

Panobinostat for treating multiple myeloma after at least 2 previous treatments

Information for the public

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What has NICE said?

Panobinostat (Farydak), given with drugs called bortezomib and dexamethasone, is recommended as a possible treatment for people with multiple myeloma only if:

- their disease has not responded to therapy, or responded but then gotten worse
- they have already had at least 2 other treatments including bortezomib and an immunomodulatory drug.

What does this mean for me?

If you have multiple myeloma, and your doctor thinks that panobinostat is the right treatment, you should be able to have the treatment on the NHS.

Panobinostat should be available on the NHS within 3 months of the guidance being issued.

Why has NICE said this?

Panobinostat was recommended because the benefits to patients justify its cost.

NICE looks at how well treatments work in relation to how much they cost compared with other treatments available on the NHS.

The condition and the treatment(s)

Multiple myeloma is a type of cancer that affects cells in the bone marrow. Symptoms can include bone pain, bone fractures, anaemia, loss of appetite, excessive bleeding after cuts or scrapes, and frequent infections.

When given with drugs called bortezomib and dexamethasone, panobinostat helps to stop normal cells changing into cancer cells.

[NHS Choices](#) may be a good place to find out more.

Sources of advice and support

- Myeloma UK, 0800 980 3332
www.myeloma.org.uk
- Leukaemia Care, 08088 010 444
www.leukaemiacare.org.uk
- Bloodwise, 0207 504 2200
www.bloodwise.org.uk
- Cancer Research UK, 0808 800 4040
www.cancerresearchuk.org/about-cancer
- Macmillan Cancer Support, 0808 808 0000
www.macmillan.org.uk

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Accreditation

