

Guidance on the use of temozolomide for the treatment of recurrent malignant glioma (brain cancer)

Information for the public

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www.nice.org.uk

What has NICE said?

Temozolomide (Temodal) is recommended as a possible treatment for people with brain cancer or malignant glioma, such as glioblastoma multiforme or anaplastic astrocytoma, only if:

- the cancer has come back or got worse after standard treatment
- the person has a Karnofsky performance status greater than or equal to 70 and
- the person is expected to live for 12 weeks or more.

What does this mean for me?

If you have malignant glioma, and your doctor thinks that temozolomide is the right treatment, you should be able to have the treatment on the NHS.

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

If you are not eligible for treatment as described above, you should be able to continue taking temozolomide 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.

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

The condition and the treatment

Malignant gliomas are the most common type of brain tumour. They are usually treated with surgery and radiotherapy, and sometimes chemotherapy as well.

Temozolomide (Temodal) is a chemotherapy treatment which is given as a tablet once a day for 5 days out of 28. It is toxic to cancer cells because it crosses from the blood supply into the brain.

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

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