December 2013

Tempe®▼(Lidocaine/prilocaine) spray for the topical treatment of Premature Ejaculation (PE)

The Interface Prescribing and New Therapies Subgroup discussed the above at its meeting on the 17th December 2013. The recommendation of this subgroup is as follows:*

The New Therapies Subgroup of the GMMMG considered the use of Lidocaine/Prilocaine (Tempe®▼) spray for treatment of premature ejaculation.

The group does not recommend the use of Lidocaine/Prilocaine (Tempe®) due to unknown long-term safety outcomes (> 24 weeks), no data on cost effectiveness and increased risk of topical adverse effects to both men and their partners.

The group recommends that the underlying cause of PE be treated prior to considering pharmacological therapy, particularly for acquired PE.

Lidocaine/Prilocaine (Tempe®) may be of use in patients whose condition is medically related or as part of a fertility programme however other options should be considered first. A price is not currently available.

Further information that can be used to discuss options with patients can be found here [http://www.patient.co.uk/doctor/premature-ejaculation](http://www.patient.co.uk/doctor/premature-ejaculation)

According to set criteria Tempe® was deemed to be a low priority for funding.

Review date: December 2015

* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.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