

Technology Appraisal Committee Meeting (Committee D)

Minutes: Confirmed

Date and Time: Tuesday 6 October 2015, 10:05-15:30

Venue:

National Institute for Health and Care Excellence
Level 1A, City Tower
Piccadilly Plaza
Manchester
M1 4BT

Present:	1. Professor Gary McVeigh (Chair) 2. Dr Lindsay Smith (Vice Chair) 3. Dr Andrew Black 4. Dr Matthew Bradley 5. Ms Tracey Cole 6. Dr Ian Davidson 7. Professor Simon Dixon 8. Mrs Susan Dutton 9. Dr Susan Griffin 10. Professor Carol Haigh 11. Professor John Henderson 12. Dr Warren Linley 13. Mr Malcolm Oswald 14. Professor Oluwafemi Oyebode 15. Dr Paula Parvulescu 16. Dr Mohit Sharma 17. Dr Murray Smith	Present for notes 12 to 28 Present for all notes Present for notes 01 to 17 Present for all notes Present for all notes
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In attendance:

Meindert Boysen	Programme Director, National Institute for Health and Care Excellence	Present for notes 01 to 17
Helen Knight	Associate Director, National Institute for Health and Care Excellence	Present for all notes
Kate Moore	Project Manager, National Institute for Health and Care Excellence	Present for all notes

Danielle Conroy	Administrator, National Institute for Health and Care Excellence	Present for all notes
Richard Diaz	Technical Analyst, National Institute for Health and Care Excellence	Present for notes 01 to 17
Nwamaka Umeweni	Technical Adviser, National Institute for Health and Clinical Excellence	Present for all notes
Nicholas Bird	Patient Expert, nominated by Solving Kids Cancer	Present for notes 01 to 15
Dr Martin Elliott	Clinical Expert, nominated by National Cancer Research Institute (NCRA)	Present for notes 01 to 15
Dr Juliet Gray	Clinical Expert, nominated by National Cancer Research Institute (NCRA)	Present for notes 01 to 15
Claire Rothery	ERG Representative, Centre for Reviews and Dissemination and Centre for Health Economics – York	Present for notes 01 to 15
Pedro Saramago	ERG Representative, Centre for Reviews and Dissemination and Centre for Health Economics – York	Present for notes 12 to 15
Stephen Smith	Patient Expert, nominated by Neuroblastoma UK	Present for notes 01 to 15
Nerys Woolacott	ERG Representative, Centre for Reviews and Dissemination and Centre for Health Economics – York	Present for notes 01 to 15

Non-public observers:	Mousumi Biswas, Health Economist, Centre for Reviews and Dissemination and Centre for Health Economics – York	Present for all notes
	Geert Frederix, Centre for Reviews and Dissemination and Centre for Health Economics – York	Present for all notes
	Ann Greenwood, Editor, National Institute of Health and Care Excellence	Present for notes 01 to 17
	Brendan Mullaney, Technical Analyst, National Institute for Health and Care Excellence	Present for all notes
	Laura Norburn, Public Involvement Adviser National Institute of Health and Care Excellence	Present for notes 01 to 17

Notes

Welcome

1. The Vice Chair welcomed all members of the Committee and other attendees present to the meeting. The Vice Chair reviewed the agenda and timescales for the meeting, which included the appraisals of Dinutuximab for treating high-risk neuroblastoma and Radium-223 dichloride for treating metastatic hormone relapsed prostate cancer with bone metastases.
2. The Vice Chair informed the Committee of the non-public observers at this meeting: Mousumi Biswas, Geert Frederix, Ann Greenwood, Brendan Mullaney and Laura Norburn.
3. Apologies were received from Dr Aomesh Bhatt, Professor David Bowen, Dr Ian Campbell, Dr Alexander Dyker, Mrs Gillian Ells, Professor Paula Ghaneh and Dr Tim Kinnaird.

