## NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

# **Review Proposal Project**

NICE Technology Appraisal No.347; Nintedanib for previously treated locally advanced, metastatic, or locally recurrent non-small-cell lung cancer, No.374; Erlotinib and gefitinib for treating non-small-cell lung cancer that has progressed following prior chemotherapy (Review of TA162 and TA175), No.395; Ceritinib for previously treated anaplastic lymphoma kinase positive non-small-cell lung cancer, No.403; Ramucirumab for previously treated locally advanced or metastatic non-small-cell lung cancer, No.422; Crizotinib for the treatment of previously treated non-small-cell lung cancer associated with an anaplastic lymphoma kinase fusion gene (review of TA296) and No.428; Pembrolizumab for treating PD-L1-positive non-small-cell lung cancer after platinum-based chemotherapy

#### Stakeholder list of consultees and commentators

Consultees	Commentators (no right to submit or
	appeal)
Company	General commentators
AstraZeneca (gefitinib)	All Wales Therapeutics and Toxicology
Boehringer Ingelheim (nintedanib)	Centre
Eli Lilly (ramucirumab)	Allied Health Professionals Federation
Merck (pembrolizumab)	Board of Community Health Councils in Wales
Novartis (ceritinib)  Diagram (coincide)	British National Formulary
Pfizer (crizotinib)     Pecha (criefinib)	Care Quality Commission
Roche (erlotinib)	Department of Health, Social Services
Patient/carer groups	and Public Safety for Northern Ireland
Black Health Agency	Healthcare Improvement Scotland
British Lung Foundation	Medicines and Healthcare Products
Cancer Black Care	Regulatory Agency
Cancer Equality	National Association of Primary Care
Helen Rollason Cancer Charity	National Pharmacy Association
Independent Cancer Patients Voice	NHS Alliance
Macmillan Cancer Support	NHS Confederation
Maggie's Centres	Scottish Medicines Consortium
Marie Curie	Welsh Health Specialised Services
Muslim Council of Britain	Committee
Roy Castle Lung Cancer Foundation	0
South Asian Health Foundation	Comparators
Specialised Healthcare Alliance	Accord Healthcare (docetaxel)
Tenovus Cancer Care	medac (docetaxel)     Dfizer (decetaxel)
UK Lung Cancer Coalition	<ul><li>Pfizer (docetaxel)</li><li>Sanofi (docetaxel)</li></ul>
	<ul><li>Sanoti (docetaxel)</li><li>Seacross Pharmaceuticals (docetaxel)</li></ul>
Professional groups	
<ul><li><u>Professional groups</u></li><li>Association of Cancer Physicians</li></ul>	Relevant research groups
Association of Cancer Physicians	Cochrane Lung Cancer Group

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- Association of Respiratory Nurse Specialists
- British Geriatrics Society
- British Psychosocial Oncology Society (BPOS)
- British Thoracic Oncology Group
- British Thoracic Society
- Cancer Research UK
- National Lung Cancer Forum for Nurses
- Primary Care Respiratory Society
- Royal College of General Practitioners
- Royal College of Nursing
- Royal College of Pathologists
- Royal College of Physicians
- Royal Pharmaceutical Society
- Royal Society of Medicine
- UK Clinical Pharmacy Association
- UK Oncology Nursing Society

### Others

- Department of Health and Social Care
- NHS England
- Welsh Government
- NHS Birmingham South and Central CCG
- NHS West Cheshire CCG

- Institute of Cancer Research
- MRC Clinical Trials Unit
- National Cancer Research Institute
- National Cancer Research Network
- National Institute for Health Research

#### <u>Associated Public Health Groups</u>

- Public Health England
- Public Health Wales

NICE is committed to promoting equality, eliminating unlawful discrimination and fostering good relations between people who share a protected characteristic and those who do not. Please let us know if we have missed any important organisations from the stakeholder list, and which organisations we should include that have a particular focus on relevant equality issues.

PTO FOR DEFINITIONS OF CONSULTEES AND COMMENTATORS

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## Consultees

Organisations that accept an invitation to participate in the appraisal; the company that markets the technology; national professional organisations; national patient organisations; the Department of Health and Social Care and the Welsh Government and relevant NHS organisations in England.

The company that markets the technology is invited to prepare a submission dossier, can respond to consultations, nominate clinical experts and has the right to appeal against the Final Appraisal Document (FAD).

All non- company consultees are invited to prepare a submission dossier respond to consultations on the draft scope, the Assessment Report and the Appraisal Consultation Document. They can nominate clinical or patient experts and have the right to appeal against the Final Appraisal Document (FAD).

#### **Commentators**

Organisations that engage in the appraisal process but are not asked to prepare a submission dossier. Commentators are able to respond to consultations and they receive the FAD for information only, without right of appeal. These organisations are: companies that market comparator technologies; Healthcare Improvement Scotland; related research groups where appropriate (for example, the Medical Research Council [MRC], National Cancer Research Institute); other groups (for example, the NHS Confederation, and the British National Formulary.

All non-company organisations can nominate clinical or patient experts to present their personal views to the Appraisal Committee.