

# Guidance on the use of fludarabine for B-cell chronic lymphocytic leukaemia

**Technology Appraisal  
Guidance No. 29**

**Issue Date   September 2001  
Review Date   August 2004**

## 1. Guidance

- 1.1 Oral fludarabine is recommended as second line therapy for B-cell chronic lymphocytic leukaemia (CLL) for patients who have either failed, or are intolerant of, first line chemotherapy, and who would otherwise have received combination chemotherapy of either:
  - 1.1.1 cyclophosphamide, doxorubicin, vincristine and prednisolone (CHOP)
  - 1.1.2 cyclophosphamide, doxorubicin and prednisolone (CAP) or
  - 1.1.3 cyclophosphamide, vincristine and prednisolone (CVP)
- 1.2 The oral formulation of fludarabine is preferred to the intravenous formulation on the basis of more favourable cost effectiveness. Intravenous fludarabine should only be used when oral fludarabine is contra-indicated.

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This section (Section 1) constitutes the Institute's guidance on the use of fludarabine for B-cell chronic lymphocytic leukaemia. The remainder of the document is structured in the following way:

- |                            |                                      |
|----------------------------|--------------------------------------|
| 2 Clinical Need            | 8 Review of Guidance                 |
| 3 The Technology           | Appendix A: Appraisal Committee      |
| 4 Evidence                 | Appendix B: Sources of Evidence      |
| 5 Implications for the NHS | Appendix C: Information for Patients |
| 6 Implementation           | Appendix D: Staging Systems          |
| 7 Further Research         |                                      |

The full document and a Summary of Evidence are available from our website at [www.nice.org.uk](http://www.nice.org.uk) or by telephoning 0870 1555 455 and quoting the reference number N0025.

# Arweiniad ar ddefnyddio fludarabine ar gyfer lewcemia lymffocytig cronig cell-B

**Arweiniad Gwerthuso  
Technoleg Rhif 29**

Dyddiad  
Cyhoeddi

Medi 2001

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Arolygu

Awst 2004

## 1 Arweiniad

- 1.1 Argymhellir cymryd fludarabine drwy'r genau fel therapi ail linell ar gyfer lewcemia lymffocytig cronig cell-B ar gyfer cleifion sydd naill ai wedi methu cael, neu sy'n methu dioddef cemotherapi llinell gyntaf, ac a fyddai fel arall wedi cael cemotherapi cyfunol o naill ai:
- 1.1.1 cyclophosphamide, doxorubicin, vincristine a prednisolone (CHOP)
  - 1.1.2 cyclophosphamide, doxorubicin a prednisolone (CAP)
  - 1.1.3 cyclophosphamide, vincristine a prednisolone (CVP)
- 1.2 Mae'n well defnyddio'r ffurf ar fludarabine a gymerir drwy'r genau yn hytrach na'r ffurf fewnwythiennol oherwydd ei bod yn fwy cost-effeithiol. Dim ond pan fydd fludarabine drwy'r genau wed'i wrthgymeradwyo y dylid defnyddio fludarabine mewnwythiennol.

Mae'r adran hon (Adran 1) yn cynnwys Arweiniad y Sefydliad ar ddefnyddio fludarabine ar gyfer lewcemia lymffocytig cronig cell-B. Trefnir gweddill y ddogfen fel a ganlyn:

- |                       |                                    |
|-----------------------|------------------------------------|
| 2 Angen Clinigol      | 8 Arolygu'r Arweiniad              |
| 3 Y Dechnoleg         | Atodiad A: Pwyllgor Arfarnu        |
| 4 Tystiolaeth         | Atodiad B: Ffynonellau tystiolaeth |
| 5 Goblygiadau i'r NHS | Atodiad C: Gwybodaeth i gleifion   |
| 6 Gweithredu          | Atodiad D: Systemau graddio        |
| 7 Rhagor o Ymchwil    |                                    |

Mae'r ddogfen lawn a Chrynodeb o'r Dystiolaeth ar gael ar ein gwefan ar [www.nice.org.uk](http://www.nice.org.uk) neu drwy ffonio 0870 1555 455 gan ddifynnu'r cyfeirnod N0025.