

Lenvatinib and sorafenib for treating differentiated thyroid cancer after radioactive iodine

Information for the public

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Lenvatinib (Lenvima) and sorafenib (Nexavar) are available on the NHS. They are possible treatments for progressive, locally advanced or metastatic differentiated thyroid cancer (papillary, follicular or Hürthle cell) in adults if:

- their disease does not respond to radioactive iodine and
- they have not had a tyrosine kinase inhibitor before or they have had to stop taking one within 3 months of starting it because of side effects.

If you are not eligible for lenvatinib or sorafenib but are already taking it, you should be able to continue until you and your doctor decide when best to stop.

Is this treatment right for me?

Your healthcare professionals should give you clear information, talk with you about your options and listen carefully to your views and concerns. Your family can be involved too, if you wish. Read more about [making decisions about your care](#).

Questions to think about

- How well does it work compared with other treatments?
- What are the risks or side effects? How likely are they?
- How will the treatment affect my day-to-day life?
- What happens if the treatment does not work?
- What happens if I do not want to have treatment? Are there other treatments available?

Information and support

[NHS Choices](#) may be a good place to find out more.

These organisations can give you advice and support:

- [British Thyroid Foundation](#), 01423 810093
- [Butterfly Thyroid Cancer Trust](#), 01207 545469
- [Cancer Research UK](#), 0808 800 4040
- [Macmillan Cancer Support](#), 0808 808 0000

You can also get support from your local [Healthwatch](#).

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

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