

To: Trust Chief Executives (for onward
cascade as per the attached
distribution list)

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10th July 2018

Dear Colleague

**COST-EFFECTIVE CHOICE: PRESCRIBING LHRH ANALOGUE FOR
PROSTATE CANCER – DECAPEPTYL® SR 11.25MG AND 22.5MG
IM INJECTION**

The HSCB Pharmacy and Medicines Management team in conjunction with Trust Pharmacy colleagues is working with prescribers in primary and secondary care to review medicines use to address cost effectiveness, while at the same time supporting improved quality and safety. As part of this work the HSCB maintains a list of [Cost Effective Choices](#).

There are several LHRH analogues licensed for prostate cancer including:

- Goserelin (Zoladex® 3.6 mg implant and Zoladex® LA 10.8 mg)
- Leuprorelin (Prostap® 3 DCS and Prostap® SR DCS)
- Triptorelin (Decapeptyl® SR 3mg, Decapeptyl® SR 11.25 mg, Decapeptyl® SR 22.5 mg)

The purpose of this letter is to confirm the addition of Decapeptyl® SR 11.25mg and 22.5mg IM injection as the cost effective choice of LHRH analogue for prostate cancer. This decision has been taken following consultation and in agreement with the NicaN Regional Urology Group.

Prescribing Decapeptyl® first line could generate annual savings of up to £190 per patient. Aside from the cost benefits, the following patient factors have been considered:

Patient factors:

- Choosing one cost effective choice will lead to more consistency for patients and will minimise possible patient confusion.
- Choosing 3 or 6 monthly injections will reduce the number of times the patient has to attend at clinic for administration.
- Decapeptyl® is administered via a smaller sized needle (20 gauge) compared to some of the other LHRH analogues and therefore minimises discomfort to patients.

The HSCB will be communicating with primary care prescribers to support implementation of this cost effective choice. In the meantime, I would be grateful if each Trust could consider and take forward the following actions:

Action for HSC Trusts

- Prescribers should be aware of the cost effective choice and consider prescribing/recommending this at in-patient and out-patient clinics.
- Communication to primary care prescribers should specify Decapeptyl® SR rather than 'a LHRH analogue of your choice'
- Prescribers should consider the possibility of switching existing patients at out-patient review where this would be appropriate.

If you require further information in the meantime, please contact Siobhan O'Hare-Smith, HSCB Pharmacy Adviser, at Siobhan.O'Hare-Smith@hscni.net

Thank you for your on-going support with this.

Yours sincerely,



Joe Brogan
Assistant Director of Integrated Care
Head of Pharmacy and Medicines Management

COST EFFECTIVE CHOICE DISTRIBUTION LIST

	To – for Action	Copy		To – for Action	Copy
HSC Trusts			PHA		
CEXs	✓		CEX		✓
Medical Director		✓	Medical Director/Director of Public Health		✓
Directors of Nursing		✓	Director of Nursing/AHPs		✓
Directors of Social Services			PHA Duty Room		
Governance Leads		✓	AD Health Protection		
Directors of Acute Services		✓	AD Service Development/Screening		
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NIMDTA			GPs		
CEX / PG Dean		✓	Community Pharmacists		
QUB			Dentists		
Dean of Medical School		✓	BSO		
Head of Nursing School		✓	Director of Human Resources		
Head of Social Work School			Open University		
Head of Pharmacy School		✓	Head of Nursing Branch		
Head of Dentistry School			DoH		
UU			CMO office		✓
Head of Nursing School		✓	CNO office		✓
Head of Social Work School			CPO office		✓
Head of Pharmacy School		✓	CSSO office		
Head of School of Health Sciences (AHP Lead)			CDO office		
Clinical Education Centre		✓	Safety, Quality & Standards Office		
NIPEC		✓	NI Social Care Council		
GAIN Office		✓	Safeguarding Board NI		
NICPLD		✓	NICE Implementation Facilitator		
NI Medicines Governance Team Leader for Secondary Care		✓	Coroners Service for Northern Ireland		