

National Institute for Health and Clinical Excellence

**Rituximab for the treatment of relapsed/refractory chronic lymphocytic leukaemia**

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Royal College of Nursing

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**Introduction**

With a membership of over 400,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

**Appraisal Consultation Document – RCN Response**

The Royal College of Nursing welcomes the opportunity to review the Appraisal Consultation Document (ACD) of the technology appraisal of Rituximab for the treatment of relapsed/refractory chronic lymphocytic leukaemia. RCN's response to the questions on which comments were requested is set out below:

- i) **Has the relevant evidence been taken into account;**
- ii) **Are the summaries of clinical and cost effectiveness reasonable interpretations of the evidence, and are the preliminary views on the resource impact and implications for the NHS appropriate?**

We consider that the Appraisal Committee has taken the relevant information into account in forming the recommendations in this document. We also consider that the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence.

iii) **Are the provisional recommendations of the Appraisal Committee sound and do they constitute a suitable basis for the preparation of guidance to the NHS?**

This is an important ACD for the treatment of patients with relapsed/refractory CLL as the use of rituximab in this indication can provide significant improvements to patients not only in the response rates and disease free survival but also in improving patients' quality of life through the alleviation of the symptom associated with CLL. This has significant economical and social implications as patients are able to resume normal level of functioning, return to work and reduce their dependency on others.

Although there is a paucity of data for patients with CLL receiving re-treatment with rituximab, as the ACD does not include patients who have been previously treated with rituximab, there will be a significant number of patients with relapsed/refractory CLL who will be ineligible for treatment.

iii) **Are there any equality related issues that need special consideration that are not covered in the ACD?**

There does not appear to be any other equality issues that need special consideration under the ACD.

**Conclusion**

We would welcome guidance to the NHS on the use of this health technology.