CPAG Summary Report for Clinical Panel – Evidence review: Selective internal radiation therapy (SIRT) with ytrrium-90 microspheres for unresectable primary intrahepatic cholangiocarcinoma in patients who are chemotherapy-refractory or chemotherapy-intolerant

The Benefits of the Proposition – Use of yttrium-90 SIRT to treat unresectable chemotherapy-refractory liver-dominant intrahepatic cholangiocarcinoma		
No	Outcome measures	Summary from evidence review
1.	Survival	Median overall survival (OS) for patients with unresectable intrahepatic cholangiocarcinoma was 22 months after treatment with SIRT with yttrium-90 (from "best study"). However, this study is at high risk of bias from its retrospective design, small sample size and absence of control group. Therefore 'survival benefit' cannot be determined.
2.	Safety	Adverse events were poorly reported. The retrospective design of the study is likely to limit the quality of adverse event recording. The absence of a control group means that it cannot be determined whether the adverse events are solely due to SIRT treatment.

Other health outcome measures determined by the evidence review		
No	Outcome measure	Summary from evidence review
1.	Time to progression	Median time to progression (TTP) was 9.8 months after treatment with SIRT with yttrium-90 (only 1 study reported this data). However, as there was no control group in the study efficacy of the treatment cannot be determined. TTP may be biased by the retrospective design of this study as it relies on accurate recording of date of progression.
2.	Overall response rate	Overall response rate was 12 (36%) (from "best study"). However, as there was no control group in the study efficacy of the treatment cannot be determined.
3.	Disease control rate	Disease control rate was 19 (58%) (from "best study"). However, as there was no control group in the study efficacy of the treatment cannot be determined.