Any other Business

4. None.

Notes from the last meeting

5. Agreement of minutes dated 3 September 2015.

Appraisal of Dinutuximab for treating high-risk neuroblastoma

Part 1 – Open session

6. The Vice Chair welcomed the invited experts: Nicholas Bird, Dr Martin Elliott, Dr Juliet Gray, Claire Rothery, Pedro Saramago, Steven Smith and Nerys Woolacott to the meeting and they introduced themselves to the Committee.
7. The Vice Chair welcomed company representatives from United Therapeutics Corporation to the meeting.
8. The Vice Chair asked all Committee members to declare any relevant interests
 - 8.1. Dr Andrew Black, Dr Matthew Bradley, Dr Ian Davidson, Professor Simon Dixon, Mrs Susan Dutton, Dr Susan Griffin, Professor Carol Haigh, Professor John Henderson, Dr Warren Linley, Professor Gary McVeigh, Mr Malcolm Oswald, Professor Oluwafemi Oyevode, Dr Paula Parvulescu, Dr Mohit Sharma and Dr Murray Smith all declared that they knew of no personal specific financial interest, personal non-specific financial interest, non-personal specific financial interest, non-personal non-specific financial interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of dinutuximab for treating high-risk neuroblastoma.
 - 8.2. Ms Tracey Cole declared a non-personal non-specific financial interest as Neurological Commissioning Support (NCS), the company she worked at on secondment between October 2012 and May 2013, received grants from some of the companies listed. Ms Cole was not involved and did not receive payment personally.

8.2.1. It was agreed that this declaration would not prevent Ms Cole from participating in this section of the meeting.

9. The Vice Chair asked all NICE Staff to declare any relevant interests.

9.1. All declared that they knew of no personal specific financial interest, personal non-specific financial interest, non-personal specific financial interest, non-personal non-specific financial interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of Dinutuximab for treating high-risk neuroblastoma.

10. The Vice Chair asked all other invited guests (ERG and invited experts, not including observers) to declare their relevant interests.

10.1. Nicholas Bird, Claire Rothery, Pedro Saramago, Stephen Smith and Nerys Woolacott declared that they knew of no personal specific financial interest, personal non-specific financial interest, non-personal specific financial interest, non-personal non-specific financial interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of Dinutuximab for treating high-risk neuroblastoma.

10.2. Dr Juliet Gray declared a personal non-specific non-financial interest as she is the UK Chief investigator for the SIOPEN ch14.18/CHO Long Term Infusion study trial in Neuroblastoma which involves a similar, but different antibody to dinutuximab. Neither Dr Gray nor her department received payment for this work.

10.2.1. It was agreed that this declaration would not prevent Dr Gray from participating in this section of the meeting

10.3. Dr Martin Elliott declared a personal non-specific non-financial interest as he is the UK Chief Investigator of the SOPIEN HR-NB1 trial which involves a similar but different antibody to dinutuximab. Neither Dr Elliott nor his department received payment for this work.

10.3.1. It was agreed that this declaration would not prevent Dr Elliott from participating in this section of the meeting

11. The Vice Chair introduced the lead team, Professor Carol Haigh, Mr Malcolm Oswald and Dr Murray Smith who gave presentations on the clinical effectiveness and cost effectiveness of dinutuximab for treating high-risk neuroblastoma.

12. The Committee then discussed the clinical effectiveness, patient perspective and cost effectiveness of dinutuximab for treating high-risk neuroblastoma on the basis of the evidence before them, and potential equality issues raised in this appraisal. They sought clarification and advice from the experts present. The discussions included:

12.1. Whether the clinical consensus definition of 'high-risk' neuroblastoma matches the population included in the ANBL0032

12.2. Whether children or young adults with persistent/refractory disease can be candidates for treatment with dinutuximab

