



Title	Radioimmunotherapies for Non-Hodgkin Lymphoma: Systematic Review of Clinical Effectiveness, Cost Effectiveness, and Guidelines
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Aim

To review the clinical and cost effectiveness of using radioimmunotherapies in treating non-Hodgkin lymphoma, and to identify guidelines on their use.

criteria, and disagreements were resolved by consensus. This report reviews and discusses the results.

Conclusions and results

The use of ^{131}I -tositumomab and ^{90}Y -ibritumomab may be treatment options for patients with refractory or relapsed non-Hodgkin lymphoma (NHL). Guidelines recommend the use of these drugs in patients with NHL that is refractory to chemotherapy. The cost-effectiveness information, which was not presented from a Canadian perspective, suggests that the use of ^{131}I -tositumomab may be a cost-effective option during third- or fourth-line NHL treatment, depending on a third-party payer's willingness to pay for a quality-adjusted life-year. The evidence suggests that the use of ^{131}I -tositumomab and ^{90}Y -ibritumomab be reserved for individuals with follicular NHL whose initial treatment fails to produce a response.

Recommendations

Not applicable.

Methods

Literature related to the use of radioimmunotherapies in non-Hodgkin lymphoma (NHL) published in English between 2004 and June 2009 was selected from bibliographic databases, websites of relevant agencies and associations, and other specialized databases. Searches were limited to systematic reviews, health technology assessments, meta-analyses, randomized controlled trials, observational studies, economic studies, and guidelines. Clinical outcomes of interest included symptom improvement, remission induction, overall survival, progression-free survival, relapse-free survival, and quality of life. Guidelines of interest were those including information related to dosage, frequency and method of administration, and patient selection. Two independent reviewers selected articles for inclusion based on specific