Erlotinib as first-line treatment for locally advanced or metastatic non-small-cell lung cancer

This document is about when erlotinib should be used to treat people with locally advanced or metastatic non-small-cell lung 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 locally advanced or metastatic non-small-cell lung 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 locally advanced or metastatic non-small-cell lung cancer or the treatments in detail – your specialist should discuss these with you. You can get more information from the organisations listed on page 4.
What has NICE said?
NICE recommends erlotinib as a possible first-line treatment (that is, if you have not had drug treatment before) for some people with locally advanced or metastatic non-small-cell lung cancer (see below).

Who can have erlotinib?
You should be able to have erlotinib if you have a type of locally advanced or metastatic non-small-cell lung cancer that has tested positive for mutations (changes) to EGFR-TK (which stands for epidermal growth factor receptor tyrosine kinase) in the cancer cells.

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 recommended erlotinib because it works as well other treatments available on the NHS, and costs about the same.

Non-small-cell lung cancer
Cancer affecting the lungs is grouped into two main types depending on how it looks under the microscope: small-cell lung cancer and non-small-cell lung cancer.

Symptoms of non-small-cell lung cancer include persistent coughing, coughing up blood, shortness of breath, chest pain, tiredness and weight loss.

A small sample of lung cancer tissue can be tested to check whether the cells have EGFR-TK mutations. The EGFR-TK mutation produces a
protein that is involved in cancer cell growth and causes cancer cells to grow more quickly. If the cancer cells do have the mutations, the cancer is ‘EGFR-TK mutation-positive’. The EGFR-TK mutations make the cancer more likely to respond to drugs that block the action of the EGFR.

Cancer that is locally advanced or metastatic has spread to the surrounding tissues or other parts of the body.

**Erlotinib**

Erlotinib (also known as Tarceva) is an anticancer drug. It works by blocking the action of the EGFR, which stops the cancer growing.

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**What does this mean for me?**

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you have locally advanced or metastatic non-small-cell lung cancer, and you and your doctor think that erlotinib is the right treatment for you (see ‘What has NICE said?’ on page 2), you should be able to have the treatment on the NHS. Please see [www.nice.org.uk/aboutguidance](http://www.nice.org.uk/aboutguidance) if you think you are eligible for the treatment but it is not available.
More information

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

- British Lung Foundation, 03000 030 555
  www.lunguk.org
- CancerHelp UK – the patient information website of Cancer Research UK, 0808 800 4040
  www.cancerhelp.org.uk
- Macmillan Cancer Support, 0808 808 0000
  www.macmillan.org.uk
- Marie Curie Cancer Care, 0800 716 146
  www.mariecurie.org.uk
- The Roy Castle Lung Cancer Foundation, 0800 358 7200
  www.roycastle.org

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/TA258

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 document in their own information about npn-small-cell lung cancer.

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