November 2015

**Tapentadol (Palexia®) prolonged and immediate release tablets for the treatment of acute and chronic severe pain.**

The New Therapies Subgroup of the Greater Manchester Medicines Management Group (GMMMG) discussed the above drug at its meeting on 17th November 2015. The recommendation of this subgroup is as follows:*

The New Therapies Subgroup of the GMMMG considered the use of tapentadol prolonged and immediate release tablets for the treatment of acute and severe chronic pain in adult patients who can be adequately managed only with opioid therapy.

The group recommends the restricted use of tapentadol as a third or fourth line option in those patients who are have failed other therapies and are intolerant to oxycodone.

Other more established therapies should be trialled first and morphine sulphate remains the 1st line treatment option for all patients who require therapy with strong opioid analgesics.

**Tapentadol should only be prescribed or initiated under the advice of a specialist in pain management.**

It should be noted that while tapentadol appears to be well-tolerated, there is a lack of longer term safety data and there are no direct comparative data against transdermal fentanyl. Tapentadol MR is currently more costly than transdermal fentanyl.

According to set criteria tapentadol was deemed to be a medium priority for funding for the patient group identified above.

Review date: November 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* Unless superseded by NICE guidance or substantial and significant new evidence becomes available.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.

References available on request.
**Commissioning Implications for CCGs**

There is significant variation in the uptake of tapentadol across GM CCGs.

**Recommendation**
The recommendation is that this drug is a medium priority for funding within the identified population.

**Future commissioning implications**
There are no particular commissioning implications.

**Formulary and Interface considerations**
Modified-release presentations of this drug were already in the grey list which has now been updated to include the immediate release versions too.

The Interface recommendation will require slight modification to permit prescribing on the advice of a specialist to align with this recommendation.

**Secondary Care implications**
There are no particular implications for Secondary Care. It should be clear in any recommendations to GPs to prescribe that first and second line opioids have been tried or considered prior to recommending tapentadol.

**Major area of risk / implications:** primary care

**Summary of impact**
There should be no significant implications.