

## InterfacePrescribing & NewTherapies Subgroup





28<sup>th</sup> September 2010

## Voriconazole (VFEND ®) and Posaconazole (Noxafil ® ▼) for the treatment or prevention of invasive aspergillosis infection.

The Interface Prescribing & New Therapies Subgroup of the GMMMG discussed the above drug for the above indication. The recommendation of this subgroup is as follows\*:

The New Therapies Subgroup of the GMMMG considered the use of Voriconazole (VFEND ®) and Posaconazole (Noxafil ®▼) for the treatment or prevention (in immunocompromised patients) of invasive aspergillosis infection.

The group recommends that Voriconazole (VFEND R) or Posaconazole (Noxafil R) may be used as a treatment option when used in line with above indication and in patients intolerant or unresponsive to itraconazole or amphotericin.

Both these agents should be initiated by a specialist familiar with the treatment of aspergillosis (and mucormycosis [zygomycosis] in the case of posaconazole) and are therefore not suitable for primary care prescribing.

Commissioners should be aware that these agents are currently non tariff however both drugs are currently cheaper than liposomal amphotericin B.

Please note that this recommendation only covers the use of these agents in the above indication and NOT unlicensed indications.

Review date: October 2012

<sup>\*</sup> Unless superseded by NICE guidance or substantial and significant new evidence becomes available.

<sup>▼</sup> Newly marketed drugs and vaccines are intensively monitored for a minimum of two years, in order to confirm the risk / benefit profile of the product. Healthcare professionals are encouraged to report all suspected adverse drug reactions regardless of the severity of the reaction.