

## Branded mesalazine modified release (MR) prescribing

In England and Wales £18.5 million is spent annually on the prescribing of generic mesalazine MR and Asacol® MR 400mg and 800mg tablets (NHSBSA Feb-Apr 19). Following a review of the literature, changes have been made to the recommendations on interchangeability of oral mesalazine preparations. The BNF now states that there is no evidence to show that any one oral preparation of mesalazine is more effective than another; however, the delivery characteristics of oral preparations may vary.<sup>1</sup> Caution should be used if switching brands and patients should be advised to report any change in symptoms to the healthcare professional undertaking the review.<sup>2</sup> Mesalazine preparations are compared to support medicine formulary choice. The comparisons also support mesalazine product selection for new patients.

### Key recommendations

- Prescribe mesalazine MR 400mg and 800mg in line with the guidance from the National Institute for Health and Care Excellence (NICE) for ulcerative colitis [NG130] and Crohn's disease [NG129], and the current inflammatory bowel disease guidelines from the British Society of Gastroenterology.<sup>1-3</sup> Prescribe by brand name for all new patients. Currently Octasa® MR (400mg and 800mg tablets), is the least costly brand.<sup>4</sup>
- Review all patients currently prescribed generic mesalazine MR 400mg and 800mg tablets for suitability for switching to branded Octasa® MR 400mg or 800mg tablets. This switch should be tailored to the individual patient, conducted and managed in conjunction and partnership with gastroenterologists.
- Review all patients prescribed Asacol® MR 400mg tablets and MR 800mg tablets by brand name with a view to a potential switch to Octasa® MR 400mg tablets and MR 800mg tablets. This switch should be tailored to the individual patient, conducted and managed in conjunction with gastroenterologists.
- If switching a patient to a different brand of mesalazine, the patient should be advised to report any changes in symptoms to the healthcare professional who undertook the review.<sup>5</sup>
- For new patients, select a cost-effective oral mesalazine preparation suitable for the individual.
- When selecting oral mesalazine brands for medicine formulary inclusion, consider the differences between the preparations such as: licensed uses, age restrictions, pill burden, daily or divided dosing, site of release and treatment costs.

### Costs and savings

Attachment 1 provides cost comparisons for oral mesalazine preparations for maintenance and high doses. Mesalazine 400mg and 800mg gastro-resistant tablets are category C in the Drug Tariff. If prescribed generically, the price paid to pharmacy contractors will depend on the item dispensed and pack size endorsed on the prescription. For mesalazine 400mg gastro-resistant tablets:

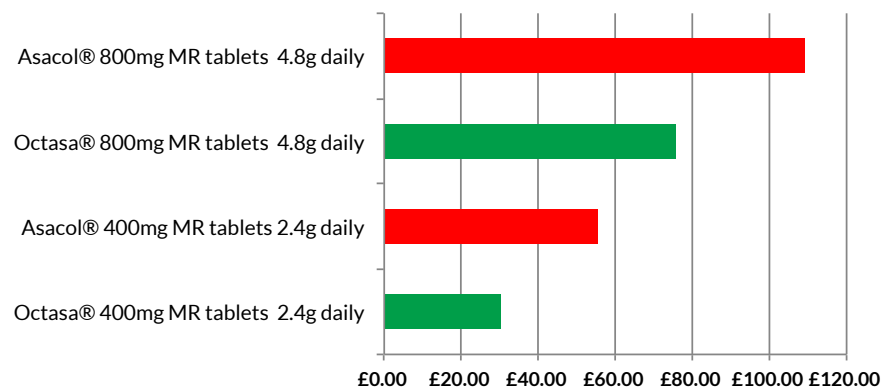
- The payment for the 84 tablets pack is based on Asacol® MR 400mg
- The payment for the 90 tablets pack is based on Octasa® MR 400mg.<sup>6</sup>

For mesalazine 800mg gastro-resistant tablets:

- The payment for the 84 tablets pack is based on Asacol® MR 800mg
- The payment for the 180 tablets pack is based on Octasa® MR 800mg.<sup>6</sup>

**Switching from prescribing Asacol® brand and generic mesalazine MR tablets to Octasa® MR 400mg and MR 800mg tablets could release savings of up to £6.6 million per year in England and Wales. This equates to £10,414 savings per 100,000 patients in England and Wales.**

Chart 1: 28-day cost for prescribing mesalazine MR tablets at the maximum daily dose in an acute exacerbation



## References

1. Joint Formulary Committee. British National Formulary (online) London: BMJ Group and Pharmaceutical Press; July 2019. Available at: <https://bnf.nice.org.uk/> Last accessed 10/07/19.
2. UK Medicines Information (UKMI). What are the differences between different brands of mesalazine tablets? Updated July 2018. Available at: <https://www.sps.nhs.uk/articles/what-are-the-differences-between-different-brands-of-mesalazine-tablets-2/> Last accessed 10/07/19.
3. National Institute for Health and Care Excellence (NICE) Guidance [NG130]. Ulcerative colitis: management. May 2019. Available at: <https://www.nice.org.uk/guidance/ng130> Last accessed 10/07/19.
4. National Institute for Health and Care Excellence (NICE) Guidance [NG129]. Crohn's disease: management. May 2019. Available at: [www.nice.org.uk/guidance/ng129](http://www.nice.org.uk/guidance/ng129) Last accessed 10/07/19.
5. British Society of Gastroenterology consensus guidelines on the management of inflammatory bowel disease in adults. Gut; Published Online First: 27 September 2019. doi: 10.1136/gutjnl-2019-31848. Available at: [www.bsg.org.uk/resource/guidelines-for-the-management-of-inflammatory-bowel-disease-in-adults.html](http://www.bsg.org.uk/resource/guidelines-for-the-management-of-inflammatory-bowel-disease-in-adults.html) Last accessed 10/07/19.
6. NHS Business Services Authority. Drug Tariff. July 2019. Available at: [www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff](http://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff) Last accessed 10/07/19.

Additional resources available	 Bulletin & Implementation resources	<a href="https://www.prescqipp.info/our-resources/bulletins/bulletin-249-branded-mesalazine/">https://www.prescqipp.info/our-resources/bulletins/bulletin-249-branded-mesalazine/</a>
	 Data pack	<a href="https://pdata.uk/#/views/B249_Brandedmesalazineprescribing/FrontPage?iid=1">https://pdata.uk/#/views/B249_Brandedmesalazineprescribing/FrontPage?iid=1</a>

Contact [help@prescqipp.info](mailto:help@prescqipp.info) with any queries or comments related to the content of this document.

This document represents the view of PrescQIPP CIC at the time of publication, which was arrived at after careful consideration of the referenced evidence, and in accordance with PrescQIPP's quality assurance framework.

The use and application of this guidance does not override the individual responsibility of health and social care professionals to make decisions appropriate to local need and the circumstances of individual patients (in consultation with the patient and/or guardian or carer). [Terms and conditions](#)