NewTherapiesSubgroup

GMMMG Greater Manchester Medicines Management Group NHS

March 2016

Sufentanil sublingual tablet system (Zalviso®▼) for acute moderate to severe post-operative pain relief.

The New Therapies Subgroup discussed the above at its meeting on 15th March 2016. The recommendation of this subgroup is as follows:*

Drug/Indication	Sufentanil sublingual tablet system (Zalviso®▼) for the management of acute moderate to severe post-operative pain in adult patients.
Recommendation	**The group does not recommend the use of Zalviso® for the above indication.** Further information on the reliability and practicality of the device are required before the system can be recommended for use. In addition there is no comparative data against other systems and therefore its place in therapy is difficult to ascertain. A price is not yet available for the system and the group agreed to re-review this recommendation should a price become available. ***According to set criteria Zalviso® was deemed to be a very low priority for funding.***
Clinical Trial Data – Efficacy	The Sufentanil sublingual tablet system- Zalviso® is an innovative, pre-programmed, non-invasive, handheld device designed to deliver a single sufentanil 15 microgram sublingual tablet at a time, on a patient-controlled as needed basis, with a minimum of 20 minutes (lockout interval) between doses, over a period of 72 hours (the maximum recommended treatment duration). Efficacy of Zalviso® has been studied in two placebo controlled phase III trials and one phase III study controlled against an IV PCA with morphine sulphate. A 48 hour treatment period was chosen in all of the phase III studies because that is the typical duration of use of an IV PCA following surgery. Zalviso® was found to be non-inferior when compared to IV morphine sulphate PCA in one phase III study. Patients using the sufentanil system reported more rapid onset of analgesia and patient and nurse ease of care and satisfaction scores were higher than IV PCA MS.
Clinical Trial Data – Safety	The sublingual sufentanil tablet system (Zalviso®) is a new and novel device for drug administration which has not yet demonstrated its reliability and practicability in the broad clinical setting in the UK.

	In total 709 patients have received the sublingual tablet containing 15µg sufentanil during the phase I to III clinical trials program. The duration of exposure in phase II and III trials was from ≥12 hours (544 patients) up to ≥72 hours (15 subjects). Zalviso® has been shown to have a similar adverse effect profile to other opioids, with typical opioid induced adverse effects such as nausea, vomiting, oxygen desaturation and constipation occurring. The Phase II and Phase III trials specifically included looking for adverse effects relating to the oral mucosa, as this is a potential source of site for adverse effects related to the new pharmaceutical form and route of administration for sufentanil. There were no adverse events of local irritation found in any of the trials performed with the sufentanil sublingual system. The EMA also noted in their assessment of the product that no suspected technical failure of the SSTS technology led to overdose, was associated with an adverse event, or led to the administration of more than a single sublingual tablet of sufentanil.
Cost Effectiveness/ Affordability	This cost of the Zalviso® sublingual sufentanil tablet system is not yet known. A typical morphine PCA 50mg/50ml syringe cost between £5 to £6 but this does not include equipment, training or staff costs. Also the PCA syringes need to be discarded every 24 hours once in use to reduce the risks from microbial contamination.
Patient perspective	A sublingual tablet may be preferable to patients than intravenous administration however patients may be concerned about the lack of any long term data with this new device.
Commissioning Impact	As this system is a very low priority for funding, there should be no commissioning nor financial implications. The device is expected to be expensive and any costs will fall wholly within secondary care. Communication with the AHSN indicates that the manufacturer is in negotiations with Central Manchester and Pennine Acute Trusts to be evaluation sites within GM.

** * This recommendation is valid unless it is has been superseded by a NICE TA or national guidance. The recommendation will only be reviewed when there is substantial new data that may change the initial recommendation. For recommendations that are >24 months old please note that there may be new data available and this should be checked prior to prescribing.*

▼ 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.

References available on request.