

Berkshire West Area Prescribing Committee Policy Statement

Drug Name	Ferric maltol (Feraccru®)
Indication under review	Treatment of iron deficiency anaemia (IDA) in patients with inflammatory bowel disease (IBD)
Policy No:	APC 131
Date of Issue:	September 2016
Review Date:	September 2019
Policy Statement: Ferric maltol, Feraccru® is not recommended for the treatment of iron deficiency anaemia in patients with inflammatory bowel disease (IBD).	
Traffic Light Status	Brown
Key Points considered:	
<ul style="list-style-type: none"> • The pivotal phase III trials involved 128 patients with mild to moderate IDA associated with (stable) IBD. After 12 weeks, Feraccru® led to a statistically significant improvement in Hb of 2.25g/dL from baseline to week 12 compared to placebo ($p < 0.0001$) with the median time to normalisation of Hb levels being 57 days. • The studies were relatively small, of short duration and only compared Feraccru with placebo. They included only patients with mild to moderate IDA at baseline so it is not clear how these results would apply to patients with more severe IDA. • A direct comparison study of Feraccru® vs. Ferinject® (n=240) is currently in progress and the APC wished to wait the publication of further studies. • 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	
London Medicines Evaluation Network Review: Ferric Maltol (oral Feraccru®) for the treatment of iron deficiency anaemia in adults with inflammatory bowel disease, May 2016.	
Date taken to APC:	7 th September 2016
Date Ratified by MMC on Behalf of the Board:	21 st September 2016

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