



22nd July 2014

Aliskiren (Rasilez®▼) tablets

The New Therapies Subgroup discussed the above drug at a meeting on 22nd July 2014. The recommendation of this subgroup is as follows:*

The New Therapies Subgroup of the GMMMG considered the use of aliskiren (Rasilez®▼) for the treatment of hypertension.

The group does not recommend the use of aliskiren due to the quality of clinical evidence and the absence of outcome or long term trial data. The group also noted the higher cost of aliskiren compared to other antihypertensive agents.

Aliskiren may have a limited role in high-risk patients who are poorly controlled or cannot tolerate conventional antihypertensive agents i.e. used as a fourth line or subsequent antihypertensive drug after use or consideration of alpha-adrenoceptor blocking drugs (e.g. doxazosin), potassium-sparing diuretics, and aldosterone antagonists (e.g. spironolactone).

As per EMA advice a combination of aliskiren with ACE inhibitors or ARBs is now contraindicated in; people with type 1 or type 2 diabetes and in people who do not have diabetes but whose estimated glomerular filtration rate (eGFR) is less than 60 mL/min/1.73 m².

Aliskiren in combination with an ACE inhibitor or an ARB is not recommended in any other patient group.

The group also reminds prescribers of NICE clinical guideline 34, which states that if blood pressure is not controlled despite the use of three drugs in combination or four drugs not tolerated as monotherapy, a practitioner should consider seeking expert advice.

Review date: July 2019

* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.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