



## Summary of NICE Guidelines

Title	Lung cancer (non-small-cell, advanced or metastatic maintenance treatment) - erlotinib (monotherapy): guidance
NICE Reference	TA227
Date of Review:	31/04/2013
Date of Publication	27/06/2011
Summary of Guidance (Max 250 words)	<ul style="list-style-type: none"><li>• A randomized double blind controlled clinical trial was performed to assess the efficacy of erlotinib (an orally active inhibitor of the epidermal growth factor receptor (EGFR) kinase) to prevent further disease progression (maintenance treatment) of non-small-cell lung cancer. The trial consisted of patients who had stable disease after first-line chemotherapy, were fitter younger patients known to respond better to lung cancer treatments. No-one in the trial had received first- line treatment with pemetrexed and cisplatin, (current treatment). There was no explanation regarding the reason why the majority of the survival benefit for erlotinib in one of the disease groups was observed post treatment. Therefore, benefits detected in the trial were unlikely to be reproduced in routine clinical practice. There is considerable uncertainty regarding overall survival for erlotinib compared with best supportive treatment in such patients. It was also concluded that erlotinib could not be considered a cost-effective use of NHS resources in this clinical setting</li><li>• The guidance now suggests that erlotinib monotherapy is not recommended for maintenance treatment in people with locally advanced or metastatic non- small- cell lung cancer with stable disease following platinum- based first-line chemotherapy.</li><li>• The guidance states that patients who currently receive erlotinib monotherapy for maintenance treatment of locally advanced or metastatic non-small-cell lung cancer receive erlotinib monotherapy for maintenance treatment of locally advanced or metastatic non-small-cell lung cancer. Those with stable disease after platinum based first-line chemotherapy should have the option to continue treatment until their clinician considers it appropriate to stop.</li></ul>
Impact on Lab (See Appendix 1)	<input checked="" type="checkbox"/> None
Lab professionals to be made aware	N/A
Please detail the impact of this guideline (Max 150 words)	This guideline has no impact on the provision of pathology services.

## **Appendix 1**

- None:** This NICE guideline has no impact on the provision of laboratory services
- Moderate:** This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.
- Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.

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