

Topotecan, pegylated liposomal doxorubicin hydrochloride, paclitaxel, trabectedin and gemcitabine for treating recurrent ovarian cancer

Information for the public

Published: 26 April 2016

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What has NICE said?

For recurrent ovarian cancer, the following possible treatments are recommended:

- paclitaxel (also known as Taxol) on its own or with platinum
- pegylated liposomal doxorubicin hydrochloride (PLDH, also known as Caelyx) on its own or with platinum.

For ovarian cancer that has recurred for the first time and is platinum-sensitive, NICE does not recommend gemcitabine (Gemzar) with carboplatin (Paraplatin), trabectedin (Yondelis) with PLDH, or topotecan (Hycamtin or Potactasol). Topotecan is also not recommended for

treating recurrent ovarian cancer that is platinum-resistant or platinum-refractory.

What does this mean for me?

If you have recurrent ovarian cancer and your doctor thinks that paclitaxel on its own or with platinum, or pegylated liposomal doxorubicin hydrochloride (PLDH) on its own, is the right treatment, you should be able to have the treatment on the NHS.

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

You may be able to have PLDH with platinum treatment on the NHS as long as your doctor gets your written consent to have it and the NHS within your area agrees to provide it.

If you are already taking gemcitabine with carboplatin, trabectedin with PLDH, or topotecan for recurrent ovarian cancer, you should be able to continue taking it until you and your doctor decide it is the right time to stop.

Why has NICE said this?

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

Paclitaxel and pegylated liposomal doxorubicin hydrochloride (PLDH), each on its own or with platinum, were recommended because they work better and cost less than other treatments available on the NHS.

Gemcitabine with carboplatin and trabectedin with PLDH were not recommended because although they work about as well as other treatments available on the NHS they cost more.

Topotecan was not recommended because it does not work as well as other treatments available on the NHS and costs more.

The condition and the treatments

The ovaries are part of the female reproductive system. Recurrent ovarian cancer is cancer that has come back some time after you were first treated. Treatment can control it, sometimes for many months or a few years.

In the early stages of ovarian cancer, the first treatment is usually platinum-based chemotherapy. Ovarian cancer can be divided into types:

- platinum-refractory: cancer that has not responded to platinum-based chemotherapy
- platinum-resistant: cancer that responded to platinum-based chemotherapy but has come back within 6 months of treatment
- platinum-sensitive: cancer that responded to platinum-based chemotherapy but has come back 6 months or more after treatment.

Paclitaxel (also known as Taxol), pegylated liposomal doxorubicin hydrochloride (PLDH, also known as Caelyx), gemcitabine (Gemzar), carboplatin (Paraplatin), trabectedin (Yondelis) and topotecan (Hycamtin or Potactasol) are chemotherapy drugs, used to kill cancer cells.

Sources of advice and support

- [Macmillan Cancer Support](#), 0808 808 0000
- [Cancer Research UK Patient Information](#) (previously CancerHelp UK), 0808 800 4040
- [Ovarian Cancer Action](#), 0207 380 1730
- [Ovacome](#), 0845 371 0554
- [Target Ovarian Cancer](#), 0207 923 5470

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ISBN: 978-1-4731-1821-8

Accreditation

