

Cetuximab, bevacizumab and panitumumab for metastatic colorectal cancer after first-line chemotherapy

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS.

This document is about when **cetuximab, bevacizumab and panitumumab** should be used to treat people with metastatic colorectal cancer in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people with metastatic colorectal cancer but it may also be useful for their families or carers or for anyone with an interest in the condition.

It does not describe metastatic colorectal cancer or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on page 4.

There are several possible treatments for metastatic colorectal cancer. Your healthcare team should talk to you about the treatment options available.

What has NICE said?

NICE does not recommend cetuximab (on its own or in combination with chemotherapy) for people with metastatic colorectal cancer that has progressed (worsened) after first-line (first course) chemotherapy.

NICE does not recommend bevacizumab in combination with a fluoropyrimidine-based chemotherapy regimen for people with metastatic colorectal cancer that has progressed after first-line chemotherapy.

NICE does not recommend panitumumab on its own for people with metastatic colorectal cancer that has progressed after first-line chemotherapy.

Why has NICE said this?

NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE applies special considerations to treatments that can extend the lives of people who are nearing the end of their life.

Cetuximab does not provide enough benefit to patients to justify its high cost and did not qualify for special consideration.

There was no evidence available to assess whether bevacizumab in combination with a fluoropyrimidine-based chemotherapy regimen works for people with metastatic colorectal cancer that has worsened after first-line chemotherapy, so NICE could not recommend it.

Panitumumab does not provide enough benefit to patients to justify its high cost even when the special considerations were applied.

Metastatic colorectal cancer

Colorectal cancer, also known as bowel cancer, affects parts of the bowel called the colon or rectum. It is described as metastatic if it has spread from the colon or rectum to other parts of the body.

Cetuximab, bevacizumab and panitumumab

Cetuximab and panitumumab are drugs that bind to a protein found on some cancer cells, stopping the cells from multiplying. Bevacizumab is a drug that stops the growth of new blood vessels in a tumour. It can be given in combination with a type of drug called a fluoropyrimidine.

What does this mean for me?

Cetuximab, bevacizumab and panitumumab should not normally be prescribed on the NHS for metastatic colorectal cancer that has progressed after first-line chemotherapy. Your doctor should talk to you about other treatment options available to you. If you are currently receiving cetuximab, bevacizumab or panitumumab for metastatic colorectal cancer you should be able to continue your treatment until you and your doctor consider it's the right time to stop.

NICE will decide whether to review this guidance in January 2015.

More information

The organisations below can provide more information and support for people with metastatic colorectal cancer. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- Beating Bowel Cancer, 0845 071 9301
www.beatingbowelcancer.org
- Bowel Cancer UK, 0800 840 3540
www.bowelcanceruk.org.uk
- CancerHelp UK – the patient information website of Cancer Research UK, 0808 800 4040
cancerhelp.cancerresearchuk.org
- Macmillan Cancer Support, 0808 808 0000
www.macmillan.org.uk

NHS Choices (www.nhs.uk) may be a good place to find out more. Your local patient advice and liaison service (usually known as ‘PALS’) may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.

About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the disease and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This document and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/guidance/TA242

The NICE website has a screen reader service called Browsealoud, which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

We encourage NHS and voluntary organisations to use text from this leaflet in their own information about metastatic colorectal cancer.

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