

Quick reference guide

Carmustine implants and temozolomide for the treatment of newly diagnosed high-grade glioma

1 Guidance

Temozolomide and carmustine implants have been appraised separately for the treatment of newly diagnosed high-grade glioma. On the basis of the evidence presented to the Committee, no recommendation can be made regarding the sequential use of these treatments for newly diagnosed high-grade glioma.

- 1.1 Temozolomide, within its licensed indications, is recommended as an option for the treatment of newly diagnosed glioblastoma multiforme (GBM)¹ in patients with a World Health Organization (WHO) performance status of 0 or 1.
- 1.2 Carmustine implants, within their licensed indications, are recommended as an option for the treatment of newly diagnosed high-grade glioma only for patients in whom 90% or more of the tumour has been resected.
- 1.3 Treatment with carmustine implants should be provided only within specialist centres that in general conform to guidance in 'Improving outcomes for people with brain and other central nervous system tumours' (NICE cancer service guidance 2006; www.nice.org.uk/csgbraincns), and should be supervised by specialist neurosurgeons who spend at least 50% of their clinical programmed activities in neuro-oncological surgery. The specialists should also have access to:
 - multidisciplinary teams to enable preoperative identification of patients in whom maximal resection is likely to be achievable

- magnetic resonance imaging (MRI) to enable preoperative identification of patients in whom maximal resection is likely to be possible, and
- image-directed technology, such as neuronavigation, for use intraoperatively to assist the achievement of maximal resection.

- 1.4 Carmustine implants are not recommended for the treatment of newly diagnosed high-grade glioma for patients in whom less than 90% of the tumour has been resected.

2 Implementation

NICE has developed tools to help organisations implement this guidance (listed below). These are available on our website (www.nice.org.uk/TA121).

- Local costing template incorporating costing report to estimate the savings and costs associated with implementation.
- Audit criteria to monitor local practice.

¹ Grade 3 and 4 gliomas are considered high-grade gliomas; grade 4 gliomas are usually GBM.

NICE technology appraisal guidance 121

This guidance is written in the following context

This guidance represents the view of the Institute, which was arrived at after careful consideration of the available evidence. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. This guidance does not, however, override the individual responsibility of healthcare professionals to make appropriate decisions in the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Further information

Quick reference guide

This has been distributed to healthcare professionals working in the NHS in England and Wales (see www.nice.org.uk/TA121distributionlist). It is available from www.nice.org.uk/TA121quickrefguide

For printed copies, phone the NHS Response Line on 0870 1555 455 (quote reference number N1267).

Full guidance

This contains the following sections:

- 1 Guidance
- 2 Clinical need and practice
- 3 The technologies
- 4 Evidence and interpretation
- 5 Implementation
- 6 Recommendations for further research
- 7 Related NICE guidance
- 8 Review of guidance.

The full guidance also gives details of the Appraisal Committee and the sources of evidence considered. It is available from www.nice.org.uk/TA121guidance

'Understanding NICE guidance'

Information for patients and their carers is available from www.nice.org.uk/TA121publicinfo

For printed copies, phone the NHS Response Line on 0870 1555 455 (quote reference number N1268).

Related NICE guidance

- Improving outcomes for people with brain and other central nervous system tumours. NICE cancer service guidance (2006). Available from: www.nice.org.uk/csgbraincns
- Guidance on the use of temozolomide for the treatment of recurrent malignant glioma (brain cancer). NICE technology appraisal guidance 23 (2001). Available from: www.nice.org.uk/TA23

Appraisals of temozolomide (review of technology appraisal guidance 23) and carmustine implants for the treatment of recurrent high-grade glioma are expected to begin in 2007.