

**South East London Area Prescribing Committee  
Formulary recommendation**

<b>Reference</b>	<b>099</b>
<b>Intervention:</b>	<b>Lymecycline for the treatment of severe papulopustular rosacea and severe ocular rosacea</b> (Lymecycline is a tetracycline based antibiotic)
<b>Date of Decision:</b>	<b>February 2019</b>
<b>Date of Issue:</b>	<b>March 2019</b>
<b>Recommendation:</b>	<b>GREEN – can be prescribed within agreed criteria for use in primary or secondary care</b>
<b>Further Information:</b>	<ul style="list-style-type: none"> <li>• Lymecycline (408mg daily for 6 to 12 weeks) is approved for restricted use in SEL for the treatment of severe papulopustular rosacea and severe ocular rosacea in adults.</li> <li>• Lymecycline is not a first line oral antibiotic option.</li> </ul> <p>In line with the <a href="#">SEL pathway for the management of papulopustular rosacea</a>, the first line oral antibiotic options in both severe papulopustular and severe ocular rosacea are:</p> <ul style="list-style-type: none"> <li>- Oxytetracycline 500mg twice daily for 6-12 weeks</li> <li>- Doxycycline 100mg daily once daily for 6-12 weeks</li> </ul> <ul style="list-style-type: none"> <li>• Lymecycline 408mg daily for 6-12 weeks may be considered as a 2<sup>nd</sup> line oral antibiotic option where there is intolerance to oxytetracycline or doxycycline. Based on information from the presenting clinicians, in practice shorter courses are usually required with lymecycline (treatment course of approximately 3-6 weeks).</li> <li>• In reaching this decision, the Committee considered pragmatic recommendations provided in the NICE <a href="#">Clinical Knowledge Summaries (CKS)</a> guidance and guidance from the <a href="#">Primary Care Dermatology Society</a>.</li> <li>• The Committee also consulted with local infection control committee representatives.</li> <li>• It should be noted that lymecycline is not licensed for use in any form of rosacea. Informed consent to use an unlicensed preparation should be gained from the patient before treatment is started.</li> <li>• The use of lymecycline in a maintenance dosage regimen (taken 2-3 times a week) is <b>not</b> supported by Committee.</li> </ul> <p>Please also refer to the <a href="#">SEL pathway for the management of papulopustular rosacea</a> for further information.</p>
<b>Shared Care/ Transfer of care required:</b>	N/A
<b>Cost Impact for agreed patient group</b>	<ul style="list-style-type: none"> <li>• The net budget impact is likely to be minimal due to almost negligible differences in drug costs between treatments.</li> <li>• Additionally, prescribing will likely be at baseline, given that there is already some established practice across SE London.</li> </ul>
<b>Usage Monitoring &amp; Impact Assessment</b>	<b>Trusts</b>
	<b>CCGs</b>
	<ul style="list-style-type: none"> <li>• Monitor and submit usage and audit data on request to the APC.</li> <li>• Monitor primary care prescribing data.</li> <li>• Audit locally (including locally commissioned dermatology services) to ensure use in line with this recommendation and the local pathway.</li> <li>• Exception reports from GPs if inappropriate prescribing requests are made to primary care.</li> </ul>

<b>Evidence reviewed</b>	<b>References (from evidence evaluation)</b> <ol style="list-style-type: none"> <li>1. NICE Clinical Knowledge Summaries. Rosacea –acne. Last revised Oct 2018. Accessed online via: <a href="https://cks.nice.org.uk/rosacea-acne/">https://cks.nice.org.uk/rosacea-acne/</a>. Last accessed 07/12/18.</li> <li>2. Summary Product of Characteristics. Tetralysal 300mg Hard Capsules. Last updated Aug 2018. Accessed online via: <a href="https://www.medicines.org.uk/emc/product/926/smpc">https://www.medicines.org.uk/emc/product/926/smpc</a> Last accessed 07/12/18.</li> <li>3. Up to date. Management of rosacea. Accessed online via: <a href="https://www.uptodate.com">https://www.uptodate.com</a>. Last accessed 07/12/18.</li> <li>4. Noreen Cowley. Treatment options in the management of rosacea (2013). Accessed online via: <a href="https://onlinelibrary.wiley.com/doi/epdf/10.1002/psb.1113">https://onlinelibrary.wiley.com/doi/epdf/10.1002/psb.1113</a> Last accessed 06/12/18.</li> <li>5. Schaller M et al. Rosacea treatment update: recommendations from the global ROSacea COnsensus (ROSCO) panel. British Journal of Dermatology (2017); 176: pages 465–471.</li> <li>6. Primary Care Dermatology Society. Rosacea – Primary Care Treatment Pathway. Accessed online via: <a href="http://www.pcds.org.uk/ee/images/uploads/general/Rosacea-Guidelines-FINAL.pdf">http://www.pcds.org.uk/ee/images/uploads/general/Rosacea-Guidelines-FINAL.pdf</a>. Last accessed 07/12/18.</li> <li>7. Drug and Therapeutics Bulletin. Time to say goodbye to minocycline? Accessed online via: <a href="https://dtb.bmj.com/">https://dtb.bmj.com/</a>. Last accessed 07/12/18.</li> <li>8. Gether L et al. Incidence and prevalence of rosacea: a systematic review and meta-analysis. British Journal of Dermatology (2018); 179(2): pages 282-289.</li> </ol>
--------------------------	--

**NOTES:**

- a) Area Prescribing Committee recommendations and minutes are available publicly via the [APC website](#).
- b) This Area Prescribing Committee recommendation has been made on the cost effectiveness, patient outcome and safety data available at the time. The recommendation will be subject to review if new data becomes available, costs are higher than expected or new NICE guidelines or technology appraisals are issued.
- c) **Not to be used for commercial or marketing purposes. Strictly for use within the NHS**