

Evidence-to-Decision table 5.2.4

In adults (including older persons) and adolescents with bone metastases, what is the evidence for the use of monoclonal antibodies (monoclonals) compared to each other in order to prevent and treat pain?

POPULATION:	Adults (including older persons) and adolescents with cancer-related pain	<p>Background:</p> <p>Bone pain is the most common type of pain from cancer and is present in approximately one out of three patients with bone metastases.^{129,139} The pain is commonly a mixture of background pain and incident/episodic pain, which is commonly associated with weight bearing or movement.¹³⁰ Bone metastases can weaken bone sufficiently to greatly increase patients' risk of fracture.</p> <p>There are reports that monoclonal antibodies designed to target Nerve Growth Factor (NGF) and osteoclasts reduce pain scores in patients with metastatic bone pain¹⁴¹ or fracture risk¹⁴².</p> <p>Current WHO recommendation: None</p>
INTERVENTION:	Monoclonals	
COMPARISON:	Monoclonals	
MAIN OUTCOMES:	<ul style="list-style-type: none"> • Pain relief • Pain relief speed • Pain relief maintenance • Quality of life (QoL) • Functional outcomes • Skeletal-related events • Osteonecrosis of the jaw (adverse event) 	
STRATIFICATIONS:	<ul style="list-style-type: none"> • Age (adults, older persons, adolescents, children) • History of substance abuse • Refractory pain 	
SETTING:	All	
PERSPECTIVE:	Population	

	CRITERIA	SUPPORTING EVIDENCE & ADDITIONAL CONSIDERATIONS
PROBLEM	<p>Is the problem a priority?</p> <p>Yes</p>	<p>Research evidence</p> <p>None</p> <p>Additional considerations</p> <p>WHO does not have recommendations for treating bone pain and should investigate the various methods by which it might be treated, monoclonal antibodies being one of these methods.</p>
BENEFITS & HARMES	<p>Do the desirable effects outweigh the undesirable effects?</p> <p>Yes No Uncertain</p> <p><input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/></p>	<ul style="list-style-type: none"> • No randomized controlled trial compared monoclonal antibodies. <p>BENEFITS and HARMES</p> <ul style="list-style-type: none"> • No trial reported on pain relief. • No trial reported on pain relief speed. • No trial reported on pain relief maintenance. • No trial reported on QoL. • No trial reported on functional outcomes. • No trial reported on skeletal-related events. • No trial reported on osteonecrosis of the jaw. <p>STRATIFICATIONS</p> <ul style="list-style-type: none"> • Studies conducted in adults with a wide age range, without stratification into adolescent, non-older persons, and older persons. • Studies provide no data regarding history of substance abuse. • Studies provide no data regarding refractory pain. <p>SUMMARY</p> <p>No eligible trials were found that address this sub-question.</p>

ACCEPTABILITY & PREFERENCES	<p>Is there important uncertainty or variability about how much people value the options?</p> <p>Major variability <input type="checkbox"/></p> <p>Minor variability <input type="checkbox"/></p> <p>Uncertain <input type="checkbox" value="Yes"/></p> <p>Is the option acceptable to key stakeholders?</p> <p>Yes No Uncertain <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox" value="Yes"/></p>	<p><u>Research evidence</u> None</p> <p><u>Additional considerations</u> None</p>

FEASIBILITY / RESOURCE USE	<p>How large are the resource requirements?</p> <p>Major Minor Uncertain</p> <p><input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Yes</p> <p>Is the option feasible to implement?</p> <p>Yes No Uncertain</p> <p><input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Yes</p>	<p><u>Research evidence</u> None</p> <p><u>Additional considerations</u> None</p>
EQUITY	<p>Would the option improve equity in health?</p> <p>Yes No Uncertain</p> <p><input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Yes</p>	<p><u>Research evidence</u> None</p> <p><u>Additional considerations</u> None</p>

Recommendation**Current recommendation:**

None

New (draft) recommendation:None

Strength of Recommendation

Quality of Evidence

➤ None
[Omitted for no data]

Justification

Subgroup considerations

**Implementation considerations
[incl. M&E]**

Research priorities
