The Royal College of Pathologists
Pathology: the science behind the cure

Comments on the Appraisal Consultation Document (ACD) produced for the NICE single technology appraisal of lenalidomide for the treatment of myelodysplastic syndromes associated with a deletion 5q cytogenic abnormality in people with red blood cell transfusion dependence [ID480]

Thank you for the opportunity to comment on the ACD on behalf of the Royal College of Pathologists (RCPath).

RCPath Comments:

1) The decision of the Committee might legitimately be perceived to be discriminatory to individuals who choose not to receive blood products on religious grounds (i.e. Jehovah's Witnesses). While this may not be unlawful it is nonetheless worthy of highlighting as the document makes no mention of this scenario.

2) There is an apparent inconsistency of recommendation here between the use of Lenalidomide in 5q- syndrome and in multiple myeloma that is not clearly explained. These are both malignant haematological conditions for which Lenalidomide is highly effective therapy and yet the few patients with 5q- syndrome are clearly being treated differently to the many patients with myeloma. On face value this appears to be discriminatory by valuing patients with one form of cancer above another despite good evidence to show similar levels of efficacy and improvements in quality of life for both conditions treated with Lenalidomide.

3) It is my considered view that the estimated incremental cost-effectiveness ratio (ICER) for lenalidomide of greater than £70,000 per QALY gained is excessive and fails to appropriately take into consideration the benefits of quality of life improvements in patients with 5q- syndrome.

INVESTORS IN PEOPLE