

## Prescribing and Clinical Effectiveness Bulletin

Volume 2 Number 4

April 2008

### PRESCRIBING RECOMMENDATIONS FOR HAY FEVER: SPRING / SUMMER 2008

#### Recommendations

PACEF recommended choices for hay fever treatment for Spring/Summer 2008 are as follows:-

#### Non-sedating antihistamines

**Cetirizine** (generic) 10mg tablets (first line)

**Loratadine** (generic) 10mg tablets (second line)

#### Nasal Steroids

**Beclometasone** aqueous nasal spray 50 microgram (200 dose)

(or, **Beconase** aqueous nasal spray 50 microgram, which is cheaper than the generic).

Where a once daily formulation is indicated, **budesonide spray (Rhinocort Aqua)** or **mometasone nasal spray (Nasonex)** are advocated in preference to fluticasone (Flixonase/ Nasofan) and triamcinolone (Nasocort) formulations.

#### Anti-allergy Eye Preparation

**Sodium cromoglicate** 2% eye drops, 13.5ml

#### Non-sedating antihistamines

Oral antihistamines relieve ocular symptoms, rhinorrhea, sneezing and nasal irritation but are less effective at clearing nasal blockage. They are probably equally effective but response to a particular agent and tolerability can vary between individual patients.

**There is a considerable price difference between both cetirizine and loratadine and the branded antihistamines (e.g. levocetirizine (Xyzal), fexofenadine (Telfast) and desloratadine (Neoclarityn). Prescribers are asked to reserve levocetirizine, fexofenadine and desloratadine for patients who cannot tolerate or have not responded to other lower cost generic antihistamines. Where an oral solution formulation is required, cetirizine oral solution 5mg in 5ml is advocated first line.**

There is a marked variation in the prices charged for over-the-counter (OTC) cetirizine and loratadine by community pharmacies. Nonetheless, it is possible to buy 30 tablets of either cetirizine or loratadine for £3 to £4 with cetirizine usually costing less than loratadine. Those patients currently prescribed cetirizine or loratadine and paying prescription charges may find it cheaper and more convenient to purchase their preferred antihistamine OTC from their community pharmacist. As fexofenadine,

desloratadine and levocetirizine are all Prescription Only Medicines (POMs), this is only an option with cetirizine and loratidine.

### Cost Comparisons

	Cost for 30 days	
<b>Loratadine (generic) 10mg tablets</b>	<b>£0.99</b>	
<b>Cetirizine (generic) 10mg tablets</b>	<b>£0.50</b>	
Cetirizine (Zirtek Allergy) 10mg tablets	£8.12	
Desloratadine 5mg tablets (Neoclarityn)	£7.04	
Fexofenadine 120mg tablets (Telfast)	£6.23	
Mizolastine 10mg MR tablets (Mizollen)	£5.77	
Levocetirizine 5mg tablets (Xyzal)	£5.20	
	Cost per pack	Cost per 5 yr old (30 days)
Levocetirizine 500 mcg/ml solution (200ml) (Xyzal)	£6.00	£4.50 (2.5ml twice daily)
Loratadine (generic) 5mg/5ml syrup (100ml)	£5.16	£7.74 (5ml daily)
<b>Cetirizine (generic) 5mg/5ml soln (200ml)</b>	<b>£3.07</b>	<b>£2.30 (5ml daily)</b>
Desloratadine 2.5mg/5ml oral soln (100ml) (Neoclarityn)	£7.04	£5.28 (2.5ml daily)

(Preferred agents are highlighted in bold)

### Nasal corticosteroids

Intranasal corticosteroids are the treatment of choice in patients with moderate to severe hay fever as they can relieve all symptoms, including nasal congestion. They have been shown to have greater efficacy than antihistamines in relieving symptoms. Patients should be advised to use them regularly to maximize efficacy and to be aware that maximum efficacy can take several days or weeks to develop. Ideally, steroid nasal sprays should be started two weeks before patients are likely to become symptomatic.

**Beclometasone aqueous nasal spray is recommended first line; the branded Beconase formulation remains considerably lower in cost than the generic product.**

Flixonase, Nasofan, Nasacort and Nasonex are premium priced once daily nasal steroids and should be reserved for use in patients intolerant or insufficiently responsive to twice daily beclometasone formulations. **Where a once daily formulation is indicated, budesonide nasal spray (Rhinocort Aqua) or mometasone nasal spray (Nasonex) are advocated in preference to fluticasone (Flixonase/ Nasofan) and triamcinolone (Nasocort) formulations as they work out cheaper in terms of cost per day.**

Practices are urged to review their use of Flixonase, Nasofan and Nasacort and consider the use of lower cost alternatives.

