BREAKTHROUGH BREAST CANCER

Mrs Bijal Joshi
Technology Appraisals Project Manager – Committee A
National Institute for Health and Care Excellence
10 Spring Gardens
London
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3 January 2014

Dear Mrs Joshi,

Multiple Technology Appraisal – INTRABEAM Photon Radiosurgery System for the adjuvant treatment of early breast cancer

Breakthrough Breast Cancer is dedicated to improving and saving lives through breast cancer prevention, early diagnosis, more targeted treatments and better services for everyone affected by breast cancer.

Breakthrough welcomes the opportunity to comment on NICE's multiple technology appraisal of the INTRABEAM Photon Radiosurgery System for the adjuvant treatment of early breast cancer.

Breast cancer

Breast cancer is the most common cancer in the UK and around 44,000 people in England and Wales are diagnosed with the disease every year. Early (or primary) breast cancer is confined to the breast and surrounding tissue. If diagnosed early, breast cancer at this stage can be successfully treated. However, women receiving treatment for primary breast cancer will have intensive treatment, usually lasting more than a year. Treatment for early breast cancer will usually consist of surgery (either lumpectomy or mastectomy which may be followed by reconstruction), radiotherapy and chemotherapy. Depending on the type of breast cancer, patients may receive targeted treatments such as trastuzumab (Herceptin) for a year and/or hormone therapy for at least five years. For many women, this treatment regimen will successfully treat their cancer and they will be able to return to a relatively normal life. This is clearly the desired outcome for breast cancer treatment and most women are willing to put themselves through this treatment to give themselves the best chance of a cancer-free future. However, there is no escaping the fact that breast cancer treatment is extremely taxing, both physically and mentally, for patients and for their families. Treatment is incredibly disruptive to day-to-day life and, for most women, will last more than a year.

Breast cancer treatment aims not only to get rid of the cancer but also to reduce the chances of it coming back or spreading to another part of the body. This multiple technology appraisal is assessing a technology used to deliver radiotherapy, a treatment which aims to destroy any cancer cells remaining

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after surgery. Having radiotherapy after surgery for early breast cancer has been shown to reduce the likelihood that the cancer will come back. Although early breast cancer is treatable, for some women, breast cancer does return and spread to other parts of the body. At this stage, breast cancer is not curable and it is ultimately a terminal disease. Around 10,000 women in England and Wales die of breast cancer every year. Women who are diagnosed with early breast cancer must live with the possibility that their breast cancer may come back and become terminal. The psychological burden that this places on a woman and her family cannot be underestimated. It is therefore understandable that these women want to ensure that they have the best chance of ensuring that they have a cancer-free future.

Currently radiotherapy is delivered after surgery, requiring patients to attend hospital appointments five times a week for a period of three weeks. Although each treatment takes only a few minutes, travelling to and from hospital can be inconvenient and disruptive to day-to-day life, not only for the patient but for family and carers. If the patient is a carer of other family members such as small children or an ill or disabled partner or parent, other arrangements need to be made to care for these people. In addition, in cases where the patient needs assistance to travel to hospital, for instance, if they are unable to drive or take public transport, they will need a family member or friend to drive them to hospital or arrangements will need to be made for them to use transport provided by the hospital. This may mean that family members or friends will need to take time off work to assist with transporting the patient to and from hospital.

Travelling to and from hospital on a daily basis can also be expensive for patients and families. Petrol and parking can be very costly and the cost of travelling to and from the hospital every day will place a significant financial strain on some patients and families. In addition, patients who live far away from hospitals may need to stay away from home for several days or weeks to be nearer the hospital. This will usually incur accommodation costs for patients as well as being inconvenient.

Impact of this technology

The INTRABEAM Photon Radiosurgery System is a technology that allows radiotherapy treatment to be given in one dose during surgery. A recent paper published in *The Lancet*[1] reported on results of the TARGIT-A trial which was a randomised non-inferiority trial comparing intraoperative radiotherapy

[1] Vaidya, J., Wenz, F., Bulsara, M., Tobias, J., Joseph, D., Keshtgar, M., Flyger, H., Massarut, S., Alvarado, M., Saunders, C., Eiermann, W., Metaxas, M., Sperk, E., Sütterlin, M., Brown, D., Esserman, L., Roncadin, M., Thompson, A., Dewar, J., Holtveg, H., Pigorsch, S., Falzon, M., Harris, E., Matthews, A., Crew-Graves, C., Potyka, I., Corica, T., Williams, N. and Baum, M: Risk-adapted targeted intraoperative radiotherapy versus whole-breast radiotherapy for breast cancer: 5-year results for local control and overall survival from the TARGIT-A randomised trial. The Lancet 2013; 382

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to external beam radiotherapy which is the standard treatment. This trial found that intraoperative radiotherapy is as effective in terms of outcomes as external beam radiotherapy.

Receiving radiotherapy using this technology will make a huge difference for patients as it means that they won't have to attend hospital every day for three weeks for treatment. This means that patients are able to continue with the rest of their treatment sooner. It also means that they will save money and time that would be spent travelling to and from the hospital every day. In addition, some patients will require the assistance of a family member or friend to drive them to and from hospital which may require that person to make alternative arrangements such as taking time off work. Administering radiotherapy treatment during surgery will lessen the impact that the treatment of breast cancer has on both the patient and their family and friends.

This technology will also save money for the NHS. Whilst initial investment will be required to purchase the equipment, reducing the need for radiotherapy appointments will save time for NHS staff, allowing more patients to be treated. At a time when the NHS is being asked to save considerable amounts of money, a technology that can save NHS staff time and allow stretched NHS resources to treat more patients should be made routinely available.

Conclusion

Trials have shown that the INTRABEAM Photon Radiosurgery System is as good as the current standard treatment and will make a significant difference to the experiences of patients with breast cancer. It will also save money for the NHS, allowing more patients to be treated. We believe that a technology with the potential to benefit patients and save money for the NHS should be made routinely available.

Thank for you the opportunity to comment on this multiple technology appraisal. Should you have any questions or wish to discuss any of the points made in this response, please don't hesitate to contact me on [redacted]

Yours sincerely,

[redacted]

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