National Institute for Health and Care Excellence

Single Technology Appraisal (STA)

Neratinib for treating early hormone receptor-positive, HER2-positive breast cancer after adjuvant trastuzumab [ID981]

Response to consultee and commentator comments on the draft remit and draft scope

Please note: Comments received in the course of consultations carried out by NICE are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the submissions that NICE has received, and are not endorsed by NICE, its officers or advisory committees.

Comment 1: the draft remit

Section	Consultee/ Commentator	Comments [sic]	Action
Wording *Does the wording of the remit reflect the issue(s) of clinical and cost effectiveness about this technology or technologies that NICE should consider?*	Puma Biotechnology	Yes	No action required.
	Breast Cancer Now	Yes	No action required.
Timing Issues	Puma Biotechnology	Yes	No action required.
	Breast Cancer Now	Yes	No action required.

Section	Consultee/ Commentator	Comments [sic]	Action
Additional comments on the draft remit	Puma Biotechnology	Marketing authorization was granted by the European Commission on 31 Aug 2018.	No action required.

Comment 2: the draft scope

Section	Consultee/ Commentator	Comments [sic]	Action
Background information	Puma Biotechnology	No further comments.	No action required.
	Breast Cancer Now	The information is accurate.	No action required.
The technology/ intervention *Is the description of the technology or technologies accurate?*	Puma Biotechnology	Neratinib is an oral irreversible pan-ErbB receptor tyrosine kinase inhibitor that provides sustained inhibition of EGFR (HER1/ErbB1), HER2 (ErbB2), and HER4 (ERBB4), or their active heterodimers with HER3 (ErbB3). Neratinib blocks EGFR signalling by irreversibly binding to the intracellular signalling domain of these receptors.	Comment noted. The scope has been amended accordingly.
	Breast Cancer Now	We would suggest including that neratinib is a tyrosine kinase inhibitor.	Comment noted. The scope has been amended accordingly.

Section	Consultee/ Commentator	Comments [sic]	Action
Population *Is the population defined appropriately? Are there groups within this population that should be considered separately?*	Puma Biotechnology	Yes - no further comments.	No action required.
	Breast Cancer Now	The population reflects the marketing authorisation.	No action required.
Comparators *Is this (are these) the standard treatment(s) currently used in the NHS with which the technology should be compared? Can this (one of these) be described as 'best alternative care'?*	Puma Biotechnology	There is no commercially available HER2 directed treatment in the extended adjuvant setting. More simply stated the most appropriate comparator is placebo, or no further therapy beyond one year of trastuzumab adjuvant therapy.	Comment noted. The scope has been amended.
	Breast Cancer Now	Standard treatment without neratinib would be trastuzumab and chemotherapy, although this is not specified in the comparator section.	Comment noted. Neratinib will be used after trastuzumab and chemotherapy in the pathway.
Outcomes *Will these outcome measures capture the most important health related benefits (and harms) of the technology?*	Puma Biotechnology	The primary outcome of ExteNET is 2-year invasive disease-free survival (iDFS). Important secondary endpoints are 5-year iDFS and overall survival	Comment noted. No change required to scope.
	Breast Cancer Now	Yes	No action required.

Section	Consultee/ Commentator	Comments [sic]	Action
Economic analysis	Puma Biotechnology	No further comments.	No action required.
Equality and Diversity	Puma Biotechnology	No further comments.	No action required.
	Breast Cancer Now	The scope does not appear to promote discrimination.	No action required.
Other considerations	Puma Biotechnology	No further comments.	No action required.
Innovation *Do you consider the technology to be innovative in its potential to make a significant and substantial impact on health-related benefits and how it might improve the way that current need is met (is this a 'step-change' in the management of the condition)?*	Puma Biotechnology	Yes, the year of extended adjuvant neratinib therapy in patients with HR+/HER2+ disease significantly reduces the risk of invasive disease recurrence and extends the length of time patients remain cancer free. It is the only agent that has ever shown this benefit. In other trials with other agents, additional therapy beyond one year of adjuvant trastuzumab therapy was not proven to be effective.	Comment noted. The case for innovation can be made in the submission for consideration by committee.
	Breast Cancer Now	No	No action required.
Questions for consultation	Puma Biotechnology	Where do you consider neratinib will fit into the existing NICE pathway, early and locally advanced breast cancer: adjuvant therapy?	Comment noted. No action required.

Section	Consultee/ Commentator	Comments [sic]	Action
		Neratinib treatment will follow trastuzumab-based adjuvant therapy as extended adjuvant therapy.	
Additional comments on the draft scope			

The following consultees/commentators indicated that they had no comments on the draft remit and/or the draft scope

None.