### Cost Comparison

	Unit cost*	No of doses	Starting dose into each nostril	Cost per day
<b>Beclometasone aqueous nasal spray 50mcg</b>	<b>£3.70</b>	<b>200</b>	<b>2 sprays twice a day</b>	<b>15p</b>
Beclometasone aqueous nasal spray 50mcg (Beconase Hayfever)	£5.36	180		24p
<b>Beconase (beclometasone aqueous nasal spray 50 mcg)</b>	<b>£2.19</b>	<b>200</b>		<b>9p</b>
<b>Nasobec (beclometasone aqueous nasal spray 50mcg)</b>	<b>£2.75</b>	<b>200</b>		<b>11p</b>
Budesonide 64 mcg / spray (Rhinocort Aqua)	£4.49	120	2 sprays once a day	15p
Flunisolide aqueous nasal spray 25mcg / spray (Syntaris)	£5.05	240	2 sprays twice a day	17p
Fluticasone 50mcg /spray (Flixonase) (Nasofan)	£11.69 £10.52	150	2 sprays once a day	31p 28p
Triamcinolone 55 mcg/spray (Nasacort)	£7.39	120	2 sprays once a day	25p
Mometasone 50mcg/spray (Nasonex)	£7.83	140	2 sprays once a day	22p

### Anti-allergy eye-drops

**Generic sodium cromoglicate 2% eye drops are the preferred first line choice.**

### Cost Comparison

Trade name	Generic name	size	Unit cost
-	<b>Sodium cromoglicate 2%</b>	<b>13.5ml</b>	<b>£2.01</b>
Rapitol	Nedocromil 2%	5ml	£5.12
Zaditen	Ketotifen 0.25mg/ml	5ml	£9.75
Alomide	Lodoxamide 0.1%	10ml	£5.48
Emadine	Emedastine 0.5mg/ml	5ml	£7.69
Hay-Crom	Sodium cromoglicate 2%	13.5ml	£2.30
Opatanol	Olopatadine 0.1%	5ml	£4.11
Opticrom	Sodium cromoglicate 2%	13.5ml	£8.36
Optilast	Azelastine 0.05%	8ml	£6.40
Relestat	Epinastine 0.5mg/ml	5ml	£9.90
Vividrin	Sodium cromoglicate 2%	13.5ml	£8.70

(Preferred agents are highlighted in bold)

## **GRAZAX TABLETS**

Grazax is the first oral vaccine licensed for the treatment of grass pollen induced rhinitis and conjunctivitis in adult patients with clinically relevant symptoms who have been diagnosed with a positive skin prick test and/or a specific Immunoglobulin E (IgE) test to grass pollen. It is formulated as a once daily fast melting sublingual tablet containing standardised allergen extract of Timothy grass pollen. Prescribers are reminded of PACEF advice on the use of this product issued in the January 2008 issue of this bulletin:

### **PACEF Recommendation:**

**PACEF remain unconvinced of the clinical and cost-effectiveness of Grazax in comparison to lower cost alternatives such as subcutaneous therapy. As a result of this, Grazax remains RED-RED. It is recognized that there may be a limited role for the agent in adults (aged 18 to 65) who have not responded to optimal doses of conventional treatment for seasonal rhinitis and conjunctivitis and who are deemed unsuitable for subcutaneous therapy. Such patients must have a positive skin prick test or IgE test for grass pollen, specifically Timothy grass. In these circumstances, a specialist wishing to initiate therapy will need to first gain approval from the Exceptional Cases Committee (ECC). If the ECC approve Grazax for use in a specific patient this will be subject to specialist initiation and appropriate shared care arrangements.**

### **Further reading**

'Common questions about hay fever', *MeReC Bulletin* 2004; 14(5): 17 – 20  
'Oral antihistamines for allergic disorders', *DTB* 2002; 40(8): 59 – 62  
'Grass pollen allergy extract', *UKMI New Medicines Profile*, issue number 07/01, February 2007  
*PACE Bulletin*, Volume 2, No1, January 2008

Prices from *Drug Tariff*, April 2008 and *MIMS* March 2008.

Prepared by:  
Gill Kaylor  
Prescribing Adviser

and

Stephen Gibson  
Head of Prescribing and Medicines Management  
Lincolnshire PCT

Tel (01522) 574175 or E-mail: [steve.gibson@lpct.nhs.uk](mailto:steve.gibson@lpct.nhs.uk)

9<sup>th</sup> April 2008