

Monthly News Update

Welcome to the KINES Monthly News Update for October 2017. Other recent KINES Updates have discussed:

- a <u>study</u> investigating <u>unwarranted claims</u> of clinical efficacy in visits from <u>pharmaceutical sales reps</u> for drugs approved on the basis of surrogate outcomes only. It is uncertain how these findings relate to the UK, but the study highlights that such promotional activities do occur and that prescribers should be aware of this.
- the <u>CANTOS</u> RCT, which found that **canakinumab** 150 mg every three months significantly lowered the incidence of recurrent cardiovascular events compared with placebo. However, there was no significant difference seen with other doses and no effect on all-cause mortality. Benefits also need to be balanced against the increased risk of infection (and death due to infection) and the substantial costs of this treatment.
- the <u>TOSCA.IT</u> RCT, which found no significant difference in the incidence of cardiovascular events between treatment with a **sulfonylurea** and **pioglitazone** in people with type 2 diabetes inadequately controlled with metformin.

Update from NICE:

- NICE has published new <u>guidance</u> on the recognition and response to abuse and neglect in children. It includes
 indicators that should alert practitioners to the possibility of child abuse or neglect. The ways that commissioners can
 support staff are also discussed; examples include:
 - ensuring newly qualified practitioners receive training in line with an approved training programme, e.g. levels 1 to 3 in the Royal College of Paediatrics and Child Health's <u>intercollegiate training document</u>
 - o giving information to newly qualified practitioners about local resources, e.g. children's centres, parenting groups
 - o providing practitioners with advice on how to make a referral to social care.
- In August, NICE published new guidance on <u>bisphosphonates for osteoporosis</u>. This guideline significantly expanded the population eligible for treatment, recommending bisphosphonates as an option if a person's 10-year fracture risk is 1% or greater. NICE has now published a <u>decision support tool</u> for this guidance, which presents the effects of bisphosphonates on vertebral and hip fractures based on a 1, 5. 10 and 30% fracture risk, and a discussion about potential side effects.

NHS England/Department of Health/Public Health England:

- NHS England is inviting <u>nominations</u> for additions to, and removals from, the **high cost drugs and devices** lists for the 2019 national tariff. The drug or device should be high cost and represent a disproportionate cost compared with the other expected costs of care. The closing date for nominations is 17/11/17.
- Public Health England (PHE) has published <u>updated guidance</u> on the use of antivirals for the treatment and prophylaxis of influenza. Changes include updates to the tables summarising dosing for premature infants and neonates, and in renal dysfunction.
- PHE has also issued an updated version of the <u>one-page summary</u> for healthcare professionals on 'catch-up' vaccinations. This version includes advice for the new DTaP/IPV/Hib/HepB vaccine (Infanrix hexa), which babies born on or after 1st August 2017 are now eligible for.
- The latest <u>vaccine update</u> from PHE discusses a number of topics, including flu vaccination in people receiving HIV treatment, flu vaccine information and availability for the children's national flu programme 2017/18, latest vaccine coverage estimates, and interpretation of vaccine storage requirements.
- A number of PHE antibiotic awareness resources have recently been updated. These include a toolkit for healthcare
 professionals that provides guidance on how to use the resources to support the Antibiotic Guardian campaign and local
 initiatives, a key messages document, and a collection of quizzes and crosswords about antibiotic resistance for the
 public, prescribers and pharmacists.
- The PHE Advisory Committee on Malaria Prevention (ACMP) has published updated <u>malaria guidelines</u>. A review of malaria risk for travellers to Asia, South America and parts of the Caribbean has resulted in substantial changes to recommendations for some countries in these regions, where the malaria risk has been judged to be below the threshold to advise chemoprophylaxis.

Other news:

• The BNF publications team is looking for <u>feedback</u> from users on the **palliative care** content within their publications. Feedback can be submitted via a short <u>online survey</u>.



• The 2017 English surveillance programme for antimicrobial utilisation and resistance (ESPAUR) report has been published. A notable finding is that 34% of urinary tract infection (UTI) samples analysed were found to be resistant to trimethoprim whereas only 3% showed resistance to nitrofurantoin. The report comments that these data support PHE guidelines to switch from trimethoprim to nitrofurantoin as empiric treatment for UTI before laboratory results are available.

