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30 August 2018

Dr Susan Parry
Chair, InSIGHT
The PolyPosis Registry
St Mark's Hospital
Watford Road
Harrow
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Our ref: EH95254

Dear Dr Parry

Thank you for your feedback about our pancreatic cancer guideline.

I understand that your concerns relate to our recommendations for people with inherited high risk of pancreatic cancer. Your letter has been considered by the guideline committee, they have provided advice on this response.

I note that the Society disagrees with our recommendation to consider screening for pancreatic patients with Lynch syndrome and you also feel that our recommendations on screening for people with Peutz-Jeghers syndrome should not be undertaken outside of a research setting. This feedback relates to recommendations 1.14 and 1.1.15 in the short guideline, copied below for ease of access:

1.1.14 **Offer** surveillance for pancreatic cancer to people with:

- hereditary pancreatitis and a PRSS1 mutation
- BRCA1, BRCA2, PALB2 or CDKN2A (p16) mutations, and one or more first-degree relatives with pancreatic cancer
- Peutz–Jeghers syndrome.

1.1.15 **Consider** surveillance for pancreatic cancer for people with:

- 2 or more first-degree relatives with pancreatic cancer, across 2 or more generations
- Lynch syndrome (mismatch repair gene [MLH1, MSH2, MSH6 or PMS2] mutations) and any first-degree relatives with pancreatic cancer.

To be clear our recommendations refer to 'surveillance' rather than 'screening' as stated in your letter.

Evidence is the cornerstone of our guideline development process. In this case there was evidence that certain groups of hereditary factors carry a higher risk of developing pancreatic cancer. Further, based on their clinical knowledge the guideline committee noted that 5-10%

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For the reasons outlined above we do not believe that these recommendations should be withdrawn and this guideline remains current.

NICE provides extensive opportunities for public and stakeholder involvement: during the scoping exercise to develop the review questions, as well as consultation on the draft guideline prior to its full publication. All comments received by stakeholders are welcome; are considered carefully by the committee and the response recorded and published in the history tab: https://www.nice.org.uk/guidance/ng85/history.

The onus is on individual organisations to register as stakeholders for the topics that are relevant to their area of expertise and/or interest. We do not appear to have received a registration for this guideline from the International Society for Gastrointestinal Hereditary Tumours for this guideline.

Looking at how our guideline relates to information available from other sources, the NICE guidance is consistent with the current EUROPAC registry entry requirements and the International Cancer of the Pancreas Screening (CAPS) Consortium consensus statement on inherited risk (Canto et al. 2013) states: "A9 Mismatch repair gene mutation carriers (Lynch syndrome) with one affected FDR should be considered for screening".

Going forward, the committee acknowledged the need for further research on this topic by making a research recommendation (see 5.4.9 page 140 of the full guideline): 'Research should be undertaken to evaluate the most clinically effective and cost effective initial surveillance tests, additional tests and frequency of surveillance that produce the greatest diagnostic yield and overall surveillance efficiency.'

As a matter of good practice we review our guidelines to see if updates are needed. We do not have the date of the next surveillance review for this guideline but given that it only published in February 2018, it is likely to be a few years, unless, of course, there is any new significant evidence published that impacts on the current recommendations. Post publication comments will be considered during the next surveillance review.

In the meantime if you have any further queries you can contact the enquiry handling team at NICE directly via email: nice@nice.org.uk or telephone: 0300 323 0141 (weekdays 09:00 – 17:00). You are, of course, welcome to write to us at the above address if you would prefer.

Yours sincerely,

Janet Fahie

Janet Fahie
Communications Executive (Enquiry Handling team)