

Medal Ranking – Hay Fever and Allergic Rhinitis

Medal rankings provide prescribers with a quick overview on cost-effective prescribing in areas where the formulary product choices have little therapeutic difference.

Please routinely prescribe the agents offering greatest overall value to the health economy.

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Summary - Oral low sedation antihistamines

Choice	Cost / 30 days	Recommended dose	Approval
Cetirizine 10mg	£0.76	one daily	 GOLD
Loratadine 10mg	£0.84	one daily	 GOLD
Desloratidine 5mg	£0.95	one daily	 SILVER
Fexofenadine 120mg	£1.69	one daily	 BRONZE
Levocetirizine	£4.36		
Acrivastine 8mg	£21.82		

Fexofenadine 180mg is not licensed for these indications. It should be avoided. There is no additional benefit over cetirizine (NICE 2012)

Drug Ranking Title: Hay fever and allergic rhinitis

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Summary - Steroid Nasal Sprays

Choice	Cost / month	Recommended dose	Approval
Beclometasone dipropionate 50mcg 200 dose pack (do not prescribe other pack sizes)	£2.10	2 sprays /nostril twice daily	GOLD
Mometasone furoate 50 micrograms	£2.12	2 sprays /nostril daily	
Budesonide Aqueous 64mcg 120 dose pack	£4.77	2 sprays /nostril once daily	SILVER
Fluticasone furoate 27.5 micrograms	£6.44	2 sprays / nostril daily	BRONZE
Triamcinolone 55 micrograms/dose nasal spray	£7.39	2 sprays / nostril daily	
Fluticasone propionate 50mcg 150 dose pack (note pack size)	£11.01	2 sprays/ nostril daily	
Fluticasone/ Azelastine (Dymista®) 120 dose			

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Summary - Eye drops

Choice	Cost / month	Recommended dose	Approval
Sodium cromoglicate 2% 13.5mL pack	£2.35	1-2 drops four times a day	
Nedocromil sodium 2% 5ml	£2.86	1-2 drops twice a day. 12 weeks only	
Antazoline 0.5%/ Xylometazoline 0.05% (Otrivine antistin®) 10ml	£3.35	1-2 drops 2-3 times a day. 7 days only	
Olopatadine 5ml	£4.68	1 drop twice a day. 16 weeks only	
Lodoxamide 0.1%	£5.21		
Azelastine	£6.40		
Diclofenac 0.1%	£6.68		
Ketotifen 250micrograms/ml	£7.80		
Emedastine	£7.31		
Epinastine 500micrograms/ml	£9.90		

5ml = 125 drops



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Rationale

To choose the most cost effective version of the above drug categories whilst maintaining maximum patient efficacy.

No significant differences have been found between the antihistamine choices for allergic rhinitis (Carson, et al., 2010)

Patients who pay prescription charges may well be able to buy gold ranked antihistamines over the counter more cheaply than by paying a prescription charge. This will also save practice time and resource and should be encouraged.

Study results indicate nasal steroids have similar clinical efficacy in controlling symptoms of allergic rhinitis, whether intermittent or persistent. Evidence of harm from specific variations in bio-availability is not clear. Prescribers are encouraged to read the guidance on dosing and duration at Clinical Knowledge Summaries (NICE, 2012). Systemic adverse effects caused by intranasal corticosteroids are rare, but systemic absorption may follow nasal administration especially if high doses are used or if treatment is prolonged.

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Illustrative cost saving

If the bronze medal item fexofenadine is replaced by the gold medal item loratadine, in the last financial year the CCG saving would have been £24k.

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Actions

- Do not automatically restart levocetirizine when prescribed in the past, or other silver and bronze ranked drugs
- Use the preferred treatment options for new patients.

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References

Carson, S., Lee, N. & Thakurta, S., 2010. *Drug Class Review: Newer Antihistamines*, Oregon: Oregon Health & Science University.

NICE, 2012. *CKS Allergic rhinitis*. [Online]

Available at: <http://cks.nice.org.uk/allergic-rhinitis#!prescribinginfosub>
[Accessed 09 10 2014].

Drug Tariff Online – February 2017 http://www.ppa.org.uk/ppa/edt_intro.htm

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