



Berkshire West Area Prescribing Committee Policy Statement

Drug Name	Eflornithine cream (Vaniqa®)
Indication under review	Hirsutism
Policy No:	APC 101
Date of Issue:	March 2015
Review Date:	March 2018
Policy Statement: Eflornithine cream (Vaniqa®) is not recommended for routine use within Berkshire West for the treatment of facial hirsutism in.	
Traffic Light Status	Brown
Key Points considered:	
<ul style="list-style-type: none"> The treatment of hirsutism is a cosmetic procedure which has been low priority for funding since 2005. Eflornithine 11.5% cream offers very little benefit for the management of facial hirsutism. There is limited evidence for efficacy and patient satisfaction with eflornithine. Self-funded cosmetic treatments for reduction in hair growth or hair removal (e.g. shaving, plucking, laser treatment, electrolysis) should be the primary options for the majority of persons with hirsutism. This policy has been produced as a guide for GPs. Evidence and information was carefully considered and consulted upon by clinicians who concluded that this treatment is not a cost effective use of scarce NHS resources. There are situations where this policy may not apply to an individual patient due to their clinical exceptionality. This policy statement does not overrule an individual GPs clinical decision making and therefore each GP would be need to make the final decision on whether treatment is a cost-effective use of their CCG budget. 	
References:	
<p>1. PrescQIPP DROP-List. Bulletin available at: http://www.prescqip.info/resources/viewcategory/171-drop-list</p> <p>2. Summary of Product Characteristics. Vaniqa. Almirall Limited. Last updated 1/5/13, accessed 17/10/13 via http://www.medicines.org.uk/emc/</p> <p>3. Martin KA, Chang RJ, Ehrmann DA, et al. Evaluation and treatment of hirsutism in premenopausal women: an Endocrine Society clinical practice guideline. J Clin Endocrinol Metab 2008; 93(4):1105- 20</p> <p>4. Wolf J.E.J.R., Shander D., Huber F. et al. Randomized, double-blind clinical evaluation of the efficacy and safety of topical eflornithine HCl 13.9% cream in the treatment of women with facial hair. Int J Dermatol 2007; 46(1): 94-98.</p> <p>5. Smith S.R., Piacquadio D.J., Begeer B. et al. Eflornithine cream combined with laser therapy in the management of unwanted facial hair growth in women: a randomised trial. Dermatologic Surgery 2006; 32(10): 1237-1243.</p> <p>6. Jackson J., Caro J.J., Caro G. et al. The effect of eflornithine 13.9% cream on the bother and discomfort due to hirsutism. International Journal of Dermatology 2007; 46(9): 976-981.</p> <p>7. Scottish Medicines Consortium Eflornithine (Vaniqa®) 159/05 August 2005 http://www.scottishmedicines.org.uk/files/eflornithine_cream_resub_159-05.pdf</p> <p>8. Eflornithine Verdict and Summary. MTRAC Midlands Therapeutic Review Advisory Committee. January 2006 Accessed 19/10/13 via www.keele.ac.uk</p> <p>9. NICE Clinical Knowledge Summary. Hirsutism. Accessed 19/10/13 via http://cks.nice.org.uk/hirsutism</p> <p>10. Summary of Product Characteristics. Dianette. Bayer Limited. Last updated 27/8/13. Accessed 17/10/13 via http://www.medicines.org.uk/emc/medicine</p> <p>11. Drug Tariff, November 2013</p>	
Date taken to APC:	4 th March 2015
Date Ratified by MMC on Behalf of the Board:	18 th March 2015

Berkshire West Area Prescribing Policies serve as a guide to clinicians. This does not overrule the clinical or budgetary responsibility of clinicians when considering treatment for individual patients.

Brown	Green	Amber	Red
These drugs have been reviewed and are not considered a cost effective use of scarce NHS resources	Medicines suitable for routine use. Primary care prescribers take full responsibility for prescribing	Medicines that should be initiated by a specialist and can be continued in primary care under a shared care agreement.	Medicines which should be prescribed by specialists only