of all the guidance issued by NICE relating to cancer care. The “Recommendation for use” column shows whether NICE recommended that the treatment should be used routinely, that is in all its licensed indications, selectively – only under certain circumstances within the licence, or in a research setting only

Title of guidance	Recommendation for use	Issue date
Taxanes for ovarian cancer	Selective	See below for review
Liquid based cytology (cervical screening)	Research	June 2000
Taxanes for breast cancer	Selective	See below for review
Laparoscopic surgery for bowel cancer	Research	December 2000
Temozolomide for brain cancer	Selective	April 2001
Gemcitabine for pancreatic cancer	Selective	May 2001
Drugs for non-small cell lung cancer x 4	Routine	June 2001
Topotecan for advanced ovarian cancer	Selective	August 2001
Fludarabine for lymphocytic leukaemia	Routine	September 2001
Taxanes for breast cancer (review)	Selective	September 2001
Drugs for bowel cancer x 3	Selective	March 2002
Trastuzumab for breast cancer	Routine	March 2002
Rituximab for recurrent or refractory stage III or IV follicular non- Hodgkin’s lymphoma	Selective	March 2002
PLDH (Caelyx) for ovarian cancer	Selective	June 2002

Title of guidance	Recommendation for use	Issue date
Imatinib for chronic myeloid leukaemia	Routine	September 2002
Vinorelbine for advanced breast cancer	Selective	December 2002
Paclitaxel for ovarian cancer (review)	Selective	January 2003
Capecitabine for breast cancer	Routine	May 2003
Capecitabine and tegafur uracil for bowel cancer	Routine	May 2003

8. In addition, NICE is developing guidance on care of people with the following cancers.

Title of guidance	Expected date of issue
Haemato-oncology	July 2003
Colorectal cancer	August 2003
Leukaemia (chronic myeloid) - imatinib for first line therapy	September 2003
Rituximab (Mabthera) for aggressive non Hodgkin's lymphoma	September 2003
Head and neck cancers	November 2003
Breast cancer (familial)	February 2004
Supportive and palliative care	February 2004
Gastro-intestinal stromal tumours - imatinib (Glivec)	May 2004
Breast cancer (early) - hormonal treatments	September 2004
Lung cancer (non-small cell) - gefitinib (Iressa)	November 2004
Lung cancer	November 2004
Child and adolescent cancer	February 2005
Referral guidelines for suspected cancer	March 2005
Skin tumours including melanoma	March 2005
Tumours of the brain and central nervous system	July 2005
Sarcoma	August 2005