



26<sup>th</sup> July 2011

**Nicotinic acid and laropiprant combination tablets  
(Tredaptive®▼) for the treatment of dyslipidaemia**

The New Therapies Subgroup discussed the above drug at a meeting on the 20<sup>th</sup> October 2009 and 26<sup>th</sup> July 2011. The recommendation of this subgroup is as follows:\*

The New Therapies Subgroup of the GMMM considered the use of nicotinic acid and laropiprant combination tablets (Tredaptive®▼) for the treatment of dyslipidaemia in conjunction with a statin.

**The group recommends that the combination of nicotinic acid and laropiprant (Tredaptive®▼) is restricted to initiation by specialists only.**

**The group does not recommend Tredaptive®▼ for monotherapy.**

This recommendation is based on the following rationale:

- Alternative and less costly treatments are available.
- The apparent improved vascular tolerability (i.e. reduced incidence of flushing) must be balanced against an increased risk of gastrointestinal adverse effects, seemingly due to laropiprant.
- The current evidence base only provides comparisons against placebo and nicotinic acid MR (Niaspan®) and therefore does not permit a more reasoned positioning in treatment pathways.

The group recognises that there are currently no relevant guidelines relating to the use of nicotinic acid or its derivatives, including combination products.

The group will review this recommendation if further evidence becomes available, or if a relevant local or national treatment pathway is made available.

Review date: July 2013

\* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.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