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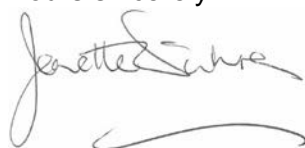
Re: Prioritisation of Topics for Future Specialised Services

The Faculty of Clinical Oncology welcomes the opportunity to contribute to this important consultation. We have consulted with our members who are working at the forefront of clinical oncology practice and research. Our feedback on the consultation is as follows:

- Proton therapy - given the investment in high energy proton centres by NHS England it is important that this is underpinned by an appropriate research infrastructure. This should include clinical research such as reduced toxicity especially in teenage and young patients and basic research such as dose escalation for difficult to treat tumours. The Clinical and Translational Radiotherapy Research Working Group (CTRad) has developed a research strategy for this, led by Professor Sebag-Montefiore and it is disappointing that this is not referenced in the consultation documents.
- Molecular radiotherapy is another growing treatment modality with a limited phase one evidence base. This has been highlighted as an area in which trials should be developed by CTRad. Priorities around accurate quantitation of dosing, including de-escalation are likely to be key areas for trials.
- There is no mention of radiotherapy research in combination with either immunotherapy. A theoretical large potential gain in synergistic therapeutic interaction or drugs which interfere with DNA repair (DDRi), again an area of huge potential gain in curative outcomes from radiotherapy.
- Any commentary on rare cancer being discussed in national Multi-disciplinary teams (MDTs) is to be welcomed but these MDTs must include clinical oncologists to ensure the most effective combination of therapies is delivered to the patient as quickly as possible.

Overall the envisioned scope of radiotherapy research is disappointing given the large number of patients who receive radiotherapy as a curative treatment modality and the reduction in toxicity from newer radiotherapy technologies. We would like to see a greater focus on radiotherapy in the prioritisation.

Yours sincerely



Dr Jeanette Dickson, Vice- President, Clinical Oncology