Drug update:

New products

- October saw the launch of two more branded generic ICS/LABA combination inhalers:
 - o <u>Fobumix Easyhaler 320/9</u> (budesonide/formoterol) dry-powder inhaler (DPI). This inhaler delivers an equivalent dose of budesonide and formoterol to Symbicort Turbohaler 400/12 and alternatives.
 - Aloflute a pressurised metered dose inhaler (pMDI) containing salmeterol and fluticasone propionate. Two strengths of Aloflute are available:
 - Aloflute 25/125 equivalent to Seretide Evohaler 125 and alternatives (i.e. AirFluSal 25/125, Sirdupla 25/125 and Sereflo 25/125)
 - Aloflute 25/250 equivalent to Seretide Evohaler 250 and alternatives (i.e. AirFluSal 25/250, Sirdupla 25/250 and Sereflo 25/250)

Neither brand is licensed for use in under 18 year olds.

Keele's comment: Based on the listing in <u>MIMS</u> (Oct-17), the various budesonide/formoterol, and salmeterol/fluticasone propionate inhaler options are summarised in the table below.

- AstraZeneca has announced the price of Symbicort Turbohalers will decrease from 1/1/2018 to £28.00 per inhaler for all strengths. Both current and future costs of Symbicort Turbohalers are therefore included in the table. The price of AirFluSal Forspiro decreased to £29.97 on 1/10/17.
- Some lower cost options are highlighted, although it is possible that prices may fluctuate given the increasing competition in this market. If rebate schemes are in place, costs may differ from below.
- Finally, given the growing number of generic inhalers, it is increasingly important for prescribers to specify a brand name
 on prescriptions to avoid confusion. Patient engagement is essential when considering switching to a different device.

Originator product (£/inhaler)	Equivalent branded generics available			
Budesonide/formoterol DPIs:				
Symbicort Turbohaler 100/6 (£33.00 [£28.00 from 1/1/17])	No branded generic alternative available			
Symbicort Turbohaler 200/6 (£38.00 [£28.00 from 1/1/17])	DuoResp Spiromax 160/4.5 (£29.97)			
Symbicort Turbohaler 400/12 (£38.00 [£28.00 from 1/1/17])	DuoResp Spiromax 360/9 (£29.97)		Fobumix Easyhaler 320/9 (£26.99)	
Salmeterol/fluticasone propionate DPI:				
Seretide 100 Accuhaler (£18.00)	No branded generic alternative available			
Seretide 250 Accuhaler (£35.00)	No branded generic alternative available			
Seretide 500 Accuhaler (£40.92)	Aerivio Spiromax (£29.97)		AirFluSal Forspiro (£29.97)	
Salmeterol/fluticasone propionate pMDIs:				
Seretide Evohaler 50 (£18.00)	No branded generic alternative available			
Seretide Evohaler 125 (£35.00)	Sereflo 25/125 (£23.50)	Aloflute 25/125 (£26.25)	5 AirFluSal MDI 25/125 (£23.50)	Sirdupla 25/125 (£26.25)
Seretide Evohaler 250	Sereflo 25/250	Aloflute 25/250	` '	Sirdupla 25/250
(£59.48)	(£39.95)	(£44.61)	(£39.95)	(£44.61)
The above table includes combination inhaler products and prices (cost per inhaler) as listed in MIMS on 18/10/17, except for Symbicort Turbohalers, where the new price that AZ has indicated that will apply from 1/1/18 is also shown, and AirFluSal, where we have been notified of a price change that applies from				

Discontinued products

• **Bovine insulin** preparations are to be <u>discontinued</u> from the end of the year. <u>Diabetes UK</u> has advised that people currently treated with these preparations are likely to be an older population and at risk of impaired awareness of hypoglycaemia. Choice of alternative insulin should be made with the patient, with input from a diabetes specialist multidisciplinary team, and with particular consideration of hypoglycaemia risk.

1/10/17. Some lower cost options are highlighted.

On the Horizon:

• A <u>positive opinion</u> has been given for the GLP-1 agonist **Bydureon (once weekly exenatide)** to include concomitant use with basal insulin in adults with type 2 diabetes. *N.B.* Other GLP-1 agonists are already approved for use with insulin. *Keele's comment:* As a reminder, NICE <u>recommends</u> that a GLP-1 agonist in combination with insulin should only be offered following specialist care advice and with ongoing support from a consultant-led multidisciplinary team. The algorithm for blood glucose lowering therapy can be accessed <u>here</u>.