

## **PCN to consider including Eplerenone on the formulary for initiation in secondary care for those patients with NYHA HF class II on optimal doses of beta blocker and ACE inhibitor.**

### **Current position**

PCN Policy statement PCN 04-12- Eplerenone for NYHA Class II chronic Heart failure states: The Prescribing Clinical Network recommends that eplerenone should be reserved for a small number of patients that cannot tolerate / have a contraindication to spironolactone which will be used as first line treatment. Eplerenone should be initiated under the supervision of a cardiologist and is class amber\* on the traffic light system.

Initiation of tri-therapy (ACE/ARB, Beta blocker and Eplerenone/Spironolactone) for HF NYHA II-IV patients was discussed at the Cardiac Network meeting on 16/11/12. The following points were agreed:

- Spironolactone to remain first line in the treatment of Class III and IV heart failure after up titrating the Beta blocker and ACE inhibitor to the maximum tolerated dose.
- Eplerenone could be considered in Class II heart failure after up titrating up the Beta blocker and ACE inhibitor to their maximum tolerated dose. It was felt that focussing on optimising the patient's beta blocker and ACE inhibitor was more important. Eplerenone has a license in NYHA II HF whereas spironolactone does not.

SMC Guidance recommended on 8 June 2012:

**Eplerenone (Inspra®)** is accepted for use within NHS Scotland.

**Indication under review:** in addition to standard optimal therapy, to reduce the risk of cardiovascular mortality and morbidity in adult patients with NYHA class II (chronic) heart failure and left ventricular systolic dysfunction (LVEF  $\leq$  30%).

In the pivotal phase IIIb study, addition of eplerenone to standard optimal therapy significantly reduced the composite of death from cardiovascular causes or hospitalisation for heart failure (primary outcome) and both the risk of cardiovascular death and the risk of hospitalisation (secondary outcomes) in patients with mild heart failure (NYHA class II) and LVEF  $\leq$  30%.

**The cardiac network wish the PCN to consider including Eplerenone on the formulary for initiation in secondary care for those patients with NYHA HF class II on optimal doses of beta blocker and ACE inhibitor.**