

pramipexole dihydrochloride monohydrate prolonged release tablets 0.375mg, 0.75mg, 1.5mg, 3.0mg, 4.5mg (equivalent to 0.26mg, 0.52mg, 1.05mg, 2.1mg, 3.15mg pramipexole) (Mirapexin[®]) (No. 580/09) Boehringer-Ingelheim

Product Update

09 October 2009 (Issued 6 November 2009)

The Scottish Medicines Consortium (SMC) has completed its assessment of the above product and advises NHS Boards and Area Drug and Therapeutic Committees (ADTCs) on its use in NHS Scotland. The advice is summarised as follows:

ADVICE: following an abbreviated submission

pramipexole dihydrochloride monohydrate prolonged release tablets 0.375mg, 0.75mg, 1.5mg, 3.0mg, 4.5mg (equivalent to 0.26mg, 0.52mg, 1.05mg, 2.1mg, 3.15mg pramipexole) (Mirapexin[®]) are accepted for use in NHS Scotland for: treatment of the signs and symptoms of idiopathic Parkinson's disease, alone (without levodopa) or in combination with levodopa, i.e. over the course of the disease, through to late stages when the effect of levodopa wears off or becomes inconsistent and fluctuations of the therapeutic effect occur (end of dose or "on off" fluctuations).

In patients for whom the use of pramipexole is appropriate, the prolonged-release formulation can provide the same daily dose as existing immediate release formulations, with the benefit of once-daily rather than thrice-daily dosing, at an equivalent cost.

Advice must be treated in strict confidence until published on the SMC website (<u>www.scottishmedicines.org.uk</u>) on **7 December 2009.**

Advice context:

No part of this advice may be used without the whole of the advice being quoted in full.

This advice represents the view of the Scottish Medicines Consortium and was arrived at after evaluation of the evidence submitted by the company. It is provided to inform the considerations of Area Drug & Therapeutics Committees and NHS Boards in Scotland in determining medicines for local use or local formulary inclusion. This advice does not override the individual responsibility of health professionals to make decisions in the exercise of their clinical judgement in the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

This assessment is based on data submitted by the applicant company up to and including 22 October 2009.

Chairman, Scottish Medicines Consortium