Therapy and Guidelines Sub-Committee
British Association of Dermatologists

Comments on the NICE Interventional Procedures Consultation:
Electrochemotherapy for primary basal cell carcinoma and primary squamous cell carcinoma

The British Association of Dermatologists would like to thank NICE for the opportunity to comment on this revised guidance, but retains its previous position on this interventional procedure, where it does not support the use of electrochemotherapy for the treatment of primary basal cell carcinoma (BCC) and squamous cell carcinoma (SCC). There is neither data on the proof of principle nor medium-term response and efficacy to support its use within the scope of this consultation.

We question the need for unproven technology as a putative curative treatment option for both these conditions when standard treatments are well accepted and widely practised. The non-randomised and non-comparative data presented do not give confidence that the use of electrochemotherapy for the treatment of primary BCC and SCC is equivalent in efficacy to conventional surgery, Mohs surgery (which isn’t mentioned in section 2.2), or radiotherapy. The data strongly suggests that efficacy is at least 10% worse at around 12 months. The amount of data for SCC is inadequate in terms of numbers, and that this particular skin cancer should probably not be treated with electrochemotherapy at all.

Only until data from properly-conducted randomised trials are available can patients be given accurate information about the outcomes for this procedure. If it is to be used for inoperable or incurable disease, comparative data with other palliative treatments such as radiotherapy, vismodegib (BCC) and cetuximab (SCC) would be needed.
Other than in the setting of a properly conducted clinical trial, or perhaps in exceptional cases where surgery and radiotherapy are contraindicated, the BAD has grave concerns with a NICE-badged approval of this technology.

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Chair, T&G Sub-committee

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