

Tayside D&TC Supplement No. 28

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Produced by Tayside New Medicines Implementation Panel (NMIP)

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Scottish Medicines Consortium (SMC) Advice Issued in July 2003

- Frovatriptan (Migard[®])
- Methyl aminolevulinate cream (Metvix[®])

Frovatriptan (Migard[®]) – migraine

- Frovatriptan is the seventh 5HT₁ agonist ('triptan') and is licensed for the acute treatment of the headache phase of migraine attacks with or without aura.

➤ Not recommended

Points for consideration:

- Frovatriptan is less effective in producing rapid relief of migraine, as measured at two hours, when compared with the most commonly prescribed 5HT₁ agonist (sumatriptan). (The International Headache Society recommends that percentage of patients pain-free at two hours should be the primary end point for clinical trials of acute migraine treatment).
- Frovatriptan is less expensive than other 5HT₁ agonists. However, cost-effectiveness relative to other triptans is unknown.
- Although frovatriptan has a longer elimination half-life than other triptans, significant reduction in frequency of migraine recurrence has not been demonstrated in clinical studies.
- Frovatriptan is not stocked by the hospital pharmacy.
- Evidence-based information on the treatment of [migraine and headache](#) is available on the Bandolier website (www.jr2.ox.ac.uk/bandolier).
- Local advice on the treatment of migraine is currently under development by the Pain Formulary Sub-Group.

The following recommendations relate to HOSPITAL ONLY medicines

Methyl aminolevulinate 160mg/g cream (Metvix[®]) – actinic keratoses (AK) basal cell carcinoma (BCC)

- Methyl aminolevulinate is the first medicine to be marketed in the UK as a topical photosensitiser for use in photodynamic therapy (PDT). It is licensed to treat:
 - actinic keratoses (AK) on the face and scalp when other therapies are considered less appropriate
 - superficial and nodular basal cell carcinoma (BCC) unsuitable for other available therapies.

➤ **Not recommended**

Points for consideration:

Actinic keratoses

- Cryotherapy is commonly used to treat AK, and appears to be much cheaper and as effective as methyl aminolevulinate photodynamic treatment (MAL-PDT) in most instances.
- There is no data to assess the efficacy and tolerability of MAL-PDT versus other topical treatments licensed for treating AK (diclofenac sodium 3% gel, fluorouracil 5% cream).
- MAL-PDT may prove advantageous where size, site or number of AK lesions limits the efficacy and/or acceptability of cryotherapy and other licensed topical preparations. However, the relative cost-effectiveness of MAL-PDT in the management of AK is unknown.
- Guidelines for Topical Photodynamic Therapy are available on the British Association of Dermatologists website (www.bad.org.uk).

Basal cell carcinoma

- Surgical techniques or radiotherapy are currently recommended first-line for the treatment of superficial and nodular BCC.
- Whilst MAL-PDT may improve cosmetic outcomes and reduce treatment related morbidity versus alternative therapies, the relative cost-effectiveness of MAL-PDT in the management of BCC is unknown.
- Guidelines for the Management of BCC are available on the British Association of Dermatologists website (www.bad.org.uk).
- Methyl aminolevulinate cream is not currently stocked by the hospital pharmacy.

Details of local recommendations for new medicines are available on the Tayside D&TC web-site (www.show.scot.nhs.uk/thb/adtc). Information on which new medicines will be considered by the SMC over the next two to three months is available on the SMC web-site (www.scottishmedicines.org.uk) under “Work Programme”.

Contact details:

Local implementation of SMC recommendations is being taken forward by the Tayside Medicines Unit – contact Jan Jones, Pharmaceutical Prescribing Adviser (jan.jones@tpct.scot.nhs.uk) if you have any queries in relation to the introduction of new drugs within NHS Tayside

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