

# Clinical Commissioning Urgent Policy Statement

## Convection enhanced delivery for diffuse intrinsic glioma (children) [NHS England ref: 170097P]

### Commissioning position

#### Summary

Convection enhanced delivery is not recommended as a treatment option for diffuse intrinsic glioma in children.

### Information about convection enhanced delivery

#### The intervention

Convection enhanced delivery (CED) is a method of administering medicines directly into the brain through a delivery system consisting of small tubes, called catheters, connected to a set of pumps through a metal access port fixed to the skull. The delivery system, including the catheters, tubing and port, is inserted during a single, image-guided surgical operation and is permanently left in place. Medicines are then delivered, at a precise rate and dose, directly into the brain through the pumps which are attached to the delivery system only when treatment is being given.

For Diffuse Intrinsic Pontine Glioma (DIPG) to date three different medicines have been used in conjunction with CED. These are carboplatin, panobinostat and sodium valproate. However, there is still uncertainty about which medicine is optimal.

#### The condition

DIPG is a highly aggressive and, almost always, fatal form of brain cancer that predominantly affects young children. Every year, approximately 40 children are diagnosed with this condition in the United Kingdom and the average (median) survival time is nine months from the point at which a diagnosis of DIPG is confirmed.

#### Current treatments

Current treatment options for this condition are limited in both range and effectiveness and DIPG remains incurable, in the vast majority of cases. Unlike most other forms of brain cancer, DIPG cannot be surgically removed because the cancer grows in and around healthy brain tissue in a part of the brain that is responsible for critical brain functions, such as breathing. As a result, the normal (standard of care) treatment for this patient group is conventional radiotherapy. Whilst radiotherapy can slow down treatment progression and provide some relief from the symptoms of DIPG, it has little overall impact on disease outcomes.

To date, chemotherapy has not been shown to be an effective treatment for this condition. This may be because when chemotherapy is administered by conventional means, through intravenous (into the vein) injection, it is prevented from reaching the tumour by the natural protective action of the body. This action prevents toxins from reaching the brain and is called the 'blood-brain barrier'.

#### Comparators

There have been no studies with treatment comparators.

#### Clinical trial evidence

Evidence to support the effectiveness of the convection enhanced delivery technique for diffuse intrinsic pontine glioma is in the form of conference abstracts of case series and one full case report. The therapeutic agent is not always specified in these papers and none refer to sodium valproate. It is therefore concluded that there are no peer reviewed publications on this specific question.

## **Adverse events**

There are overriding patient safety or other clinical issues that require an immediate clinical commissioning position to be implemented. This is because CED to treat DIPG is considered to be an experimental treatment.

## **Implementation**

### **Criteria**

Not applicable.

### **Effective from**

December 2018

### **Recommendations for data collection**

Not applicable.

## **Mechanism for funding**

Not applicable.

## **Policy review date**

This is an urgent policy statement, which means that the full process of policy production has been abridged: a full independent evidence review has not been conducted; and public consultation has not been undertaken. If a review is needed due to a new evidence base then a new Provisional Policy Proposal needs to be submitted by contacting [england.CET@nhs.net](mailto:england.CET@nhs.net).

## **Links to other policies**

None.

## **Equality statement**

Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

- given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and
- given regard to the need to reduce inequalities between patients in access to and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.