

Briefing Paper for Surrey & North West Sussex Area Prescribing Committee (APC) on NICE Technology Appraisals: Local implementation

NICE TA Guidance	Cannabis-based medicinal products NICE guideline NG144		
Available at	https://www.nice.org.uk/guidance/ng144		
Date of issue	11 November 2019	Implementation deadline	

Medicine details	
Name, brand name	Nabilone
Manufacturer	Brown & Burk UK Ltd – available via special order
Licensed indication	BNF indication (SPC not accessible) - Nausea and vomiting caused by cytotoxic chemotherapy, unresponsive to conventional antiemetics (preferably in hospital setting) (under close medical supervision). NICE indication – intractable chemotherapy-induced nausea and vomiting as an add-on treatment. NICE guideline NG144 specifically does not recommend use in children and young people.
Formulation	Capsule
Usual dosage	For Adult Initially 1 mg twice daily, increased if necessary to 2 mg twice daily throughout each cycle of cytotoxic therapy and, if necessary, for 48 hours after the last dose of each cycle, the first dose should be taken the night before initiation of cytotoxic treatment and the second dose 1–3 hours before the first dose of cytotoxic drug, daily dose maximum should be given in 3 divided doses; maximum 6 mg per day.
NICE recommended dosage/schedule	-

Disease and potential patient group	
Brief description of disease	Chemotherapy-induced intractable nausea and vomiting in adults can be defined as persistent nausea and vomiting in adults caused by chemotherapy that does not respond fully to optimised conventional antiemetics,
Potential patient numbers per 100,000	Costing template not available for nabilone.

SUMMARY

NICE recommendation
<ul style="list-style-type: none"> Consider nabilone as an add-on treatment for adults (18 years and over) with chemotherapy-induced nausea and vomiting which persists with optimised conventional antiemetics.

- When considering nabilone for adults with chemotherapy-induced nausea and vomiting, take into account potential adverse drug interactions, for example, with central nervous system depressants and other centrally active drugs.

Cost implications*

Cost of product: 250micrograms, pack of 20 = £150
1mg, pack of 20 = £196

Drug is not excluded from National Tariff, costs are to be borne by Trust.

Annual cost per patient: Costs are likely to be around £190 per cycle

Has dose escalation been considered as part of the NICE costing template?

Dose escalation has already been considered as part of costing.

Costing information/100,000 population and per CCG:

Costing template not available for nabilone

Availability of PAS and details (if appropriate): No

Availability of homecare service (if appropriate): Homecare not routinely available, but possible.

Alternative treatments and cost per patient (per year / per month as appropriate)

Other NICE recommended products:

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Options not reviewed by NICE but used in standard practice:

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Impact to patients

- Nabilone may play a role in treating chemotherapy-induced nausea and vomiting in people who have not had a full response to optimised conventional antiemetics.
- Nabilone will be available for prescription via hospital pharmacies, via special order
- Although anticipated use would be short-term, there is a lack of evidence on longer term adverse effects, such as dependence and development of psychological disorders.

Impact to primary care prescribers

- According to the product licence, prescribing should be in a hospital setting, under close medical supervision only. Therefore it is not anticipated that primary care prescribers should prescribe this drug for this indication.
- Primary care prescriber should ensure that patient medication records include any medicine for which prescribing remains the responsibility of secondary or tertiary care. This will ensure that GP records, which are accessed by other healthcare providers, are a true and accurate reflection of the patient's medication.

Impact to secondary care

- Nabilone should only be prescribed for patients undergoing chemotherapy treatment who have not responded to conventional antiemetics. Therefore prescribing should be limited to those cancer centre providers commissioned to provide services.
- It is likely that some chemotherapy regimens are more highly emetic than others, providers should be able to anticipate those patients who are more likely to require nabilone treatment in advance.
- Nabilone is available via special order – availability and supply could be an issue for providers.
- Nabilone would need to be added chemotherapy regimen prescription cards and prescribing systems.

Impact to CCGs

Impact to CCGs will be non-direct and minimal, as patient numbers should be low.

Implementation

- NICE guideline NG144 is not mandatory and therefore CCGs do not have to ensure implementation within 90 days of publication.
- Starting criteria, monitoring parameters, stopping criteria will be the responsibility of the provider's clinicians.
- It is anticipated that nabilone one of the last options available to patients who are refractory to conventional antiemetics., and patient numbers are likely to be low.

Recommendation to APC

PbRe: No



Colour classification
guidelines

Recommended traffic light status (see attached guidelines):

RED traffic light status is recommended, as nabilone treatment should only be used in a hospital setting, under close medical supervision, as per product licence.

Additional comments:

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References:

1. NICE guideline NG144 Cannabis-based medicinal products, 11 November 2019

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Declaration of Interest:

Nil

Date: 31st December 2019

Reviewed by:

Name, Designation, Organisation

Declaration of Interest:

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Date: XXXX

VERSION CONTROL SHEET

Version	Date	Author	Status	Comment
v.1	31/12/2019	G. Randall		
v.2				
v.3				