



Regorafenib for metastatic colorectal cancer after treatment for metastatic disease (terminated appraisal)

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Advice

NICE is unable to make a recommendation about the use in the NHS of regorafenib for metastatic colorectal cancer after treatment for metastatic disease because no evidence submission was received from Bayer for the technology.

Background

Bayer was invited to submit evidence for this single technology appraisal for regorafenib in May 2013. The appraisal was suspended shortly afterwards because the company explained that there was no evidence base on which to compare regorafenib for metastatic colorectal cancer with standard care in the UK. However, the company expected that an ongoing trial would provide these data, and that the trial was expected to complete in 2014.

The company has now reviewed the baseline characteristics of the people recruited to that trial. It considered that the number of people in the trial who have had care equivalent to standard care in the UK is too small to form the basis of a submission for this appraisal.

NICE has therefore terminated this single technology appraisal.

Information

NHS organisations should take into account the reasons why the company did not make an evidence submission when considering whether or not to recommend local use of regorafenib for metastatic colorectal cancer after treatment for metastatic disease. If, after doing this, organisations still wish to consider regorafenib for metastatic colorectal cancer after treatment for metastatic disease, they should follow the advice on rational local decision-making in the NHS Constitution for England and the NHS Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012, which outlines the approach that should be adopted in circumstances in which NICE guidance is unavailable.

NICE will review the position at any point if the company indicates that it wishes to make a full submission.

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