

AREA PRESCRIBING COMMITTEE – Birmingham, Sandwell, Solihull and environs

Decision Making Support Tool

The following document supports the committee to consider formulary applications against defined criteria.

Formulary application reference:	APCBSSE/00002
Drug name and formulations:	Fluticasone Furoate (Avamys®)

Criteria	Example	Committee Consensus
Patient Safety	<i>Potential for abuse, toxicity, significant drug interactions</i>	The APC considered that the clinical data presented indicated that the product is associated with low risk of harm.
Clinical effectiveness	<i>Established licensed product</i>	The APC noted evidence that fluticasone furoate was non inferior to fluticasone propionate and comparable to mometasone furoate in reducing symptoms of rhinitis
Strength of evidence		Moderate— randomised, double-blind placebo-controlled, parallel-group studies
Cost effectiveness or resource impact	£	The APC noted that the current first line treatment option, beclometasone dipropionate, is a more cost effective alternative and can be purchased OTC for less than £4.00
Place of therapy relative to available treatments	<i>1/2nd tier</i>	Second tier
National guidance and priorities	<i>NICE, MTRAC</i>	<p>Scottish Medicines Consortium. fluticasone furoate (Avamys) SMC Advice. SMC ID No. 544/09.</p> <p>Fluticasone furoate (Avamys) is accepted for use within NHS Scotland for the treatment of the symptoms of allergic rhinitis in adults, adolescents (12 years and over) and children (6 to 11 years).</p> <p>Evidence to support its efficacy comes from a number of comparator- and placebo-controlled studies conducted in adults and children with seasonal and perennial allergic rhinitis.</p> <p>Other intranasal steroids are</p>

		available at a lower cost.
Local health priorities	<i>CCG views</i>	Low commissioning priority
Equity of access	<i>Equality assessment</i>	N/A
Stakeholder views	<i>Define wider groups to be engaged</i>	N/A – not innovative
Implementation requirements	<i>Requires, RICAD ESCA etc.</i>	N/A

Decision Summary

Resubmission is recommended to complete the information to enable a decision:	
Not approved and rationale:	<p>NOT APPROVED</p> <p>Although randomised controlled trials in adults and adolescents have shown fluticasone furoate to be more effective than placebo for seasonal allergic rhinitis (SAR) and trials in perennial allergic rhinitis (PAR) have shown improvements in nasal symptoms, the evidence for fluticasone furoate versus intranasal corticosteroid comparators is limited. Limited unpublished studies have shown comparable efficacy to fluticasone propionate and mometasone furoate.</p> <p>There is a lack of evidence demonstrating the superiority of fluticasone furoate Avamys® over other intranasal corticosteroids. It is more expensive than the first line treatment option (beclometasone dipropionate) and there are also several products which can be bought over the counter for use in adults with lower cost than the prescription charge.</p> <p>The needs of the population appear to be low since alternative intranasal corticosteroids are available and the use of fluticasone furoate Avamys® instead of other currently available alternatives could create a cost pressure which may have an impact on the local health economy.</p> <p>The license of fluticasone furoate Avamys® is restricted to patients aged over 6 years and does not include nasal polyps.</p>
Formulary status (RAG) and rationale	<p>BLACK</p> <p>Other similarly effective products already on formulary</p>
Implementation requirements:	N/A
Implementation monitoring:	N/A

References

- Summary of Product Characteristics www.medicines.org.uk Fluticasone furoate, 27.5 micrograms/actuation nasal spray (Avamys®).

- Scottish Medicines Consortium assessment 06 march 2009. SMC ID No. 544/09.
https://www.scottishmedicines.org.uk/Press_Statements/544_09_fluticasone_furoate_Avamys_
- UKMI New Medicines Profile -Fluticasone furoate nasal spray.. Issue No. 09/03. May 2009.
<http://www.medicinesresources.nhs.uk/upload/documents/Evidence/Drug%20Specific%20Reviews/NMPAvamysMay09.pdf>
- Scadding GK et al. BSACI (British Society for Allergy and clinical Immunology) guidelines for the management of allergic and non-allergic rhinitis. Clinical and Experimental Allergy, 2008; 38: 19-42