

Breast cancer drug approved for NHS England

June 16 2017



The drug trastuzumab emtansine (Kadcyla) will soon be routinely available for patients in England with an advanced type of breast cancer.

NHS England has announced that a discounted deal has been agreed with the manufacturer Roche, which has been backed by the National Institute for Health and Care Excellence (NICE) who previously judged the drug as too expensive.

Professor Arnie Purushotham, Cancer Research UK's senior clinical adviser, said that he was delighted to see the three organisations working together to make it available for patients.

Research has shown that the drug can benefit women with a type of breast cancer called HER2-positive that has spread to other parts of the body, can't be surgically removed and has stopped responding to other treatments.

"NICE recognises that this cancer drug is beneficial for these patients and cost-effective for the NHS, but it is also a kinder [treatment option](#)," said Purushotham.

On average Kadcykla gives patients an extra 6 months of life, but importantly it offers improved quality of life and fewer side-effects compared to other treatments.

More than 46,000 women are diagnosed with breast [cancer](#) in England each year, with the disease responsible for over 9,000 deaths annually.

It's estimated that over 1,000 women each year with advanced HER2-positive [breast cancer](#) will now have routine access to Kadcykla.

The full price for a course of treatment with the drug is around £90,000 per patient. But the terms of the agreement reached between NHS England and Roche are not being disclosed.

NICE last reviewed Kadcykla in 2015, deeming it too expensive for

routine funding, though it has been available via the Cancer Drugs Fund (CDF) since 2013. When the CDF was redesigned in 2016, all the treatments available through it have been subject to review to see whether they should be funded routinely on the NHS.

Today's announcement means that Kadcylya will be permanently funded in England, removing uncertainty for patients and giving doctors a further treatment option.

The drug was approved for use in Scotland earlier this year. The NHS in Wales and Northern Ireland usually follow NICE decisions.

NHS England chief executive Simon Stevens said that the decision between the NHS and Roche required tough negotiation and flexibility, but he believes it offers a good deal for both patients and taxpayers.

While this will be seen as a positive decision, the way new drugs are made available on the NHS is a widely debated topic.

Patients, clinicians and charities remain concerned about the introduction of a potential £20 million a year cap on drug price by NHS England and NICE, which could cause delay of life extending drugs reaching patients.

Provided by Cancer Research UK

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