- 12.3. Which analysis of the trial data is most appropriate for evaluation of the natural history and treatment effect of dinutuximab on event-free and overall survival; for use in the economic analysis
- 12.4. Whether children or young adults deemed cured of the disease have the same clinical outcomes as a control population
- 12.5. Whether it is possible to draw conclusions on the clinical efficacy of dinutuximab in specific patient subgroups
- 12.6. Whether the company's proposed arrangements for procuring GM-CSF are robust enough to satisfy the Committee
- 12.7. Whether a cure assumption at 5 years or 10 years is appropriate for the economic model
- 12.8. Whether the company's mortality assumptions in the failure health state (5.1% monthly) and stable health states (general population mortality) after the cure threshold are appropriate
- 12.9. What the most appropriate administration costs for dinutuximab and interleukin-2 are
- 12.10. Which utility values are most appropriate
- 12.11. What is the most likely cost-effectiveness estimate
- 12.12. Whether the non-reference case discount value of 1.5% for costs and outcomes is applicable
- 12.13. Whether the dinutuximab should be considered an end-of-life treatment

13. The Chair asked the company representatives whether they wished to comment on any matters of factual accuracy.
14. The Chair explained that "representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest" (Section 1(2) Public Bodies (Admission to Meetings) Act 1960)" and all public attendees left the meeting.
15. The Chair then thanked the experts and company for their attendance, participation and contribution to the appraisal and they left the meeting.

Part 2 – Closed session

16. The Committee continued to discuss the clinical and cost effectiveness of Dinutuximab for treating high-risk neuroblastoma.
17. The Committee instructed the technical team to prepare the Appraisal Consultation Document (ACD) in line with their decisions.

Appraisal of Radium-223 dichloride for treating metastatic hormone–relapsed prostate cancer with bone metastases

Part 1 – Open session

18. The Chair welcomed company representatives from Bayer PLC to the meeting.
19. The Chair asked all Committee members to declare any relevant interests.
 - 19.1. Professor Gary McVeigh, Dr Andrew Black, Dr Matthew Bradley, Dr Ian Davidson, Mrs Susan Dutton, Dr Susan Griffin, Professor Carol Haigh, Professor John Henderson, Dr Warren Linley, Mr Malcolm Oswald, Professor Oluwafemi Oyevode, Dr Paula Parvulescu, Dr Mohit Sharma and Dr Murray Smith all declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of Radium-223 dichloride for treating metastatic hormone-relapsed prostate cancer with bone metastases.
 - 19.2. Professor Simon Dixon was absent from this section of the meeting due to a conflict of interest. Professor Dixon declared that he has undertaken private work for Astellas in the last 12 months which is part of the treatment pathway for prostate cancer. It was agreed that Professor Dixon would not participate in the appraisal of Radium-223 dichloride for treating metastatic hormone-relapsed prostate cancer with bone metastases.
20. The Chair asked all NICE Staff to declare any relevant interests.
 - 20.1. All declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of Radium-223 dichloride for treating metastatic hormone-relapsed prostate cancer with bone metastases.
21. The Chair introduced the key themes arising from the consultation responses to the Appraisal Consultation Document (ACD) received from consultees, commentators and through the NICE website.
22. The Committee proceeded to discuss the clinical effectiveness and cost effectiveness of Radium-223 dichloride for treating metastatic hormone-relapsed prostate cancer with bone metastases on the basis of the evidence before them. The discussions included:
 - 22.1. Consideration of the comments received from consultees on the third appraisal consultation document
 - 22.2. Consideration of the potential equality issue raised during consultation
23. The Chair asked the company representatives whether they wished to comment on any matters of factual accuracy.
24. The Chair explained that “representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be

prejudicial to the public interest" (Section 1(2) Public Bodies (Admission to Meetings) Act 1960)" and all public attendees left the meeting.

25. The Chair then thanked the company representatives for their attendance, participation and contribution to the appraisal and they left the meeting.

Part 2 – Closed session

26. The Committee continued to discuss the clinical and cost effectiveness of Radium-223 dichloride for treating metastatic hormone-relapsed prostate cancer with bone metastases.
27. The Committee instructed the technical team to prepare the Final Appraisal Determination (FAD) in line with their decisions.

Date, time and venue of the next meeting

28. Wednesday 4 November 2015, 10:00 to 17:00 at National Institute for Health and Care Excellence, Level 1A, City Tower, Piccadilly Plaza, Manchester M1 4BT.