

Monthly briefings are produced in order to help members of the media and other interested groups understand the work and advice of the Scottish Medicines Consortium. The full advice for each drug that we have assessed can be found at www.scottishmedicines.org.

SMC has this month accepted the following drugs for use within NHSScotland.

raltegravir (Isentress®)

SMC has accepted raltegravir in combination with other medicines for restricted use as treatment for HIV in adults already being treated but in whom the disease continues to develop.

- The human immunodeficiency virus, better known as HIV, is a virus which attacks the body's immune system. The immune system is the body's natural defence against disease and infection.
- There is no cure for HIV, so treatment involves slowing progression of the virus to help prolong life. Treatment involves a combination of medicines because the HIV virus can adapt quickly to stop one single medicine working. Raltegravir is a new type of anti-HIV medicine known as an integrase inhibitor. It works by blocking a chemical (the enzyme called integrase) that the virus needs to spread.
- Studies have shown that, in patients given raltegravir plus the combination of drugs most likely to work for them, the amount of HIV in the blood had reduced more than in patients given placebo (a dummy treatment that does not contain an active drug) plus the same combination of drugs.
- Information is not yet available about the long-term safety of raltegravir and there were no studies comparing the side effects of raltegravir with those of other anti-HIV drugs in patients already being treated.
- SMC accepted raltegravir in combination with other medicines to treat adults with HIV in whom HIV continues to develop despite therapy. It is restricted to use in patients infected with virus that has become resistant to three types of anti-HIV medicine. Raltegravir is expected to offer good value for money in these patients.

About SMC

The purpose of the Scottish Medicines Consortium (SMC) is to accept for use those newly licensed drugs that clearly represent good value for money to NHSScotland.

SMC analyses information supplied by the drug manufacturer on the health benefits of the drug and justification of its price.

Because the NHS has limited resources, SMC works to make sure that those drugs which represent good value for money are accepted for routine use as quickly as possible so that they can benefit patients.

The Consortium is made up of lead clinicians, pharmacists and health economists together with representatives of health boards, the pharmaceutical industry, the public and the Scottish Government.

■ Contact Details

If you are interested in the work of SMC you can visit our website at:

www.scottishmedicines.org.uk

or contact us at:

Scottish Medicines Consortium
Delta House (8th floor)
50 West Nile Street
Glasgow
G1 2NP

smcsecretariat@nhshealthquality.org

■ Media Contact

Members of the media should contact **Stephen Ferguson** on 07779 329 689

imiquimod 5% cream (Aldara®)

SMC has accepted imiquimod for restricted use in the treatment of actinic keratoses on the face or scalp of adults when other treatments are unsuitable or not effective.

- Actinic keratoses are rough, red, scaly patches of skin that are common in white people over the age of 50 years following long-term exposure to sunlight. It is not a skin cancer, but can develop into one in a small number of cases.
- Treatments available include creams, freezing (known as cryotherapy) or exposure to a special light (photodynamic therapy). Imiquimod is a cream to be applied to the skin.
- A study showed that imiquimod was more effective at clearing actinic keratoses than placebo (a dummy treatment that does not contain an active drug). From the studies performed so far, it is difficult to compare the effectiveness of imiquimod with that of other creams.
- No information about the safety of imiquimod compared with other treatments is available.
- SMC accepted imiquimod for restricted use within NHSScotland because it is an effective and cheaper alternative to photodynamic therapy. It should be used on the advice of dermatologists (doctors who specialise in skin conditions) in the treatment of actinic keratoses on the face or scalp of adults when other treatments are unsuitable or not effective.

SMC decided that the following drugs are not value for money for NHSScotland.

lenalidomide (Revlimid®)

SMC did not recommend lenalidomide in combination with dexamethasone to treat patients with multiple myeloma (a cancer of the blood) who have received at least one previous treatment for this cancer.

- Multiple myeloma is a rare cancer of a type of white blood cell called plasma cells. Patients with multiple myeloma have abnormally high levels of cancerous plasma cells, which can clump together to form tumours in the bone marrow (the organ that produces blood cells). These cells can affect the body's ability to produce new blood cells, and produce high levels of abnormal antibodies (a type of protein) that cannot fight infection properly and directly affect the bone. Patients with multiple myeloma experience bone pain, can develop fractures, suffer from tiredness due to low iron levels in the blood and have repeated infections.
- Multiple myeloma is mainly treated with drugs and radiation. Some people may benefit from a bone marrow transplant (a treatment to restore normal blood cell production). Lenalidomide is a drug which slows the development of multiple myeloma by blocking both the supply of blood to the tumour and the growth of the tumour and by helping the body's natural defence system to fight the cancer.

- Studies have shown that lenalidomide plus dexamethasone slows the progression of the disease compared with dexamethasone alone in patients who had been treated with at least one prior therapy.
- In studies, patients treated with lenalidomide plus dexamethasone were more likely to stop treatment due to pulmonary embolism (a blood clot in the lungs) or neutropenia (low number of white blood cells) than patients treated with dexamethasone only.
- SMC decided not to accept lenalidomide for use within NHSScotland because when the balance of costs and benefits of the treatment was considered, it did not offer good value for money.

For drugs that have not been accepted by SMC, all NHS boards have procedures in place to consider individual requests when a doctor feels the drug would be right for a particular patient. SMC has told the manufacturers why the drug was not accepted and would be pleased to receive any resubmission.