

Wednesday, 5 July 2023

Office of Health Technology Assessment Branch
Technology Assessment & Access Division | Health Resourcing Group
Australian Government Department of Health and Aged Care
E: commentsMSAC@health.gov.au
Location: Sirius Building
PO Box 9848, Canberra ACT 2601, Australia

RE: Input on an application submitted to the Medical Services Advisory Committee (MSAC) for 177Lutetium (n.c.a) Octreotate treatment for advanced neuroendocrine and other high somatostatin receptor expressing tumours (MSAC application 1744)

To whom it may concern,

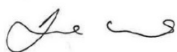
The Medical Oncology Group of Australia (MOGA) and the Clinical Oncology Society of Australia (COSA) are writing to express support for the application to the Medical Services Advisory Council for consideration of funding of 177Lutetium(nca) Octreotate in treatment of neuroendocrine tumours (NETs), MSAC application number 1744. MOGA is the national professional organisation for medical oncologists in Australia. COSA is the peak national body for all health professionals whose work involves the care of cancer patients.

Neuroendocrine tumours are highly heterogeneous cancers. Patients may experience symptoms from tumour burden, but also from the production of hormones (Carcinoid syndrome) impacting not just their survival but significantly impacting their quality of life. Whilst most patients with metastatic Grade 1-2 NETs start first-line therapy with somatostatin analogues, the majority of these patients will experience progressive disease and require additional treatment for this life-limiting condition. The recent NETTER-1 trial has established Peptide Receptor Radionuclide Therapy (PRRT) as the treatment of choice in this second-line setting for patients with midgut NETs. The clear benefit seen in randomized controlled trials, the improvement in quality of life, good clinical tolerance, and the relatively modest cost compared to other treatments present a strong case to support this application so 177Lutetium(nca) Octreotate is accessible for appropriate patients. The use of PRRT in these settings is supported by the forthcoming COSA NET guidelines. We estimate that approximately 100-150 patients will be eligible for treatment per year. In the setting of a rare tumour like this COSA and MOGA would favour that such patients are discussed at NET multidisciplinary team meetings before prescribing this treatment.

The current funding of and logistics around administration of PRRT varies between different states and may vary year-by-year. This creates considerable uncertainty for patients and clinicians around affordable access, increases anxiety relating to the patient journey for the patients and caregivers, and fosters inequity in the NET journey between different Australian patients with NET.

We therefore support the MSAC application number 1744 for 177Lutetium(nca) Octreotate for the treatment of NETs.

Yours sincerely,



Dr Deme Karikios
Chair, Medical Oncology Group of Australia



Associate Professor Dion Forstner
President, Clinical Oncology Society of Australia