SPECIALISED COMMISSIONING – RESPONSE TO AMENDMENTS REQUESTED TO EVIDENCE REVIEW DURING ENGAGEMENT OR CONSULTATION

URN	1857
POLICY TITLE	Stereotactic radiosurgery (SRS) and stereotactic radiotherapy (SRT) to the surgical cavity following resection of cerebral metastases
CRG:	Radiotherapy
NPOC:	Cancer

Description of comments during consultation	NHS England was asked to consider the findings and relevance to the policy of the following studies: • *Al-Omair A, Soliman H, et al. Hypofractionated stereotactic radiotherapy in five daily fractions for post-operative surgical cavities in brain metastases patients with and without prior whole brain radiation. Technol Cancer Res Treat. 2013;12(6): 493–499.* • *Brennan C, Yang T, et al. A phase 2 trial of stereotactic radiosurgery boost after surgical resection for brain metastases. Int J Radiat Oncol Biol Phys. 2014; 88(1): 130–136.* • *Hartford A, Paravati A, et al. Postoperative stereotactic radiosurgery without whole-brain radiation therapy for brain metastases: potential role of preoperative tumor size. Int J Radiat Oncol Biol Phys. 2013; 85: 650–5.* • *Jagannathan J, Yen C, et al. Gamma Knife radiosurgery to the surgical cavity following resection of brain metastases. J Neurosurg. 2009; 111: 431–8.* • *Kayama T, Sato S, et al. Effects of surgery with salvage stereotactic radiosurgery versus surgery with whole-brain radiation therapy in patients with one to four brain metastases (JCOG0504): a phase III, noninferiority,*

	randomized controlled trial. Journal of Clinical Oncology. 2018; 36(33): 3282-3289. • *Lo S, Chang E, Sahgal A. Radiosurgery for resected brain metastases-a new standard of care? Lancet Oncology. 2017; 18(8): 985-7.* • *Manning M, Cardinale R, et al. Hypofractionated stereotactic radiotherapy as an alternative to radiosurgery for the treatment of patients with brain metastases. Int J Radiat Oncol Biol Phys. 2000; 47(3): 603-8.* • *Patel K, Burri S, et al. Comparing preoperative with postoperative stereotactic radiosurgery for resectable brain metastases: a multi-institutional analysis. Neurosurgery. 2016; 79: 279–85.* • *Traylor J, Habib A, et al. Fractionated stereotactic radiotherapy for local control of resected brain metastases. J Neurooncol. 2019;144(2):343–350*
Action taken by Public Health lead	The papers were reviewed against the original PICO criteria for the policy proposal. None of the papers met the criteria: • *Al-Omair A, Soliman H, et al. Hypofractionated stereotactic radiotherapy in five daily fractions for post-operative surgical cavities in brain metastases patients with and without prior whole brain radiation. Technol Cancer Res Treat. 2013;12(6): 493–499.* The study comparator was not relevant. • *Brennan C, Yang T, et al. A phase 2 trial of stereotactic radiosurgery boost after surgical resection for brain metastases. Int J Radiat Oncol Biol Phys. 2014; 88(1): 130–136.* The study had no comparator. • *Hartford A, Paravati A, et al. Postoperative stereotactic radiosurgery without whole-brain radiation therapy for brain metastases: potential role of preoperative tumor size. Int J Radiat Oncol Biol Phys. 2013; 85: 650–5.* The study had no comparator. • *Jagannathan J, Yen C, et al. Gamma Knife radiosurgery to t`he surgical cavity following*

	resection of brain metastases. J Neurosurg. 2009; 111: 431–8. The study had no comparator. • *Kayama T, Sato S, et al. Effects of surgery with salvage stereotactic radiosurgery versus surgery with whole-brain radiation therapy in patients with one to four brain metastases (JCOG0504): a phase III, noninferiority, randomized controlled trial. Journal of Clinical Oncology. 2018; 36(33): 3282-3289.* The study participants did not meet the population criteria. • *Lo S, Chang E, Sahgal A. Radiosurgery for resected brain metastases-a new standard of care? Lancet Oncology. 2017; 18(8): 985-7.* This is a commentary. • *Manning M, Cardinale R, et al. Hypofractionated stereotactic radiotherapy as an alternative to radiosurgery for the treatment of patients with brain metastases. Int J Radiat Oncol Biol Phys. 2000; 47(3): 603-8.* The paper was published more than 10 years ago. (The study would not have been included if it was within the relevant time-frame as it had no comparator.) • *Patel K, Burri S, et al. Comparing preoperative with postoperative stereotactic radiosurgery for resectable brain metastases: a multi-institutional analysis. Neurosurgery. 2016; 79: 279–85.* The study comparator was not relevant. • *Traylor J, Habib A, et al. Fractionated stereotactic radiotherapy for local control of resected brain metastases. J Neurooncol. 2019;144(2):343–350.* This was published after the search date for the evidence review. (The study would not have been included if it was within the relevant time-frame as it had no comparator.)

Outcome	**Low grade evidence identified by stakeholders that does not materially affect the conclusions of the existing evidence reviews**