Review of NICE Technology Appraisal guidance TA489; Vismodegib for treating basal cell carcinoma

We would be grateful if you could respond to the questions below and submit your response using NICE Docs.

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<tr>
<th>Name of organisation:</th>
<th>British Association of Dermatologists</th>
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<tr>
<td>Name of person completing the form:</td>
<td>Satiavani Ramasamy, Leeds Teaching Hospital NHS Trust</td>
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Please tick the relevant box

We believe the existing guidance should remain extant and move to the static list ☐

Or

We believe the existing guidance should be updated ☑

If you believe the guidance should be updated, please provide reasons why. Please include references to any relevant evidence that supports your statement.

Please note that all medical staff are tied up with Covid-19, so have not been able to provide a fully detailed response at this time; we look forward to further opportunities to comment.

We believe that the guidelines should be reviewed because of the following:

1. Hedgehog inhibitors are the only licensed and effective treatment in metastatic BCC and this group of patients find themselves with no options under the NHS.

2. We have a group of patients with Gorlin syndrome who without hedgehog inhibitors are burdened with surgery. There is evidence for efficacy of hedgehog inhibitors in this group of patients: ‘Inhibition of the hedgehog pathway in patients with basal-cell nevus syndrome: final results from the multicentre, randomised, double-blind, placebo-controlled, phase 2 trial; Tang et al, Lancet Oncology 2016’.

3. There is a group of patients with very extensive BCC which are not suitable for either surgery or radiotherapy. These are mostly destructive lesions and have a huge impact on quality of life of patients.
Stakeholder response form

4. There is evidence to support the use of hedgehog inhibitors and it is a real shame that the groups of patients listed above have no treatment option in the NHS. Trials include ERIVANCE, BOLT and STEVIE.

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