

HEALTH TECHNOLOGY APPRAISAL: Cinacalcet Hydrochloride for hyperparathyroidism in patients with end stage renal disease on maintenance dialysis Appraisal Consultation Document (ACD)	
To: NICE	FROM: NHS Quality Improvement Scotland

Reviewer 1

i) Whether all the relevant evidence has been taken into account?

Yes. I think the document is wholly encompassing of the relevant information.

ii) Whether the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence and that the preliminary views on the resource impact and implications for the NHS are appropriate?

I think the summaries very carefully considered the evidence and the interpretation regarding clinical benefit and cost effectiveness most reasonable.

iii) Whether the provisional recommendations of the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance to the NHS?

Yes. The Appraisal Committee have done a very good job and I think their recommendations are extremely sound and relevant to current NHS practice.

Reviewer 2

i) Whether all the relevant evidence has been taken into account?

Yes

ii) Whether the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence and that the preliminary views on the resource impact and implications for the NHS are appropriate?

Yes

iii) Whether you consider that the provisional recommendations of the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance to the NHS?

Yes

Reviewer 3.

i) Whether all the relevant evidence has been taken into account?

Yes, but have to accept that there is a paucity of relevant evidence and short-term followup in RCTs; and in certain patient sub-groups there is no evidence (because of lack of appropriate trials rather than trial evidence of lack of benefit).

ii) Whether the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence and that the preliminary views on the resource impact and implications for the NHS are appropriate?

Without seeing the original assessment report, it is difficult to answer this question. Conclusions appear to rely on assumption that intermediate end-points (biochemical markers eg PTH) relate to clinical events.

iii) Whether you consider that the provisional recommendations of the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance to the NHS?

Committee have accepted that the trials have shown that cinacalcet was effective in reducing levels of PTH, and that there was an observed reduction in adverse clinical outcomes – but state caveat that the trials were not designed to look at clinical outcomes. Committee then use PTH (and make assumptions on clinical benefits) as a marker of risk of adverse clinical events in cost-effectiveness analyses and conclude that Cinacalcet is unlikely to be a cost-effective use of NHS resources. Issues for specific groups eg post-parathyroidectomy hyperparathyroidism, mediastinal parathyroid adenomas etc not addressed. Lack of evidence in these groups might not equate with lack of benefit clinically or on cost-effectiveness.

In summary I interpret their conclusions are probably accepting clinical benefit, but are overall not supportive on the basis of cost-effectiveness. These conclusions might be difficult to support on the basis of the available evidence. I think problem sub-groups of patients may need to be addressed separately – prevalence of them is not clear.

Reviewer 4.

This is a complex topic, but the overriding impression is that although Cinacalcet is accepted as doing what it is biochemically designed to do in terms of calcium and phosphate metabolism, the studies have not been designed to determine whether this has any meaningful effect on clinical outcomes. In the absence of such studies, the only conclusion available is the one reached, ie that this agent should not be made available

given the high costs. I know of no other evidence that might have been considered, and would consider the conclusion to be soundly based.

10 July 2006