



January 2015

**Naloxegol (Moventig®▼) for the treatment of opioid-induced constipation (OIC) in adult patients who have had an inadequate response to laxative(s).**

**The New Therapies Subgroup discussed the above at its meeting on the 20th January 2015. The recommendation of this subgroup is as follows:\***

The New Therapies Subgroup of the GMMM considered the use of naloxegol for the treatment of opioid induced constipation (OIC) in patients who have an inadequate response to laxatives.

**The group does not recommend the use of naloxegol for the above indication.**

The group was particularly concerned about:

- The lack of long term safety or efficacy data.
- The lack of comparison data with current standard therapy which includes the use of at least two classes of laxatives prophylactically alongside lifestyle advice.
- The efficacy of naloxegol for the treatment of OIC in patients with cancer pain remains unknown as cancer patients were excluded from the main clinical trials.
- The costs of naloxegol are currently unknown, but they are likely to be higher than standard laxative therapy.

According to set criteria naloxegol was deemed to be a low priority for funding

Review date: January 2017

\* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.

▼ 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.

## Further information / commissioning implications for CCGs

Naloxegol (Moventig®) has now been approved in the EU for use in adults to treat opioid-induced constipation. It will be used in patients in whom treatment with laxatives has failed and is available as tablets (12.5 and 25 mg). The recommended dose is one 25 mg tablet a day. A lower starting dose of 12.5 mg may be prescribed in patients with moderately or severely reduced kidney function or who are taking certain other medicines that increase the effects of naloxegol. Before starting treatment with naloxegol, treatment with laxatives should be stopped [source: EPAR].

It will compete with methylnaltrexone which is already licensed for the same indication, albeit this is a subcutaneous injection.

CCG prescribing of methylnaltrexone [which is the subject of a terminated appraisal by NICE (277)] in the last 3 months is nil. Apart from Wigan CCG [3<sup>rd</sup> quartile], the QIPP laxative indicator for all other CCGs is in the lowest quartile [highest usage].

Despite the NHS price currently being unknown, as a low priority for funding, this recommendation has no financial impact and there are no commissioning implications.

SUPERSEDED BY NICE