

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Health Technology Evaluation

Toripalimab with chemotherapy for untreated recurrent or metastatic nasopharyngeal cancer [ID6406]

Final scope

Draft remit/evaluation objective

To appraise the clinical and cost effectiveness of toripalimab with chemotherapy within its marketing authorisation for treating recurrent, not amenable to surgery or radiotherapy, or metastatic nasopharyngeal cancer.

Background

Nasopharyngeal cancer (NPC) is a type of head and neck cancer that arises from abnormal and uncontrolled cell growth at the part of the throat connecting the back of the nose to the back of the mouth (the nasopharynx). The 4 types of NPC include keratinizing, non-keratinizing (differentiated and non-differentiated) and basaloid squamous cell carcinoma.

NPC can be difficult to recognise early as symptoms often present after the cancer has progressed to a later stage. Symptoms can include nosebleeds, headaches, hearing loss and a lump in the neck that persists for more than 3 weeks. The exact cause of NPC is unknown, but risk factors can include smoking and coming into contact with the Epstein-Barr virus (EBV), a common virus that causes glandular fever.

Around 260 people are diagnosed with NPC in the UK every year.¹ It is more common in men than women. NPC makes up around 2% of all head and neck cancer cases. Since the early 1990s, head and neck cancer incidence rates have increased by more than 36% in the UK. Rates in females have increased by 48% and rates in males have increased by 24%.² In England in 2023 there were 128 recorded deaths for 'Malignant neoplasm of nasopharynx'.³

Recurrent or metastatic NPC that is not suitable for surgery can be treated with first-line systemic chemotherapy or radiotherapy. There are no licensed treatments for later lines of treatment. Surgery is often not possible due to the affected areas being difficult to access.

The technology

Toripalimab (Loqtorzi, LEO Pharma) is indicated in combination with cisplatin and gemcitabine for the first-line treatment of recurrent, not amenable to surgery or radiotherapy, or metastatic nasopharyngeal carcinoma in adults.

Intervention(s)	Toripalimab with cisplatin and gemcitabine
Population(s)	Adults with recurrent, not amenable to surgery or radiotherapy, or metastatic nasopharyngeal cancer

Comparators	<ul style="list-style-type: none"> • Chemotherapy without toripalimab including: <ul style="list-style-type: none"> ○ Cisplatin ○ Gemcitabine ○ fluorouracil (5FU) ○ docetaxel ○ paclitaxel ○ capecitabine • Best supportive care
Outcomes	<p>The outcome measures to be considered include:</p> <ul style="list-style-type: none"> • overall survival • progression-free survival • response rate • duration of response • adverse effects of treatment • health-related quality of life.
Economic analysis	<p>The reference case stipulates that the cost effectiveness of treatments should be expressed in terms of incremental cost per quality-adjusted life year.</p> <p>The reference case stipulates that the time horizon for estimating clinical and cost effectiveness should be sufficiently long to reflect any differences in costs or outcomes between the technologies being compared.</p> <p>Costs will be considered from an NHS and Personal Social Services perspective.</p>
Other considerations	<p>Guidance will only be issued in accordance with the marketing authorisation. Where the wording of the therapeutic indication does not include specific treatment combinations, guidance will be issued only in the context of the evidence that has underpinned the marketing authorisation granted by the regulator.</p>
Related NICE recommendations	<p>Related technology appraisals in development:</p> <p>Tislelizumab with chemotherapy for untreated recurrent or metastatic nasopharyngeal cancer. NICE technology appraisal guidance [ID6304] Publication date to be confirmed</p> <p>Related NICE guidelines:</p> <p>Cancer of the upper aerodigestive tract: assessment and management in people aged 16 and over (2016) NICE guideline 36. Review date not stated.</p>

References

1. Cancer Research UK (2024). [What is nasopharyngeal cancer?](#) Accessed September 2025.
2. Cancer Research UK (2019) [Head and neck cancers statistics](#). Accessed September 2025.
3. Office for National Statistics, NOMIS. (2023). [Mortality statistics - underlying cause, sex and age](#). Accessed September 2025.