Health Technology Appraisal

In my personal statement submitted prior to the ACD meeting in Manchester on JULY 9th, 2008 I made specific reference to the following :

- The new clinical evidence presented at the ASCO meeting of April 2008 in Extract 5024 which reported the very significant improvements in life expectancy as a result of the use of Sunitinib (SUTENT).
- The price reduction of approx. 18.5% offered by Pfizer on the cost of Sutent.

Both of these absolutely crucial pieces of evidence were deliberately excluded from the interim Appraisal decision NOT to fund ANY of the drugs under review.

I am bemused and outraged that NICE can now present this new evidence a full 5 months later as if it were a revelation. During that period over 3000 people will have been diagnosed with RCC and over 1000 will have died as a consequence of this dreadful and lethal disease. NICE bureaucratic processes and lack of urgency have denied and will continue to deny Sutent to those who need it NOW. I have recent evidence to show that PCTs are sitting on their hands refusing to fund Sutent until the NICE FAD which looks like it will be delayed until April 2009.

This state of affairs is a scandal.

My observations are :

- There is no doubt that ASCO 5024 demonstrates the clinical effectiveness of Sutent. NICE should issue an immediate guidance to this effect.
- The cost effectiveness calculations are now led by the Pfizer price reduction and the recent changes to DoH guidance to NICE on the value of end of life drugs.
- Sir Mike Richards also drew attention to the interminable slowness of the NICE processes this appraisal review of the anti-kidney cancer drugs will report a full 3 years after the drugs were licensed in the UK.
- These drugs and Sutent in particular are now and have been for some time the first line treatments for RCC in Europe and the USA. NICE has procrastinated and prevaricated with demands for standards of evidence which are ludicrously high. Hence patients and their families are left in limbo whilst the process grinds on and on.
- The new Appraisal meetings are not guaranteed to include patients or their carers or those who attended the Appraisal meeting in July 2008. This is an omission which should be rectified immediately by inviting all who attended the Manchester Review to attend the new meeting in January 2009.

• NICE have been forced to release the executable model of the algorithm of cost effectiveness. This model should be independently reviewed by Health Economists who should report back to the Appraisal meeting in January with their critique and recommendations for change.

The current first line treatments for RCC (Interleukin and Interferon) are extremely toxic and clinically ineffective . NICE must issue guidance NOW on the availability and use of Sutent –as a very minimum. People are dying early waiting for a process which never ends.