

Medicines with Potential to Impact on Primary Care with no Financial Prediction

| Medication | Rationale for inclusion |
|---|---|
| Sativex® - treatment for symptom improvement in adults with moderate to severe spasticity due to multiple sclerosis. | Sativex® is now included on formulary for Primary Care prescribing following trial of therapy. At present, there is no increase in patients being observed in Primary Care data. |
| Methenamine hippurate – prophylaxis of urinary tract infections (UTI) | This medication is more costly than other UTI medications used for prophylaxis however has the significant advantage of not contributing to antibiotic resistance. Costs would be offset against other medications previously used, however would be overall more costly in terms of prescribing cost. 419 patients have been prescribed methenamine hippurate (July 23 – Dec 23) |
| Dienogest - endometriosis | An alternative medication for use in endometriosis. Costs would be offset against other medications previously used; impacts would be dependent on previous treatments. 14 patients have been prescribed dienogest (July 23 – Dec 23) |
| Anastrozole, tamoxifen and raloxifene – breast cancer chemoprevention | New indication for chemoprevention of breast cancer will increase usage of these medications. Benefit of chemoprevention in reduction in breast cancer cases. |
| Fidaxamycin and Vancomycin – treatment of clostridium difficile | Changes to first-line agents for the treatment of clostridium difficile from metronidazole. Both agents are more expensive than metronidazole, so will have overall cost impact. Benefits in way of more efficacious treatment. |
| Rimegepant (oral calcitonin gene-related peptide (CGRP) receptor antagonist) - treatment of acute migraine and prevention of migraine. | New medications for treatment of acute migraine and prevention of migraine. Costs more than current agents in pathway, cost of use will be offset against cost of previous treatments. |