South East London Area Prescribing Committee
Formulary recommendation

Reference	**104**
Intervention:	**Rivaroxaban 10mg for the treatment of superficial vein thrombosis (SVT) in adults (off-label use)** (Rivaroxaban is an anticoagulant)
Date of Decision	**May 2019**
Date of Issue:	**June 2019**
Recommendation:	**RED – Prescribing and supply by hospital only**
Further Information	• Rivaroxaban is accepted for use in South East London as an option for the management of superficial vein thrombosis (SVT) in adults where the following criteria are met: – If the thrombosis is >5cm in length **AND** >3cm of a junction with a deep vein, rivaroxaban may be considered at a dose of 10mg daily for 6 weeks (off-label indication) • If the thrombosis is **<3cm** of a junction with a deep vein, the treatment protocol for DVT treatment should usually be followed (e.g. treatment dose low molecular weight heparin followed by warfarin, direct oral anticoagulant at full DVT treatment dose) • The availability of oral rivaroxaban 10mg daily for 6 weeks in this setting is may provide convenience for patients vs. sub-cutaneous low molecular weight heparin (LMWH) injections. Additionally, for housebound patients, the availability of rivaroxaban for SVT has the potential to free up district nursing capacity. • It should be noted that rivaroxaban is **not licensed** for use in this setting. Informed consent should be gained from the patient before treatment is started. • Funding will need to be confirmed at individual Trust level as the complete treatment course for rivaroxaban will be prescribed and supplied by the hospital.
Shared Care/ Transfer of care required:	N/A
Cost Impact for agreed patient group	• The local acute trusts estimate that approximately 140 people across SEL might be suitable for treatment with rivaroxaban 10mg in this setting. • Based on this number, the cost would be approximately £10,500 per annum for SE London. These costs, however, are less than LMWH, which is currently used for this indication. • This is based on the list price for rivaroxaban (£75.60 per patient for 10mg daily for 6 weeks).
Usage Monitoring & Impact Assessment	**Acute Trusts:** • Monitor use and report back to APC when required. • Audit use upon request to ensure use is in line with this recommendation.
	CCGs: • Monitor Epact 2 data. • Monitor exception reports from GPs if inappropriate prescribing requests are made to primary care.

Evidence reviewed	References (from evidence evaluation)
	1. Management of superficial venous thrombosis of the leg. Drug and Therapeutics Bulletin 2017 55 (6) p66-69. 2. Nicolaides A et al. Superficial vein thrombosis. Clin Appl Thromb Hemost 2013; 19: 214–8. 3. Tait C, Baglin T, Watson H. Guidelines on the investigation and management of venous thrombosis at unusual sites. British Journal of Haematology, 2012, 159, 28–38 4. Guyatt G, Akl E, Crowther M et al. Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American College of Chest Physicians. Evidence-Based Clinical Practice Guidelines. CHEST / 141 / 2 / FEBRUARY, 2012 SUPPLEMENT. 5. Xarelto (rivarixaban) tablets, Summary of Product Characteristics. Available online at: https://www.medicines.org.uk/emc/product/3410/smpc (accessed 12/04/2019) 6. Beyer-Westendorf J, Schellong S, Gerlach H. Rivaroxaban Versus Fondaparinux in the Treatment of Superficial Vein Thrombosis - the Surprise Trial. Blood 2016 128:85; 7. Decousus H et al. Fondaparinux for the treatment of superficial-vein thrombosis in the legs. N Engl J Med 2010; 363: 1222–32. 8. Blondon M, Righini M, Bounameaux H et al. Fondaparinux for isolated superficial vein thrombosis of the legs, a cost-effectiveness analysis. Chest 2012 141 (2) p321-329. 9. Fondaparinux sodium (Arixtra). Scottish Medicines Consortium 668/10, December 2010.

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.